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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2016

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  
Do not enter social security numbers on this form as it may be made public  
Information about Form 990 and its instructions is at [www.irs.gov/form990](#)

A For the 2016 calendar year, or tax year beginning 10-01-2016 , and ending 09-30-2017

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final

☒ Return/terminated

☐ Amended return

☐ Application pending

C Name of organization

Smithsonian Institution

Doing business as

Number and street (or P O box if mail is not delivered to street address)Room/suite

1000 Jefferson Drive S W

City or town, state or province, country, and ZIP or foreign postal code

Washington, DC 20560

F Name and address of principal officer

Dr David J Skorton

1000 Jefferson Drive S W

Washington, DC 20560

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

D Employer identification number

53-0206027

E Telephone number

(202) 633-1000

G Gross receipts \$ 1,883,676,484

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) ( ) ◀(insert no ) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www.si.edu

K Form of organization

☐ Corporation ☒ Trust ☐ Association ☐ Other ▶

L Year of formation 1846

M State of legal domicile

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

"Increase and diffusion of Knowledge" is the mission set forth by James Smithson

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

7b Net unrelated business taxable income from Form 990-T, line 34

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d )

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3 )

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ▶43,644,159

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses Subtract line 18 from line 12

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

Part II Signature Block

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

Sign Here

Signature of officer

Albert Horvath Chief Financial Officer

Type or print name and title

2018-03-27

Date

Paid Preparer Use Only

Print/Type preparer's name

Margaret A Bradshaw

Preparer's signature

Margaret A Bradshaw

Date

Check ☐ if self-employed

PTIN

P00501222

Firm's name ▶ KPMG LLP

Firm's EIN ▶ 13-5565207

Firm's address ▶ 1676 International Drive

Phone no (703) 286-8000

McLean, VA 22102

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2016)

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission

"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? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

<b>4a</b>	(Code )	(Expenses \$	497,098,156	including grants of \$	16,392,954 )	(Revenue \$	49,710,292 )
See Additional Data							















<b>4b</b>	(Code )	(Expenses \$	475,252,355	including grants of \$	1,624,249 )	(Revenue \$	63,194,854 )
See Additional Data							

<b>4c</b>	(Code )	(Expenses \$	79,949,362	including grants of \$		(Revenue \$	62,261,182 )
See Additional Data							

<b>4d</b>	Other program services (Describe in Schedule O )					
	(Expenses \$		including grants of \$		(Revenue \$	)

<b>4e</b>	<b>Total program service expenses ▶</b>	1,052,299,873
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**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	<b>1</b> Yes	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	<b>2</b> Yes	
<b>3</b> 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	<b>3</b>	No
<b>4 Section 501(c)(3) organizations.</b> 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	<b>4</b>	No
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	<b>5</b>	No
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	<b>6</b>	No
<b>7</b> 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 	<b>7</b> Yes	
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	<b>8</b> Yes	
<b>9</b> 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	<b>9</b>	No
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	<b>10</b> Yes	
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	<b>11a</b> Yes	
<b>b</b> Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	<b>11b</b> Yes	
<b>c</b> Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	<b>11c</b>	No
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	<b>11d</b>	No
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	<b>11e</b> Yes	
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	<b>11f</b> Yes	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	<b>12a</b> Yes	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	<b>12b</b>	No
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<b>13</b>	No
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b> Yes	
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 	<b>14b</b> Yes	
<b>15</b> 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	<b>15</b> Yes	
<b>16</b> 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 	<b>16</b> Yes	
<b>17</b> 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) 	<b>17</b> Yes	
<b>18</b> 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 	<b>18</b> Yes	
<b>19</b> 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	<b>19</b>	No

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H . . . . .</i>		No
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II . . . . .</i>	Yes	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III . . . . .</i>	Yes	
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J . . . . .</i>	Yes	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a . . . . .</i>	Yes	
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		No
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		No
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		No
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I . . . . .</i>		No
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I . . . . .</i>		No
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II . . . . .</i>		No
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III . . . . .</i>		No
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>		No
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>		No
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>		No
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M . . . . .</i>	Yes	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M . . . . .</i>	Yes	
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I . . . . .</i>		No
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II . . . . .</i>		No
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I . . . . .</i>		No
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 . . . . .</i>	Yes	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>	Yes	
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>		No
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI . . . . .</i>		No
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	Yes	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . . . . .	<b>1a</b>	3,991
<b>b</b>	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . . . . .	<b>1b</b>	0
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	<b>1c</b>	Yes
<b>2a</b>	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 . . . . .	<b>2a</b>	7,156
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b>2b</b>	Yes
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>3a</b>	Yes
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O . . . . .	<b>3b</b>	Yes
<b>4a</b>	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)? . . . . .	<b>4a</b>	Yes
<b>b</b>	If "Yes," enter the name of the foreign country ► PM, GB, AM See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	<b>5a</b>	No
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .	<b>5b</b>	No
<b>c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .	<b>5c</b>	
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . . . .	<b>6a</b>	No
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	<b>6b</b>	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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? . . . . .	<b>7a</b>	Yes
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	<b>7b</b>	Yes
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	<b>7c</b>	No
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	<b>7d</b>	
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<b>7e</b>	No
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	<b>7f</b>	No
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	<b>7g</b>	
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .	<b>7h</b>	
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .	<b>8</b>	
<b>9a</b>	Did the sponsoring organization make any taxable distributions under section 4966? . . . . .	<b>9a</b>	
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . . .	<b>9b</b>	
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter		
<b>a</b>	Gross income from members or shareholders . . . . .	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) . . . . .	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	<b>12b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O . . . . .	<b>13a</b>	
<b>b</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 . . . . .	<b>13b</b>	
<b>c</b>	Enter the amount of reserves on hand . . . . .	<b>13c</b>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year? . . . . .	<b>14a</b>	No
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .	<b>14b</b>	

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent		
<b>2</b>	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?		No
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
<b>6</b>	Did the organization have members or stockholders?		No
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	Yes	
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
<b>a</b>	The governing body?	Yes	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	Yes	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		No
<b>b</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?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
<b>13</b>	Did the organization have a written whistleblower policy?	Yes	
<b>14</b>	Did the organization have a written document retention and destruction policy?	Yes	
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>a</b>	The organization's CEO, Executive Director, or top management official	Yes	
<b>b</b>	Other officers or key employees of the organization	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	Yes	
<b>b</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?	Yes	

**Section C. Disclosure**

**17** List the States with which a copy of this Form 990 is required to be filed: **►**

**18** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

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

**19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

**20** State the name, address, and telephone number of the person who possesses the organization's books and records  
**►** Jean Garvin PO BOX 37012 WASHINGTON, DC 200137012 (202) 633-7218

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

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

Form **990** (2016)

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
<b>1b Sub-Total</b>										
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>								8,298,972	0	1,081,831

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1,458**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	Yes	

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
ClarkSmootRussell A Joint Venture 7500 Old Georgetown Road Bethesda, MD 20814	Construction	62,741,985
Design and Production Inc 7110 Rainwater Place Lorton, VA 22079	Exhibit Design	30,744,002
Grunley Construction Company Inc 888 17th Street NW Washington, DC 20006	Construction	21,563,733
Quinn Evans Architects Inc 2121 Ward Place NW 4 Washington, DC 20037	Construction	16,470,421
Ocean View Development Company 2200 Pennsylvania Ave NW Suite 200W Washington, DC 20037	Rent	16,308,535

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **527**

**Part VIII** Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☒

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	<b>1a</b> Federated campaigns . . .	<b>1a</b>	44,300			
	<b>b</b> Membership dues . . .	<b>1b</b>	23,657,498			
	<b>c</b> Fundraising events . . .	<b>1c</b>	4,860,625			
	<b>d</b> Related organizations	<b>1d</b>	570,395			
	<b>e</b> Government grants (contributions)	<b>1e</b>	968,913,821			
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	176,899,987			
	<b>g</b> Noncash contributions included in lines 1a-1f \$ _____		23,464,657			
	<b>h Total.</b> Add lines 1a-1f . . . . .		1,174,946,626			
Program Service Revenue		Business Code				
	<b>2a</b> Visitors/Members/Emple	900099	53,797,724	28,279,973		25,517,751
	<b>b</b> Subscriptions - magazine	511120	33,153,491	33,153,491		
	<b>c</b> Tours/Classes	900099	13,452,727	13,372,120	80,607	
	<b>d</b> Theater Income	512131	11,965,900	9,700,278	2,265,622	
	<b>e</b> Traveling Exhibitions	712110	2,867,449	2,867,449		
	<b>f</b> All other program service revenue		100,000	0	100,000	0
	<b>g Total.</b> Add lines 2a-2f . . . . .		115,337,291			
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .		19,051,168			19,051,168
	<b>4</b> Income from investment of tax-exempt bond proceeds					
	<b>5</b> Royalties . . . . .		17,641,915			17,641,915
	<b>6a</b> Gross rents	(i) Real (ii) Personal				
	<b>b</b> Less rental expenses					
	<b>c</b> Rental income or (loss)	0 0				
	<b>d</b> Net rental income or (loss) . . . . .					
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities (ii) Other	465,336,652 36,632			
	<b>b</b> Less cost or other basis and sales expenses	394,554,240				
	<b>c</b> Gain or (loss)	70,782,412 36,632				
	<b>d</b> Net gain or (loss) . . . . .		70,819,044 36,632			70,782,412
	<b>8a</b> Gross income from fundraising events (not including \$ 4,860,625 of contributions reported on line 1c) See Part IV, line 18 . . . . .	<b>a</b>	1,492,445			
	<b>b</b> Less direct expenses . . . . .	<b>b</b>	2,290,551			
	<b>c</b> Net income or (loss) from fundraising events . . . . .		-798,106			-798,106
	<b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . .	<b>a</b>				
	<b>b</b> Less direct expenses . . . . .	<b>b</b>				
	<b>c</b> Net income or (loss) from gaming activities . . . . .					
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>	78,366,223				
<b>b</b> Less cost of goods sold . . . . .	<b>b</b>	30,004,718				
<b>c</b> Net income or (loss) from sales of inventory . . . . .		48,361,505 44,086,732 4,274,773				
Miscellaneous Revenue		Business Code				
<b>11a</b> Magazine/Website Adver	541800	11,467,532		11,467,532		
<b>b</b>						
<b>c</b>						
<b>d</b> All other revenue . . . . .		0 0 0			0	
<b>e Total.</b> Add lines 11a-11d . . . . .		11,467,532				
<b>12 Total revenue.</b> See Instructions . . . . .		1,456,826,975 131,496,675 18,188,534 132,195,140				

**Part IX Statement of Functional Expenses**

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

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	166,863	166,863		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22.	11,310,850	11,310,850		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	6,539,490	6,539,490		
<b>4</b> Benefits paid to or for members.				
<b>5</b> Compensation of current officers, directors, trustees, and key employees.	6,260,280	1,346,683	4,558,454	355,143
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	4,237,037	3,765,484	205,340	266,213
<b>7</b> Other salaries and wages.	512,701,339	367,938,302	123,560,462	21,202,575
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	69,664,036	49,816,601	17,441,627	2,405,808
<b>9</b> Other employee benefits.	66,864,705	49,165,855	15,244,909	2,453,941
<b>10</b> Payroll taxes.	34,885,789	24,867,953	8,507,976	1,509,860
<b>11</b> Fees for services (non-employees).				
<b>a</b> Management.				
<b>b</b> Legal.	1,185,543	246,594	938,918	31
<b>c</b> Accounting.	844,481		844,481	
<b>d</b> Lobbying.				
<b>e</b> Professional fundraising services. See Part IV, line 17.	3,005,602			3,005,602
<b>f</b> Investment management fees.	2,836,410		2,836,410	
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	124,509,217	93,875,321	25,893,382	4,740,514
<b>12</b> Advertising and promotion.	6,165,535	5,463,256	457,291	244,988
<b>13</b> Office expenses.	50,687,076	39,443,473	8,700,970	2,542,633
<b>14</b> Information technology.	46,400,560	13,738,481	31,413,265	1,248,814
<b>15</b> Royalties.	246,293	246,238		55
<b>16</b> Occupancy.	137,017,455	111,658,307	23,864,659	1,494,489
<b>17</b> Travel.	14,249,625	10,553,614	2,318,858	1,377,153
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials.				
<b>19</b> Conferences, conventions, and meetings.	4,594,811	2,873,013	1,520,248	201,550
<b>20</b> Interest.	3,624,766	3,624,766		
<b>21</b> Payments to affiliates.				
<b>22</b> Depreciation, depletion, and amortization.	153,765,060	127,593,413	25,962,295	209,352
<b>23</b> Insurance.	1,268,396	445,508	824,718	-1,830
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> Program Production.	49,413,985	45,111,379	3,995,025	307,581
<b>b</b> Research/Subcontract.	33,960,442	33,960,442		
<b>c</b> COLLECTIONS/EQUIPMENT/ACCRUED EXP.	28,333,210	25,993,322	2,260,201	79,687
<b>d</b> Overhead cost recovery on grants.	0	22,554,665	-22,554,665	
<b>e</b> All other expenses.	0	0	0	0
<b>25</b> Total functional expenses. Add lines 1 through 24e.	1,374,738,856	1,052,299,873	278,794,824	43,644,159
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720).	10,830,188	8,312,523		2,517,665

**Part X Balance Sheet**Check if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing . . . . .		407,562,748	<b>1</b>	440,423,714
	<b>2</b>	Savings and temporary cash investments . . . . .		23,446,852	<b>2</b>	15,120,167
	<b>3</b>	Pledges and grants receivable, net . . . . .		288,750,726	<b>3</b>	243,071,341
	<b>4</b>	Accounts receivable, net . . . . .		48,830,546	<b>4</b>	39,110,157
	<b>5</b>	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		0	<b>5</b>	0
	<b>6</b>	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.		0	<b>6</b>	
	<b>7</b>	Notes and loans receivable, net . . . . .		0	<b>7</b>	0
	<b>8</b>	Inventories for sale or use . . . . .		13,084,526	<b>8</b>	13,502,687
	<b>9</b>	Prepaid expenses and deferred charges . . . . .		18,171,247	<b>9</b>	17,578,541
	<b>10a</b>	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	<b>10a</b> 4,508,818,295			
	<b>b</b>	Less: accumulated depreciation	<b>10b</b> 2,166,586,190	2,332,085,530	<b>10c</b>	2,342,232,105
	<b>11</b>	Investments—publicly traded securities . . . . .		414,869,111	<b>11</b>	463,022,103
	<b>12</b>	Investments—other securities. See Part IV, line 11 . . . . .		1,127,208,144	<b>12</b>	1,274,787,874
	<b>13</b>	Investments—program-related. See Part IV, line 11 . . . . .		0	<b>13</b>	
	<b>14</b>	Intangible assets . . . . .		0	<b>14</b>	0
	<b>15</b>	Other assets. See Part IV, line 11 . . . . .		38,922,608	<b>15</b>	40,966,272
<b>16</b>	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .		4,712,932,038	<b>16</b>	4,889,814,961	
<b>Liabilities</b>	<b>17</b>	Accounts payable and accrued expenses . . . . .		286,293,705	<b>17</b>	296,140,780
	<b>18</b>	Grants payable . . . . .		0	<b>18</b>	0
	<b>19</b>	Deferred revenue . . . . .		343,096,650	<b>19</b>	360,175,278
	<b>20</b>	Tax-exempt bond liabilities . . . . .		101,221,443	<b>20</b>	99,653,229
	<b>21</b>	Escrow or custodial account liability. Complete Part IV of Schedule D.		0	<b>21</b>	0
	<b>22</b>	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		0	<b>22</b>	
	<b>23</b>	Secured mortgages and notes payable to unrelated third parties . . . . .		0	<b>23</b>	0
	<b>24</b>	Unsecured notes and loans payable to unrelated third parties . . . . .		100,000,000	<b>24</b>	100,000,000
	<b>25</b>	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		51,380,604	<b>25</b>	49,919,604
	<b>26</b>	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .		881,992,402	<b>26</b>	905,888,891
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>					
	<b>27</b>	Unrestricted net assets		2,651,205,341	<b>27</b>	2,766,324,476
	<b>28</b>	Temporarily restricted net assets . . . . .		670,393,313	<b>28</b>	692,042,888
	<b>29</b>	Permanently restricted net assets		509,340,982	<b>29</b>	525,558,706
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>					
	<b>30</b>	Capital stock or trust principal, or current funds . . . . .		0	<b>30</b>	0
	<b>31</b>	Paid-in or capital surplus, or land, building or equipment fund . . . . .		0	<b>31</b>	0
	<b>32</b>	Retained earnings, endowment, accumulated income, or other funds		0	<b>32</b>	0
	<b>33</b>	<b>Total net assets or fund balances</b> . . . . .		3,830,939,636	<b>33</b>	3,983,926,070
<b>34</b>	<b>Total liabilities and net assets/fund balances</b> . . . . .		4,712,932,038	<b>34</b>	4,889,814,961	

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	1,456,826,975
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	1,374,738,856
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	82,088,119
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	3,830,939,636
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	90,397,275
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	-19,498,960
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	3,983,926,070

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b> 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
<b>b</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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
<b>c</b> 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 in Schedule O	Yes	
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

# Additional Data

**Software ID:** 16000421  
**Software Version:** 2016v3.0  
**EIN:** 53-0206027  
**Name:** Smithsonian Institution

Form 990 (2016)

**Form 990, Part III, Line 4a:**

Research and Collections (SEE SCHEDULE O) RESEARCH AND COLLECTIONS The Smithsonian collections of nearly 155 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 10 million digital records of online material Care of the collections involves the work of registrars, conservators, museum specialists, designers, curators and editors Approximately 145 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 Researchers at the Smithsonian Tropical Research Institute discovered three new species of porcupine fish by comparing fossil jaws and tooth plates collected on expeditions with museum specimens and modern porcupine fish The species were discovered in Panama's Gatun formation and the Socorro Formation in Venezuela Two Guam rail chicks born at the Smithsonian Conservation Biology Institute were repatriated to Guam and released to the wild on the island of Rota in September 2017 The species was nearly driven to extinction by the invasive brown tree snake The release marked the first time since 1985 that there were more Guam rails living in the wild than living in human care There are now approximately 200 Guam rails living in the wild and 116 living in human care The National Museum of American History added baseball equipment used by legendary Major League Baseball players including Willie Mays, Hank Aaron, Ted Williams and Yogi Berra to its sports collection SMITHSONIAN GARDENS ADDED MORE THAN 150 BOXES OF HISTORICAL RECORDS GENERATED BY OR RELATED TO THE W ATLEE BURPEE & CO SEED COMPANY TO THE ARCHIVES OF AMERICAN GARDENS THE NEWLY ADDED COLLECTION CONSISTS OF THOUSANDS OF RECORDS, INCLUDING ACCOUNT BOOKS, SEED-TRIAL RECORDS, OFFICE FILES, SEED CATALOGS AND OTHER ITEMS RELATING TO BURPEE & CO AND ITS COMPETITORS BY 1915 BURPEE WAS THE LARGSET MAIL-ORDER SEED COMPANY IN THE WORLD THE COLLECTIONS SPANS A CENTURY, FROM THE 1870S TO THE 1970S

## Form 990, Part III, Line 4b:

Education, Public Programs and Exhibitions (SEE SCHEDULE O) EDUCATION, PUBLIC PROGRAMS AND EXHIBITIONS The National Museum of the American Indian announced in August an international competition to select a designer for the National Native American Veterans Memorial The competition was open to all, and a jury of Native and non-Native artists, designers, scholars and veterans will chose a winner to design the memorial, which was commissioned by Congress and is slated to open in 2020 The National Museum of African American History and Culture celebrated the first anniversary of its opening on Sept 24, 2017 with free public activities and performances, extended hours and a social media campaign In its inaugural year, the museum welcomed nearly 3 million visitors, increased the number of items in its permanent collection to nearly 40,000 and hosted 46 public programs to help visitors understand historic and contemporary issues The National Museum of African American History and Culture also opened "More Than a Picture," a collection of photographs of a range of American experiences and figures on May 5, 2017 The exhibition encourages visitors to explore the ways photographs reflect important moments in history and shape the understanding of African American experiences It is the first exhibition to be featured in the museum's Special Exhibitions Gallery In June, 2017 the National Museum of American History opened "The Nation We Build Together," a newly transformed space that invites audiences to explore the common values in America It features four exhibitions, "American Democracy A Great Leap of Faith," "Many Voices, One Nation," "Religion in Early America" and "Within These Walls," as well as an interactive program space with hands-on activities, theater presentations and a spotlight on the Greensboro Lunch Counter The Hirshhorn Museum and Sculpture Garden presented the world debut of "Yayoi Kusama Infinity Mirrors" with the highest recorded spring visitation since the museum's opening in 1974 The exhibit allowed the visitor to step into an illusion of infinite space As part of the Hirshhorn's commitment to accessibility, visitors with mobility constraints were able to use virtual reality headsets to experience the exhibition The Smithsonian American Art Museum presented "American Visionary John F Kennedy's Life and Times," an exhibition of images that captured the scope of President John F Kennedy's life The opening of the exhibition was the premiere event in the yearlong Centennial Celebration of the former president

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## **Form 990, Part III, Line 4c:**

Membership (SEE SCHEDULE O) MEMBERSHIP The National Associate program is the Institution's largest and most basic membership program The program provides members with Smithsonian magazine which is published 11 times a year The print and online publication provides in-depth coverage of history, science, nature, the arts and world cultures Smithsonian magazine also hosts the annual Ingenuity Awards, honoring the best and the brightest innovators who are making a difference in the world across a variety of fields "Friends of the Smithsonian" is a higher level membership program for people interested in a deeper 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 exhibits and research The Smithsonian Associates offers unparalleled access to the Smithsonian's world of knowledge through innovative and engaging programming that promotes learning, enrichment and creativity for people of all ages The largest museum-based educational program in the world, Smithsonian Associates annually offers more than 750 seminars, performances lectures, studio art classes and local and regional study tours Performances at Discovery Theater and more than 90 educationally focused summer camps are among the programs that foster the joys of learning for young people and their families

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)										
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former					
Honorable John Roberts Regent	0 5 .....	X							0	0	0	
Honorable Michael Pence Regent	0 5 .....	X							0	0	0	
Honorable Joseph Biden Regent	0 5 .....	X							0	0	0	
Honorable Xavier Becerra Regent	2 0 .....	X							0	0	0	
Honorable John Boozman Regent	2 0 .....	X							0	0	0	
Honorable Thomas Cole Regent	2 0 .....	X							0	0	0	
Honorable Sam Johnson Regent	2 0 .....	X							0	0	0	
Honorable Patrick J Leahy Regent	2 0 .....	X							0	0	0	
Honorable Doris Matsui Regent	2 0 .....	X							0	0	0	
Honorable David Perdue Regent	2 0 .....	X							0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Ms Barbara Barrett Regent	2 0 .....	X						0	0	0
Mr Steve Case Regent	4 0 .....	X						0	0	0
Mr John Fahey Regent	2 0 .....	X						0	0	0
Mr Roger Ferguson Regent	2 0 .....	X						0	0	0
Mr Michael Govan Regent	2 0 .....	X						0	0	0
Dr Shirley Ann Jackson Regent	4 0 .....	X						0	0	0
Mr Robert P Kogod Regent	2 0 .....	X						0	0	0
Dr Risa Lavizzo-Mourey Regent	2 0 .....	X						0	0	0
Mr Michael M Lynton Regent	2 0 .....	X						0	0	0
Mr John McCarter Regent	6 0 .....	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mr David Rubenstein Regent	10 0 .....	X						0	0	0
David Skorton Secretary	50 0 .....			X				787,720	0	60,629
Albert Horvath Under Secretary Finance & Administration/CFO	50 0 .....			X				412,821	0	57,160
Cathy Helm Inspector General	50 0 .....			X				186,833	0	20,248
Judith Leonard General Counsel	50 0 .....			X				198,169	0	36,642
Porter Wilkinson Chief of Staff - Regents	50 0 .....			X				153,952	0	31,716
Patricia Bartlett Acting Asst Secretary, Education & Access	50 0 .....				X			191,033	0	38,353
Nancy Bechtol Director - Facilities	50 0 .....				X			193,204	0	27,671
Deron Burba Chief Information Officer	50 0 .....				X			193,289	0	50,251
Amy Chen Chief Investment Officer	50 0 .....				X			635,703	0	38,399



Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors		
(C)	(D)	(E)

Compensated Employees, and Independent Contractors (A)								(D)	(E)	(F)
Name and Title	Average hours per week (list any hours for related organizations below dotted line)	Position (do not check more than one box, unless person is both an officer and a director/trustee)						Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W- 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Michael Caruso EDITOR IN CHIEF - SMITHSONIAN MAGAZINE	50 0 .....					X		388,933	0	67,824
Melissa Chiu Director - Hirshhorn Museum	50 0 .....					X		398,011	0	66,466
Ryan Dotson Investment Officer	50 0 .....					X		383,474	0	46,365
Michael Giovenco Investment Officer	50 0 .....					X		432,344	0	31,474
Jeffrey Smith Investment Officer	50 0 .....					X		504,411	0	48,954
Kenneth Johnson Former Acting Director - Planning, Management & Budget	50 0 .....						X	182,877	0	9,246
John Kress Former Interim Under Secretary - Science	50 0 .....						X	174,395	0	27,476
Andrew Zino Former Comptroller	50 0 .....						X	196,346	0	24,284

<b>SCHEDULE A</b> (Form 990 or 990-EZ)	<b>Public Charity Status and Public Support</b> Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a> .	OMB No 1545-0047
		<b>2016</b> <b>Open to Public Inspection</b>
Department of the Treasury Internal Revenue Service Name of the organization Smithsonian Institution	Employer identification number 53-0206027	

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.  
The organization is not a private foundation because it is (For lines 1 through 12, check only one box )

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, 8, or 9 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.)

Section A. Public Support							
Calendar year (or fiscal year beginning in) ►		(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")	1,120,530,769	1,190,256,002	1,097,910,208	1,221,449,061	1,174,926,626	5,805,072,666
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	<b>Total.</b> Add lines 1 through 3	1,120,530,769	1,190,256,002	1,097,910,208	1,221,449,061	1,174,926,626	5,805,072,666
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)						0
6	<b>Public support.</b> Subtract line 5 from line 4						5,805,072,666

Section B. Total Support								
Calendar year (or fiscal year beginning in) ►		(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total	
7	Amounts from line 4	1,120,530,769	1,190,256,002	1,097,910,208	1,221,449,061	1,174,926,626	5,805,072,666	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	20,622,076	35,313,796	26,621,870	28,671,980	36,693,083	147,922,805	
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	0	0	0	0	0	
11	<b>Total support.</b> Add lines 7 through 10						5,952,995,471	
12	Gross receipts from related activities, etc. (see instructions)						12	833,896,442
13	<b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . ► <input type="checkbox"/>							

Section C. Computation of Public Support Percentage		
<b>14</b>	Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	<b>14</b> 97.52 %
<b>15</b>	Public support percentage for 2015 Schedule A, Part II, line 14	<b>15</b> 97.81 %
<b>16a</b>	<b>33 1/3% support test—2016.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization. ► <input checked="" type="checkbox"/>	
<b>b</b>	<b>33 1/3% support test—2015.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
<b>17a</b>	<b>10%-facts-and-circumstances test—2016.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
<b>b</b>	<b>10%-facts-and-circumstances test—2015.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
<b>18</b>	<b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ► <input type="checkbox"/>	

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> 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						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
<b>9</b> 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						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> 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 five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	
<b>16</b> Public support percentage from 2015 Schedule A, Part III, line 15	<b>16</b>	

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2016</b> (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	
<b>18</b> Investment income percentage from <b>2015</b> Schedule A, Part III, line 17	<b>18</b>	

**19a 33 1/3% support tests—2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

**b 33 1/3% support tests—2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>	<b>1</b>	
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	<b>2</b>	
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	<b>3a</b>	
<b>b</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)? <i>If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.</i>	<b>3b</b>	
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.</i>	<b>3c</b>	
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	<b>4a</b>	
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>	<b>4b</b>	
<b>c</b> 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)? <i>If "Yes," explain in <b>Part VI</b> 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.</i>	<b>4c</b>	
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b>, 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).</i>	<b>5a</b>	
<b>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	<b>5b</b>	
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	<b>5c</b>	
<b>6</b> 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? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	<b>6</b>	
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	<b>7</b>	
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	<b>8</b>	
<b>9a</b> 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))? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	<b>9a</b>	
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	<b>9b</b>	
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	<b>9c</b>	
<b>10a</b> 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)? <i>If "Yes," answer line 10b below.</i>	<b>10a</b>	
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>	<b>10b</b>	

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>2</b> 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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		
<b>1</b>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>2</b> 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b> By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>1</b>		
<b>2</b>		
<b>3</b>		

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year ( <b>see instructions</b> )		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity ( <b>see instructions</b> ).		
<b>2</b> Activities Test <b>Answer (a) and (b) below.</b>		
<b>a</b> 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? <i>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.</i>		
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>		
<b>3</b> Parent of Supported Organizations <b>Answer (a) and (b) below.</b>		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
<b>2a</b>		
<b>2b</b>		
<b>3a</b>		
<b>3b</b>		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

**Section A - Adjusted Net Income**

	(A) Prior Year	(B) Current Year (optional)
<b>1</b> Net short-term capital gain	<b>1</b>	
<b>2</b> Recoveries of prior-year distributions	<b>2</b>	
<b>3</b> Other gross income (see instructions)	<b>3</b>	
<b>4</b> Add lines 1 through 3	<b>4</b>	
<b>5</b> Depreciation and depletion	<b>5</b>	
<b>6</b> 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)	<b>6</b>	
<b>7</b> Other expenses (see instructions)	<b>7</b>	
<b>8 Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	<b>8</b>	

**Section B - Minimum Asset Amount**

	(A) Prior Year	(B) Current Year (optional)
<b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	<b>1</b>	
<b>a</b> Average monthly value of securities	<b>1a</b>	
<b>b</b> Average monthly cash balances	<b>1b</b>	
<b>c</b> Fair market value of other non-exempt-use assets	<b>1c</b>	
<b>d Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>	
<b>e Discount</b> claimed for blockage or other factors (explain in detail in Part VI)		
<b>2</b> Acquisition indebtedness applicable to non-exempt use assets	<b>2</b>	
<b>3</b> Subtract line 2 from line 1d	<b>3</b>	
<b>4</b> Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	
<b>5</b> Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>	
<b>6</b> Multiply line 5 by .035	<b>6</b>	
<b>7</b> Recoveries of prior-year distributions	<b>7</b>	
<b>8 Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>	

**Section C - Distributable Amount**

		Current Year
<b>1</b> Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>	
<b>2</b> Enter 85% of line 1	<b>2</b>	
<b>3</b> Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>	
<b>4</b> Enter greater of line 2 or line 3	<b>4</b>	
<b>5</b> Income tax imposed in prior year	<b>5</b>	
<b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	<b>6</b>	
<b>7</b> <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2016			
a			
b			
c From 2013. . . . .			
d From 2014. . . . .			
e From 2015. . . . .			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2016 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b Excess from 2013. . . . .			
c Excess from 2014. . . . .			
d Excess from 2015. . . . .			
e Excess from 2016. . . . .			

**Part VI**   **Supplemental Information.**

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

<b>Facts And Circumstances Test</b>

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SCHEDULE D  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.  
► Attach to Form 990.  
Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization  
Smithsonian Institution

Employer identification number  
53-0206027

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.  
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

(a) Donor advised funds

(b) Funds and other accounts

1

Total number at end of year

2

Aggregate value of contributions to (during year)

3

Aggregate value of grants from (during year)

4

Aggregate value at end of year

5

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes

☐ No

6

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes

☐ No

Part II

Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)

☐ Preservation of an historically important land area

☒ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

2a

Total number of conservation easements

2b

Total acreage restricted by conservation easements

2c

Number of conservation easements on a certified historic structure included in (a)

2d

Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

Held at the End of the Year

1

88 25

0

0

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► 0

4

Number of states where property subject to conservation easement is located ► 1

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes

☒ No

6

Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7

Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$ 0

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes

☐ No

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1

► \$

(ii) Assets included in Form 990, Part X

► \$

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenue included on Form 990, Part VIII, line 1

► \$

b

Assets included in Form 990, Part X

► \$

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

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Schedule D (Form 990) 2016

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☒ Public exhibition

b

☒ Scholarly research

c

☒ Preservation for future generations

d

☒ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☒ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	1,368,754,997	1,288,235,067	1,299,208,124	1,191,094,313	1,074,356,857
b Contributions	42,062,815	52,940,072	49,265,188	37,894,600	34,861,990
c Net investment earnings, gains, and losses	166,875,266	99,512,052	2,426,301	130,483,529	139,875,394
d Grants or scholarships					
e Other expenditures for facilities and programs	71,427,379	67,486,808	59,663,483	57,266,941	55,408,994
f Administrative expenses	4,106,359	4,445,386	3,001,063	2,997,377	2,590,934
g End of year balance	1,502,159,340	1,368,754,997	1,288,235,067	1,299,208,124	1,191,094,313

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

44 6 %

b

Permanent endowment

32 3 %

c

Temporarily restricted endowment

23 1 %

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

3a(i)

No

(ii) related organizations

3a(ii)

No

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		12,582,149		12,582,149
b Buildings		3,551,107,101	1,797,528,078	1,753,579,023
c Leasehold improvements		133,470,296	80,152,671	53,317,625
d Equipment		405,946,994	288,905,441	117,041,553
e Other		405,711,755		405,711,755
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				2,342,232,105

Schedule D (Form 990) 2016

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) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____ (A) Other		
(B) Global & Emerging Markets	403,788,259	F
(C) Marketable Alternatives	282,842,201	F
(D) Private Equity & Venture Capital	356,617,644	F
(E) Natural Resources	88,558,167	F
(F) Real Estate	120,470,150	F
(G) Fixed Income	22,511,453	F
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 ) ▶	1,274,787,874	

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. (Column (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)	
Total. (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.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
Environmental remediation obligation	49,919,604
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶	49,919,604

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 FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

☒

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	1,616,083,987
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	90,397,275
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	10,873,340
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	28,527,538
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	129,798,153
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	1,486,285,834
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	2,836,410
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	-32,295,269
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	-29,458,859
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	1,456,826,975

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

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

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	1,463,097,553
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	10,873,340
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	81,632,723
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	92,506,063
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	1,370,591,490
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	2,836,410
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	1,310,956
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	4,147,366
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	1,374,738,856

**Part XIII Supplemental Information**

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

Return Reference	Explanation
See Additional Data Table	

**Part XIII**   **Supplemental Information** *(continued)*

Return Reference	Explanation

**Additional Data**

**Software ID:** 16000421  
**Software Version:** 2016v3.0  
**EIN:** 53-0206027  
**Name:** Smithsonian Institution

**Supplemental Information**

Return Reference	Explanation
Schedule D, Part II, Line 3 Conservation Easements	SMITHSONIAN INSTITUTION DID NOT MODIFY, TRANSFER, RELEASE, EXTINGUISH OR TERMINATE ANY CONSERVATION EASEMENTS DURING THE YEAR

## Supplemental Information

Return Reference	Explanation
Schedule D, Part II, Line 6 CONSERVATION MONITORING POLICIES	<p>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 easement. The organization does not separately track the hours and expenses associated with monitoring the property related to the easement.</p>

Supplemental Information	
Return Reference	Explanation
Schedule D, Part II, Line 9 Conservation easements financial reporting	The Smithsonian Institution's conservation easement does not appear in the Institution's audited financial statements

## Supplemental Information

Return Reference	Explanation
Schedule D, Part III, Line 1a Collections of art - financial statement footnote	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 unrestricted net assets 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.

## Supplemental Information

Return Reference	Explanation
Schedule D, Part III, Line 4 Collections of art - description of collections	<p>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. 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 165 years, the collections are central to the core activities and to the vitality and significance of the Smithsonian.</p>

## Supplemental Information

Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	THE ENDOWMENT INCLUDES APPROXIMATELY 600 INDIVIDUAL ENDOWMENT FUNDS THE ENDOWMENT PROVIDE S 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 FUND 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

Supplemental Information	
Return Reference	Explanation
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	The Smithsonian recognizes the effect of income tax positions only if those positions are more likely than not of being sustained. The Smithsonian does not believe its financial statements include any uncertain tax positions.

## Supplemental Information

Return Reference	Explanation
Schedule D, Part XI, Line 2(d) Other revenues in audited financial statements not in form 990	DEFERRED GAIN ON BUILDING - 3908586 CHANGES IN NET ASSETS OF RELATED ORGANIZATIONS - -7394 2 CHANGE IN MINORITY INTEREST - SNI/SI NETWORKS LLC - 2231900 IMPUTED BENEFIT REVENUE - 50 735025 BAD DEBT EXPENSE/INCREASE IN ALLOWANCE FOR UNCOLLECTIBLE PLEDGES NETTED AGAINST CONTRIB UTION REVENUE ON AUDITED FINANCIAL STATEMENTS - -28274031

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XI, Line 4(b) Other revenues in form 990 not in audited financial statements	DIRECT EXPENSES - FUNDRAISING - -2290551 DIRECT EXPENSES - COST OF GOODS SOLD - -30004718

## Supplemental Information

Return Reference	Explanation
Schedule D, Part XII, Line 2(d) Other expenses in audited financial statements not in form 990	DIRECT EXPENSES - FUNDRAISING - 2290551 DIRECT EXPENSES - COST OF GOODS SOLD - 30004718 IM PUTED BENEFIT COSTS - 50735025 ENVIRONMENTAL REMEDIATION LIABILITY ADJUSTMENT - -1397571 -

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XII, Line 4(b) Other expenses in form 990 not in audited financial statements	INCREASE IN ALLOWANCE FOR UNCOLLECTIBLE PLEDGES NETTED AGAINST CONTRIBUTION REVENUE ON AUDITED FINANCIAL STATEMENTS - 1310956

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No 1545-0047

**2016**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

► **Attach to Form 990. ► See separate instructions.**

► **Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

Name of the organization  
Smithsonian Institution

**Employer identification number**

53-0206027

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

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ **Yes** ☐ **No**

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

**3 Activities per Region** (The following Part I, line 3 table can be duplicated if additional space is needed )

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
( 1 ) See Add'l Data					
( 2 )					
( 3 )					
( 4 )					
( 5 )					
<b>3a</b> Sub-total	0	0			865,883,663
<b>b</b> Total from continuation sheets to Part I	10	688			30,704,417
<b>c Totals</b> (add lines 3a and 3b)	10	688			896,588,080

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to 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.

<b>1</b>	<b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
<b>( 1 )</b>			Russia and Neighboring States	Academic Appointment Stipend	25,690	ETF			
<b>( 2 )</b>									
<b>( 3 )</b>									
<b>( 4 )</b>									

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . **1**
- 3 Enter total number of other organizations or entities . . . . . **0**

**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

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

**Part IV Foreign Forms**

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☒ Yes ☐ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A)* ☒ Yes ☐ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☒ Yes ☐ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☒ Yes ☐ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☒ Yes ☐ No
- 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)* ☒ Yes ☐ No

**Part V Supplemental Information**

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

Return Reference	Explanation
Schedule F, Part I, Line 2 Procedures for monitoring use of grant funds	<p>The Office of Fellowships 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 stated above, however, on occasion, there may be one or two who request 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.</p>

Return Reference	Explanation
Schedule F, Part I, Line 3 foreign travel	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

Return Reference	Explanation
Schedule F, Part I, Line 3 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.

Return Reference	Explanation
Schedule F, 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.

Return Reference	Explanation
<p>Schedule F, Part I, Line 2 PROCEDURES FOR MONITORING USE OF GRANT FUNDS</p>	<p>The Office of Fellowships 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 stated above, however, on occasion, there may be one or two who request 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.</p>

## Additional Data

**Software ID:** 16000421

**Software Version:** 2016v3.0

**EIN:** 53-0206027

**Name:** Smithsonian Institution

### Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean	0	0	,academic appointment stipends		2,308,269
East Asia and the Pacific	0	0	,ACADEMIC APPOINTMENT STIPENDS		988,715
Europe (Including Iceland and Greenland)	0	0	,ACADEMIC APPOINTMENT STIPENDS		2,105,486

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa	0	0	,ACADEMIC APPOINTMENT STIPENDS		83,525
North America (Canada & Mexico only)	0	0	,ACADEMIC APPOINTMENT STIPENDS		267,214
Russia and Neighboring States	0	0	,ACADEMIC APPOINTMENT STIPENDS		138,122

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South America	0	0	,ACADEMIC APPOINTMENT STIPENDS		499,721
South Asia	0	0	,ACADEMIC APPOINTMENT STIPENDS		52,232
Sub-Saharan Africa	0	0	,ACADEMIC APPOINTMENT STIPENDS		96,206

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean	0	0	Investments		736,703,629
East Asia and the Pacific	0	0	Investments		32,479,227
Europe (Including Iceland and Greenland)	0	0	Investments		68,808,258

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
North America (Canada & Mexico only)	0	0	Investments		7,507,038
Sub-Saharan Africa	0	0	Investments		13,129,448
Antarctica	0	0	Program Services	TRAVEL RELATED TO RESEARCH, CONFERENCES AND TRAINING	1,837

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean	0	0	Program Services	TRAVEL RELATED TO RESEARCH, CONFERENCES AND TRAINING	714,736
East Asia and the Pacific	0	0	Program Services	TRAVEL RELATED TO RESEARCH, CONFERENCES AND TRAINING	1,229,799
Europe (Including Iceland and Greenland)	0	0	Program Services	TRAVEL RELATED TO RESEARCH, CONFERENCES AND TRAINING	1,786,266

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa	0	0	Program Services	TRAVEL RELATED TO RESEARCH, CONFERENCES AND TRAINING	122,434
North America (Canada & Mexico only)	0	0	Program Services	TRAVEL RELATED TO RESEARCH, CONFERENCES AND TRAINING	542,598
Russia and Neighboring States	0	0	Program Services	TRAVEL RELATED TO RESEARCH, CONFERENCES AND TRAINING	127,369

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South America	0	0	Program Services	TRAVEL RELATED TO RESEARCH, CONFERENCES AND TRAINING	485,946
South Asia	0	0	Program Services	TRAVEL RELATED TO RESEARCH, CONFERENCES AND TRAINING	142,148
Sub-Saharan Africa	0	0	Program Services	TRAVEL RELATED TO RESEARCH, CONFERENCES AND TRAINING	375,508

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean	7	655	Program Services	RESEARCH FACILITIES	23,512,655
Russia and Neighboring States	1	18	Program Services	JOINT PROGRAM WITH USAID FOR COMMUNITY-BASED TOURISM DEVELOPMENT IN ARMENIA	1,110,212
Sub-Saharan Africa	1	8	Program Services	DEVELOP BIODIVERSITY ACTION PLAN TO CONSERVE AMAZONIAN TROPICAL ECOSYSTEMS	511,342

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South America	1	7	Program Services	DESIGN AND IMPLEMENT A BIODIVERSITY PROGRAM, TROPICAL RESEARCH	516,228
East Asia and the Pacific	0	0	Program Services	TROPICAL RESEARCH, FOREST AND WILDLIFE	241,912

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Academic Appointment Stipends	Central America and the Caribbean	283	2,308,269	Direct Deposit & Checks			
Academic Appointment Stipends	East Asia and the Pacific	35	988,715	Direct Deposit & Checks			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Academic Appointment Stipends	Europe (Including Iceland and Greenland)	86	2,105,486	Direct Deposit & Checks			
Academic Appointment Stipends	Middle East and North Africa	4	83,525	Direct Deposit & Checks			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Academic Appointment Stipends	North America (Canada & Mexico only)	15	267,214	Direct Deposit & Checks			
Academic Appointment Stipends	Russia and Neighboring States	4	112,432	Direct Deposit & Checks			

**Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S**

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Academic Appointment Stipends	South America	36	499,721	Direct Deposit & Checks			
Academic Appointment Stipends	South Asia	4	52,232	Direct Deposit & Checks			

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Academic Appointment Stipends	Sub-Saharan Africa	5	96,206	Direct Deposit & Checks			

eFile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493212011068	
SCHEDULE G (Form 990 or 990-EZ)	Supplemental Information Regarding Fundraising or Gaming Activities				OMB No 1545-0047
Department of the Treasury Internal Revenue Service	Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a ▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a> .				2016
Name of the organization Smithsonian Institution	Employer identification number 53-0206027			Open to Public Inspection	
Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.					
1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.					
a <input checked="" type="checkbox"/> Mail solicitations		e <input checked="" type="checkbox"/> Solicitation of non-government grants			
b <input checked="" type="checkbox"/> Internet and email solicitations		f <input checked="" type="checkbox"/> Solicitation of government grants			
c <input checked="" type="checkbox"/> Phone solicitations		g <input checked="" type="checkbox"/> Special fundraising events			
d <input checked="" type="checkbox"/> In-person solicitations					
2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.					
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)
		Yes	No		
1 Avalon Consulting Group Inc 805 15th Street NW  Washington, DC 20005	Direct Mktg/consultant		No	0	1,834,966
2 Community Counselling Service Co LLC 3349 Highway 138  Wall, NJ 07719	Fundraising Consultant		No	0	300,000
3 Marts & Lundy Inc 1200 Wall St W  Lyndhurst, NJ 070713680	Fundraising Consultant		No	0	192,131
4 Blackbaud Inc Po Box 930256  Atlanta, GA 311930256	Fundraising Consultant		No	0	183,798
5 M & R Strategic Services Group LLC 2120 L St NW  Washington, DC 200371538	Online Advisory Services		No	0	153,304
6 Donor Services Group LLC 1200 Wilshire Blvd  Los Angeles, CA 90017	Telemarketing Services		No	0	98,036
7 Ologie LLC 447 E Main St  Columbus, OH 43215	Fundraising Consultant		No	0	92,000
8 SD&A Teleservices Inc 101 CONTINENTAL BLVD  EL SEGUNDO, CA 902454515	Telemarketing Services		No	0	74,917
9 Kimbia Inc 2500 Bee Caves Rd 2  Austin, TX 787465741	Fundraising Consultant		No	0	48,490
10 Fuszion Collaborative Inc 2312 MOUNT VERNON AVE  Alexandria, VA 223011328	fundraising consultant		No	0	26,145
Total				0	3,003,787
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.					
For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat No 50083H Schedule G (Form 990 or 990-EZ) 2016					

**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.

Revenue		(a) Event #1 National Design Awards Gala (event type)	(b) Event #2 Hirshhorn Museum Gala (event type)	(c) Other events 20 (total number)	(d) Total events (add col (a) through col (c))
	<b>1</b> Gross receipts . . . . .	1,082,915	965,665	4,304,490	6,353,070
	<b>2</b> Less Contributions . . . . .	969,675	895,050	2,995,900	4,860,625
	<b>3</b> Gross income (line 1 minus line 2) . . . . .	113,240	70,615	1,308,590	1,492,445
Direct Expenses	<b>4</b> Cash prizes . . . . .				
	<b>5</b> Noncash prizes . . . . .				
	<b>6</b> Rent/facility costs . . . . .	6,694		60,412	67,106
	<b>7</b> Food and beverages . . . . .	103,925	136,500	504,462	744,887
	<b>8</b> Entertainment . . . . .				
	<b>9</b> Other direct expenses . . . . .	392,571	313,310	772,677	1,478,558
	<b>10</b> Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶				2,290,551
	<b>11</b> Net income summary Subtract line 10 from line 3, column (d) . . . . . ▶				-798,106

**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		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	<b>1</b> Gross revenue . . . . .				
Direct Expenses	<b>2</b> Cash prizes . . . . .				
	<b>3</b> Noncash prizes . . . . .				
	<b>4</b> Rent/facility costs . . . . .				
	<b>5</b> Other direct expenses . . . . .				
	<b>6</b> Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	<b>7</b> Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶				
	<b>8</b> Net gaming income summary Subtract line 7 from line 1, column (d) . . . . . ▶				

**9** Enter the state(s) in which the organization conducts gaming activities \_\_\_\_\_

**a** Is the organization licensed to conduct gaming activities in each of these states?

☐ Yes ☐ No

**b** If "No," explain \_\_\_\_\_

**10a** Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

☐ Yes ☐ No

**b** If "Yes," explain \_\_\_\_\_

- 11** Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity conducted in
- |                                      |            |   |
|--------------------------------------|------------|---|
| <b>a</b> The organization's facility | <b>13a</b> | % |
| <b>b</b> An outside facility         | <b>13b</b> | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ .....

Address ▶ .....

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ ..... and the amount of gaming revenue retained by the third party ▶ \$ .....
- c** If "Yes," enter name and address of the third party

Name ▶ .....

Address ▶ .....

**16** Gaming manager information

Name ▶ .....

Gaming manager compensation ▶ \$ .....

Description of services provided ▶ .....

☐ Director/officer ☐ Employee ☐ Independent contractor

**17** Mandatory distributions

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ .....

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
Schedule G, Part I, Line 2b Line 2b Column (iv) and (v)	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 fundraiser. None of these fundraisers 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. Payments to Avalon Consulting Group of approximately \$1,706,577 are not reported in Part I. This amount is for reimbursements related to fundraising expenses of postage, printing and mailing lists.
Schedule G, Part I, Line 3	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 I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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

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

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization  
Smithsonian Institution

Employer identification number  
53-0206027

Part I

General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . 8

3 Enter total number of other organizations listed in the line 1 table . . . . . 0

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

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) Academic Appointment Stipends	992	11,310,850			
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds	The Office of Fellowships 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 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 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.

Additional Data

Software ID: 16000421  
Software Version: 2016v3.0  
EIN: 53-0206027  
Name: Smithsonian Institution

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Maryland at College Park Office Of The Bursar 1109 Lee Building College Park, MD 207425151	52-6002033	115	46,062				Academic Appt Stipend
University Of Georgia Ofc for Sponsored Programs 310 East Campus Rd Tucker 409 Athens, GA 306021589	58-6001998	115	35,000				Academic Appt Stipend

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Morgan State University 1700 EAST COLD SPRING LANE Baltimore, MD 21251	52-6002033	115	10,000				Academic Appt Stipend
Tuskegee University 1200 W Montgomery RD Tuskegee Institute, AL 360881923	63-0288878	501(c)(3)	10,000				Academic Appt Stipend

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Wisconsin - Madison Research Sponsored Programs 21 North Park Street Suite 6401 Madison, WI 53715	39-6006492	115	12,713				Academic Appt Stipend
Regents of The University of Michigan PO BOX 223131 Pittsburgh, PA 152512131	38-6006309	115	9,888				Academic Appt Stipend

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University Of Illinois Office of Bus Fin Services 1901 S First Street Suite A Champaign, IL 61820	37-6999511	115	21,950				Academic Appt Stipend
Regents of the University of Minnesotal 169 Fraser 106 Pleasant St SE Minneapolis, MN 55455	41-6007513	115	21,250				Academic Appt Stipend

Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Compensation Information

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

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

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization Smithsonian Institution	Employer identification number 53-0206027
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Part I

Questions Regarding Compensation

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

**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 are not 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.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

**Part III**   **Supplemental Information**

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

Return Reference	Explanation
Schedule J, Part I, Line 1a First Class Travel	One officer listed in Part VII, Section A was authorized for first class travel for bona-fide business purposes when the circumstances of their travel met the requirements of the Smithsonian's travel policy for such travel and first 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.
Schedule J, Part I, Line 1a Travel for companions	Travel was authorized for the spouse of a person listed in Part VII, Section A when the circumstances of that travel met the requirements of the Smithsonian's policy for such travel. The Smithsonian's policy for payment of spousal or dependent family member travel permits such payment only in limited, exceptional cases, when there is a demonstrated bona fide business purpose for the travel and the travel furthers the mission of the Smithsonian, beyond mere attendance at an event or the performance of incidental services. Such travel is authorized only if approved by the Office of General Counsel and the Office of the Under Secretary for Finance and Administration/Chief Financial Officer in advance. In the calendar year 2016, four (domestic travel) trips were approved for the spouse of an officer. Each trip was authorized consistent with policy. Because it was determined that there was a bona fide business purpose for each trip, the cost of the trips was not treated as taxable income.

Additional Data

Software ID: 16000421

Software Version: 2016v3.0

EIN: 53-0206027

Name: Smithsonian Institution

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1David Skorton Secretary	(i)	782,386	0	5,334	39,710	20,919	848,349	0
	(ii)	0	0	0	0	- 0	- 0	0
1Albert Horvath Under Secretary Finance & Administration/CFO	(i)	401,018	10,000	1,803	39,710	17,450	469,981	0
	(ii)	0	0	0	0	- 0	- 0	0
2Cathy Helm Inspector General	(i)	186,833	0	0	0	20,248	207,081	0
	(ii)	0	0	0	0	- 0	- 0	0
3Judith Leonard General Counsel	(i)	190,954	5,000	2,215	27,724	8,918	234,811	0
	(ii)	0	0	0	0	- 0	- 0	0
4Porter Wilkinson Chief of Staff - Regents	(i)	144,798	9,000	154	20,302	11,414	185,668	0
	(ii)	0	0	0	0	- 0	- 0	0
5Patricia Bartlett Acting Asst. Secretary, Education & Access	(i)	184,924	4,000	2,109	26,887	11,466	229,386	0
	(ii)	0	0	0	0	- 0	- 0	0
6Nancy Bechtol Director - Facilities	(i)	189,479	3,000	725	26,871	800	220,875	0
	(ii)	0	0	0	0	- 0	- 0	0
7Deron Burba Chief Information Officer	(i)	187,884	5,000	405	27,941	22,310	243,540	0
	(ii)	0	0	0	0	- 0	- 0	0
8Amy Chen Chief Investment Officer	(i)	258,716	375,900	1,087	36,968	1,431	674,102	0
	(ii)	0	0	0	0	- 0	- 0	0
9Virginia Clark Assistant Secretary for advancement	(i)	349,332	8,000	4,697	39,710	17,338	419,077	0
	(ii)	0	0	0	0	- 0	- 0	0
10Bruce Dauer Vice President Finance/Adm - Smithsonian Enterprises	(i)	210,161	66,693	2,436	30,256	3,995	313,541	0
	(ii)	0	0	0	0	- 0	- 0	0
11James Douglas Director - Office of Human Resources	(i)	186,889	2,500	2,172	27,140	4,213	222,914	0
	(ii)	0	0	0	0	- 0	- 0	0
12Jean Garvin Director - Finance & Accounting	(i)	183,936	5,000	1,114	26,942	16,952	233,944	0
	(ii)	0	0	0	0	- 0	- 0	0
13Richard Kurn Acting Provost	(i)	325,292	7,500	4,292	44,660	9,393	391,137	0
	(ii)	0	0	0	0	- 0	- 0	0
14John Lapiana Acting Asst. Secretary, Communication & External Affairs	(i)	191,875	2,000	746	27,619	8,827	231,067	0
	(ii)	0	0	0	0	- 0	- 0	0
15Christopher Liedel President - Smithsonian Enterprises	(i)	433,788	141,755	2,048	39,125	29,919	646,635	0
	(ii)	0	0	0	0	- 0	- 0	0
16Era Marshall Director - Equal Employment & Minority Affairs	(i)	174,019	5,000	0	0	17,786	196,805	0
	(ii)	0	0	0	0	- 0	- 0	0
17Mary Payne Director - Office of Government Relations	(i)	189,794	2,500	756	27,944	11,381	232,375	0
	(ii)	0	0	0	0	- 0	- 0	0
18David Voyles Director - Planning, Management & Budget	(i)	176,162	5,000	0	7,008	8,465	196,635	0
	(ii)	0	0	0	0	- 0	- 0	0
19Michael Caruso EDITOR IN CHIEF - SMITHSONIAN MAGAZINE	(i)	301,470	86,099	1,364	39,125	28,699	456,757	0
	(ii)	0	0	0	0	- 0	- 0	0

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
21Melissa Chiu Director - Hirshhorn Museum	(i)	394,585	3,000	426	39,710	26,756	464,477	0
	(ii)	0	0	0	0	0	0	0
1Ryan Dotson Investment Officer	(i)	139,462	243,903	109	20,199	26,166	429,839	0
	(ii)	0	0	0	0	0	0	0
2Michael Giovenco Investment Officer	(i)	163,003	269,135	206	22,711	8,763	463,818	0
	(ii)	0	0	0	0	0	0	0
3Jeffrey Smith Investment Officer	(i)	181,365	322,877	169	26,807	22,147	553,365	0
	(ii)	0	0	0	0	0	0	0
4Kenneth Johnson Former Acting Director - Planning, Management & Budget	(i)	177,877	5,000	0	8,894	352	192,123	0
	(ii)	0	0	0	0	0	0	0
5John Kress Former Internm Under Secretary - Science	(i)	161,395	13,000	0	8,377	19,099	201,871	0
	(ii)	0	0	0	0	0	0	0
6Andrew Zino Former Comptroller	(i)	194,846	1,500	0	7,613	16,671	220,630	0
	(ii)	0	0	0	0	0	0	0

Schedule K  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Smithsonian Institution

Supplemental Information on Tax Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.  
► Attach to Form 990.  
► Information about Schedule K (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number  
53-0206027

Part I Bond Issues											
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A Fairfax County Economic Development Authority	54-0787833	30382ECZ5	12-03-2003	77,545,000	To construct a museum		X		X		X
B District of Columbia	53-6001131	2548397S6	04-29-2010	33,825,749	Refunding of 1997 Bonds		X		X		X

Part II		Proceeds							
		A		B		C		D	
1	Amount of bonds retired . . . . .	0		9,470,000					
2	Amount of bonds legally defeased . . . . .	0		0					
3	Total proceeds of issue . . . . .	77,545,000		33,825,749					
4	Gross proceeds in reserve funds . . . . .	0		0					
5	Capitalized interest from proceeds . . . . .	0		0					
6	Proceeds in refunding escrows . . . . .	0		0					
7	Issuance costs from proceeds . . . . .	530,475		612,994					
8	Credit enhancement from proceeds . . . . .	6,161		0					
9	Working capital expenditures from proceeds . . . . .	0		0					
10	Capital expenditures from proceeds . . . . .	77,008,364		0					
11	Other spent proceeds . . . . .	0		33,212,755					
12	Other unspent proceeds . . . . .	0		0					
13	Year of substantial completion . . . . .	2003		2010					
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue? . . . . .		X	X					
15	Were the bonds issued as part of an advance refunding issue? . . . . .		X		X				
16	Has the final allocation of proceeds been made? . . . . .	X		X					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds? . . . . .	X		X					

Part III Private Business Use												
					A		B		C		D	
					Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? . . . . .					X		X				
2	Are there any lease arrangements that may result in private business use of bond-financed property? . . . . .					X		X				

**Part III Private Business Use** (Continued)

	<b>A</b>		<b>B</b>		<b>C</b>		<b>D</b>	
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? . . . . .		X	X					
<b>b</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?			X					
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? . . . . .		X		X				
<b>d</b> 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?								
<b>4</b> 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 . . . . . ▶	0 %		0 %					
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government . . . . . ▶	0 %		9 62 %					
<b>6</b> Total of lines 4 and 5 . . . . .	0 %		9 62 %					
<b>7</b> Does the bond issue meet the private security or payment test? . . .		X		X				
<b>8a</b> Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued? . . . . .		X		X				
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . .								
<b>c</b> If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? . . . . .								
<b>9</b> Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? . . . . .	X		X					

**Part IV Arbitrage**

	<b>A</b>		<b>B</b>		<b>C</b>		<b>D</b>	
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
<b>1</b> Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? . . . .		X		X				
<b>2</b> If "No" to line 1, did the following apply? . . . .								
<b>a</b> Rebate not due yet? . . . . .		X		X				
<b>b</b> Exception to rebate? . . . . .	X		X					
<b>c</b> No rebate due? . . . . .		X		X				
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed . . . . .								
<b>3</b> Is the bond issue a variable rate issue? . . . . .	X			X				
<b>4a</b> Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X				
<b>b</b> Name of provider . . . . .								
<b>c</b> Term of hedge . . . . .								
<b>d</b> Was the hedge superintegrated? . . . . .								
<b>e</b> Was the hedge terminated? . . . . .								

**Part IV Arbitrage** (Continued)

	<b>A</b>		<b>B</b>		<b>C</b>		<b>D</b>	
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
<b>5a</b> Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X				
<b>b</b> Name of provider . . . . .								
<b>c</b> Term of GIC . . . . .								
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? . . . . .								
<b>6</b> Were any gross proceeds invested beyond an available temporary period?		X		X				
<b>7</b> Has the organization established written procedures to monitor the requirements of section 148? . . . .	X		X					

**Part V Procedures To Undertake Corrective Action**

	<b>A</b>		<b>B</b>		<b>C</b>		<b>D</b>	
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X					

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

Return Reference	Explanation
Schedule K, Part I, Column (f) Bond Issues, Line B	The issue date of the current refunded bonds was January 1, 1998

Return Reference	Explanation
Schedule K, Part III, Line 5 Private Business Use, Column B	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 and theater within the space financed by this bond issue. The private business use for the current year was in excess of 5%. However, the private business use is being monitored and will remain under 5% for the entire measurement period (1998-2028).

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SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.  
►Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization  
Smithsonian Institution

Employer identification number  
53-0206027

Part 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 determining noncash contribution amounts
1	Art—Works of art . . . . .	X	2,236	NONE
2	Art—Historical treasures . . . . .			
3	Art—Fractional interests . . . . .	X	2	NONE
4	Books and publications . . . . .			
5	Clothing and household goods . . . . .			
6	Cars and other vehicles . . . . .			
7	Boats and planes . . . . .			
8	Intellectual property . . . . .			
9	Securities—Publicly traded . . . . .	X	289	20,297,070
10	Securities—Closely held stock . . . . .			Market value
11	Securities—Partnership, LLC, or trust interests . . . . .			
12	Securities—Miscellaneous . . . . .			
13	Qualified conservation contribution—Historic structures . . . . .			
14	Qualified conservation contribution—Other . . . . .			
15	Real estate—Residential . . . . .			
16	Real estate—Commercial . . . . .			
17	Real estate—Other . . . . .			
18	Collectibles . . . . .	X	7,753	NONE
19	Food inventory . . . . .			
20	Drugs and medical supplies . . . . .			
21	Taxidermy . . . . .			
22	Historical artifacts . . . . .	X	2,033	NONE
23	Scientific specimens . . . . .	X	109,054	NONE
24	Archeological artifacts . . . . .	X	37	NONE
25	Other ► (Goods )	X	52	3,167,587
26	Other ► (Archival CF )	X	1,526	Market value
27	Other ► (Archival LF )	X	561	NONE
28	Other ► (Archival item )	X	2,386	NONE
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement				29 69
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?				30a Yes No
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?				31 Yes
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?				32a Yes
b If "Yes," describe in Part II				
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II				

**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.

Return Reference	Explanation
Schedule M, Part I, Line 33	In accordance with professional practice, as allowed by SFAS 116, the Smithsonian does not assign value to collection items acquired by donation
Schedule M, Part I, Line 3 Art	Fractional Interests One at 20%, one at 50%
Schedule M, Part I, Line 32b Third parties used to solicit, process, or sell noncash contributions	Although the Smithsonian acquires collection with the good faith intention of retaining them for an indefinite period of time, prudent collections management include 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 O**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service  
Name of the organization  
Smithsonian Institution

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

**2016**

**Open to Public Inspection**

**Employer identification number**

53-0206027

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part VI, Line 1a Delegate broad authority to a committee	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.

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part VI, Line 7a Members or stockholders electing members of governing body	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 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.

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	The Form 990 return is reviewed by the Director of Finance and Accounting, the Office of General Counsel, Chief Financial Officer and the Secretary of the Smithsonian. The return is also reviewed by an independent accounting firm. After this review process, the 990 is made available to the full Board for its review and comment. The Audit & Review Committee conducts a final review of the return at a regularly scheduled Committee meeting prior to its filing.

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	<p>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 laws. 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 of 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.</p>

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	<p>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 Regent's 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.</p>

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15b Process to establish compensation of other employees	See explanation for Part VI, Line 15a

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 19 Required documents available to the public	The Smithsonian makes its governing documents, statement of values and code of ethics, and audited financial statements available on its public website ( <a href="http://www.si.edu">www.si.edu</a> ) Documents may also be viewed at the Office of Finance and Accounting or mailed

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
Form 990, Part VIII, Line 2f Other Program Service Revenue	Collect - Total Revenue 100000, Related or Exempt Function Revenue , Unrelated Business Revenue 100000, Revenue Excluded from Tax Under Sections 512, 513, or 514 ,

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	CHANGE IN RELATED PARTY NET ASSETS - -73942, DEFERRED GAIN ON BUILDING - 3908586, CHANGE I N MINORITY INTEREST - SNI-SI NETWORKS LLC - 2231900, ENVIRONMENTAL REMEDIATION OBLIGATION FASB ASC 410-20 - 1397571, BAD DEBT RECORDED FOR PRIOR YEAR PLEDGE - -26963075,

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
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

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
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

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, Part IV, Line 12b AUDITED FINANCIAL STATEMENTS	THE SMITHSONIAN'S OPERATIONS FUNDED THROUGH FEDERAL APPROPRIATIONS ARE INCLUDED IN THE U S GOVERNMENT'S CONSOLIDATED AUDITED FINANCIAL STATEMENTS

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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.      ► Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization  
Smithsonian Institution

Employer identification number  
53-0206027

Part I

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) 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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)Clay Fellowships Charitable Trust 10 Memorial Boulevard  Providence, RI 02903 04-3560268	Support of Smithsonian Astrophysical Observatory	MA	501(c)(3)	Type III-O	NA		No
(2)Smithsonian UK Charitable Trust	Advance the work of the Smithsonian Institution worldwide	UK	501(c)(3)	7	Smithsonian Institution	Yes	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No
<b>(1)</b> Charitable Remainder Trusts (2) 1000 Jefferson Drive SW Washington, DC 20560	Charitable Remainder Trust	WA	NA	Trust				Yes	
<b>(2)</b> Charitable Remainder Trusts (2) 1000 Jefferson Drive SW Washington, DC 20560	Charitable Remainder Trust	MA	NA	Trust				Yes	
<b>(3)</b> Charitable Remainder Trusts (1) 1000 Jefferson Drive SW Washington, DC 20560	Charitable Remainder Trust	MI	NA	Trust				Yes	
<b>(4)</b> Charitable Remainder Trusts (5) 1000 Jefferson Drive SW Washington, DC 20560	Charitable Remainder Trust	NY	NA	Trust				Yes	
<b>(5)</b> Charitable Remainder Trusts (4) 1000 Jefferson Drive SW Washington, DC 20560	Charitable Remainder Trust	VA	NA	Trust				Yes	

**Part V Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule**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?

	Yes	No
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .		No
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .		No
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .	Yes	
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .		No
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .		No
<b>f</b> Dividends from related organization(s) . . . . .		No
<b>g</b> Sale of assets to related organization(s) . . . . .		No
<b>h</b> Purchase of assets from related organization(s) . . . . .		No
<b>i</b> Exchange of assets with related organization(s) . . . . .		No
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .		No
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .		No
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .		No
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .		No
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .		No
<b>o</b> Sharing of paid employees with related organization(s) . . . . .		No
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .		No
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .		No
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .		No
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .		No

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) SMITHSONIAN UK CHARITABLE TRUST	C	154,633	CASH

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.

[illegible]

**Part VII**   **Supplemental Information**

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