Department of the Treasury Internal Revenue Service

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

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

Open to Public

OMB No. 1545-0047

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

A	For th	e 2015 calendar year, or tax year beginning OCT 1, 2015 and endi	ing SE	P 30,	2016			
В	Check if applicab	C Name of organization	\neg	D Emp	loyer identifi	ication numl	ber	
		e:		•	•			
	Addre	Smithsonian Institution						
	Name chang	Doing business as			53-020	06027		
	Initial return		m/suite	E Telep	hone numbe	er		
	Final return	1000 Toffenson Drives G W				33-1000		
	termir		Ī	G Gross	receipts \$	1,62	28,33	0,534.
	Amen	ded Washington DG 20560	Ī	H(a) Is t	his a group r			
	Application				subordinates		es 🗆	X No
	pendi	1000 Jefferson Dr, SW, Washington, DC 20560			all subordinates i			No
$\overline{\mathbf{I}}$	Tax-ex	empt status: X 501(c)(3) 501(c) () ((insert no.) 4947(a)(1) or □	527		No," attach a			
		te: www.si.edu			oup exemption	=		,
					n: 1846			cile:
	art I	Summary				class or logic		
	T 1	Briefly describe the organization's mission or most significant activities: "Increase	and di	iffusio	n of			
Governance	1 .	knowledge" is the mission set forth by James Smithson.						
ı.	2	Check this box if the organization discontinued its operations or disposed c	of more	than 250	% of its net a	eeete		
Ver	3	Number of voting members of the governing body (Part VI, line 1a)			1 _			17
ၓ	4	Number of independent voting members of the governing body (Part VI, line 1b)						17
ფ	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)						6935
Activities	6				·····			6223
∌		T. I			·····	1	7 62	7,639.
ĕ		Net unrelated business taxable income from Form 990-T, line 34				_		4,784.
-	 	Tet unrelated business taxable income norm of orm 550-1, line 54	<u> </u>	Prior		Curre		
		Contributions and grants (Part VIII, line 1h)			7,910,208.	 		9,061.
ne	8		7,910,200. 7,979,707.	 		7,404.		
Revenue		Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,788,543.	 		8,762.	
æ	10				5,059,3 1 3.	 		5,155.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			4,737,828.	†		
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)				 		0,382.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			7,989,418. 0.	_	.0,54	2,921. 0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		61	- •	6.5	2 60	6,354.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			4,850,732.	 		
en	loa	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 50,181,886.			6,348,145.		3,12	0,161.
Ä				E 0	1 225 760	6.3	1 22	1 725
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			1,335,768.	 	631,334,735. 1,307,694,171.	
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			0,524,063.	 	_	6,211.
- 0	19	Revenue less expenses. Subtract line 18 from line 12	_		4,213,765.			<u> </u>
Net Assets or Find Balances		Total accests (Doct V. Free 40)			Current Year 6,291,473.		of Yea	
SSE	20	Total assets (Part X, line 16)			<u> </u>	1		2,038.
let /	21	Total liabilities (Part X, line 26)	···		7,713,081.	 	_	2,402.
P	22 art II	Net assets or fund balances. Subtract line 21 from line 20 Signature Block		3,03	8,578,392.	3,00	, , , , ,	9,636.
		alties of perjury, I declare that I have examined this return, including accompanying schedules and	d etatama	inte and t	a the best of m	v knowlodgo s	nd hali	of it ic
		ct, and complete. Declaration of preparer (other than officer) is based on all information of which p				iy kilowicuye a	illu beli	υι, It IS
uu	, 00116	1. and complete. Declaration of preparer (other than officer) is based on an information of which p	Jiepaiei i	lias ally ki	iowieuge.			
٥: -		Signature of officer			Date			
Sig		Albert Horvath Chief Financial Officer			Duto			
He	re	Type or print name and title						
			I D:	ate	Ohaali	PTIN		
Da:	d	Print/Type preparer's name Preparer's signature	"	0	Check L		222	
Pai		Margaret A. Bradshaw			self-employ	<u> </u>		
	parer	Firm's name KPMG LLP		+	Firm's EIN 🛌	13-55652	20 /	
USE	Only	Firm's address 1676 International Drive			Dhan /50	121206 000	^	
_		McLean, VA 22102			Phone no. (70			
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)				X Ye	es L	No

2 1 1 3 3 4 4 4 4 4 4 4 4	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: "Increase and diffusion of knowledge" is the mission set forth it James Smithson. The Smithsonian endeavors to shape the future by preserving our heritage, discovering new knowledge, and sharing resources with the world. Did the organization undertake any significant program services during the year which the prior Form 990 or 990-EZ? If "Yes," describe these enew services on Schedule O. Did the organization cease conducting, or make significant changes in how it conduct if "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three lar Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grarevenue, if any, for each program service reported. (Code:) (Expenses \$	our our n were not listed on ts, any program services? gest program services, as measurents and allocations to others, the to	Yes X No Yes X No ed by expenses. otal expenses, and 45,537,335.
2 1 1 3 3 4 4 4 4 4 4 4 4	"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 resources with the world. Did the organization undertake any significant program services during the year which the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conduct if "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three lar Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of gra revenue, if any, for each program service reported. (Code:) (Expenses \$ 488,998,307. including grants of \$ 488,098,307. including grants of \$ 488,098	our n were not listed on ts, any program services? gest program services, as measure nts and allocations to others, the to 17,555,691.) (Revenue \$	Yes X No ed by expenses. otal expenses, and 45,537,335.)
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3 1 4 1 3 4 4 4 4 4 4 4 4 4	Did the organization cease conducting, or make significant changes in how it conduct if "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three lar Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grarevenue, if any, for each program service reported. (Code:) (Expenses \$	rgest program services, as measure nts and allocations to others, the to	ed by expenses. otal expenses, and 45,537,335.)
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4a ((Code:) (Expenses \$ 488,998,307. including grants of \$ 488,998,307. including gr		
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	(Code:) (Expenses \$	1,387,230.) (Revenue \$	51,675,934.)
,		1,387,230.) (Revenue \$	51,675,934.)
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,		1,387,230.) (Revenue \$	51,675,934.)
,		1,387,230. (Revenue \$	51,675,934.
- - - - -	4B Education, Public Programs and Exhibitions (See Schedule O)		
- - - -			_
- - -			
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_			
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-			
-			
40 /	(Code:) (Expenses \$ 76,550,443. including grants of \$) (5	63,129,565.)
	4C Membership (See Schedule O)) (Revenue \$	03,123,303.
-	40 Membership (bee benedate 0)		
-			
-			
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-			
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-			
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-			
4d (Other program services (Describe in Schedule O.)		
) (2)
	,		
	(Expenses \$ including grants of \$ Total program service expenses \$ 1,000,592,065.) (Revenue \$	

532002 12-16-15

Form 990 (2015) Smithsonian Instit Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	Х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	3 3 3 7			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		.,	
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		v	
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	4.	v	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	-
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	4.		
	complete Schedule G, Part III	19		Х

Form **990** (2015)

Form 990 (2015) Smithsonian Institution Part IV Checklist of Required Schedules (continued)

			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	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? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a	Х	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		Х
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			.,
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			v
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-		x
00	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30	х	
21	contributions? If "Yes," complete Schedule M	30	Λ	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Ves." complete Schedule N. Part I.	31		x
32	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
JŽ		32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 02		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
٠.	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
~	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<u> </u>		
	Note. All Form 990 filers are required to complete Schedule O	38	х	

Form **990** (2015)

2015) Smithsonian Institution Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in the Compliance Part V

	Check if Schedule O contains a response or note to any line in this Part V					Ш
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	3886			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re-	-				
	(gambling) winnings to prize winners?	 I	 I	1c	Х	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	6935			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns			2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
				3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		-		v	
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a	Х	
b	If "Yes," enter the name of the foreign country: Panama, Gabon		(FDAD)			
- -	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A			F-		х
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5с		
0a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did than y contributions that were not tax deductible as charitable contributions?			6a		х
h	If "Yes," did the organization include with every solicitation an express statement that such contribut			0a		
b	were not tax deductible?	.10115 0	in girts	6b		
7	Organizations that may receive deductible contributions under section 170(c).			OD		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices r	provided to the payor?	7a	Х	
	~ 1 ^			7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w			7.5		
_	to file Form 8282?		Jan 5 G	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontrac	ct?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr			7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		399 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation f	ile a Form 1098-C?	7h	Х	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by th	е			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	ı	I			
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	۱	I			
	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b	<u></u>	40-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	ı	Í	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13 a	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?			13a		
а	Note. See the instructions for additional information the organization must report on Schedule O.			iJa		
h	Enter the amount of reserves the organization is required to maintain by the states in which the					
5	organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
				14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule			14b		
	· · · · · · · · · · · · · · · · · · ·	-			700	(0045)

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

	Check if Schedule O contains a response or note to any line in this Part VI			Х
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	7		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 1b	7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
	officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	6/		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a	Х	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	Х	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	ole	
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X 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, an	d finan	icial	
	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 - 202-633-7218			
	2011 Crystal Dr., Arlington, VA 22202			

Form **990** (2015)

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

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

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

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)	l	21 1120		C)	прс	nou	(D)	(E)	(F)
Name and Title	Average hours per week	box	not c	Pos heck ss pe	itior more erson	than is bot or/trus	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Honorable John Roberts, Jr. Regent	0.50	x				6		0.	0.	0.
(2) Honorable Joseph Biden	0.50				C	V				
Regent		х		C		1		0.	0.	0.
(3) Honorable Xavier Becerra	2.00		ス							
Regent		х		•				0.	0.	0.
(4) Honorable John Boozman	2.00	5								
Regent	~	х						0.	0.	0.
(5) Honorable Thomas Cole	2.00									
Regent		Х						0.	0.	0.
(6) Honorable Sam Johnson	2.00									
Regent		Х						0.	0.	0.
(7) Honorable Patrick Leahy	2.00									
Regent		Х						0.	0.	0.
(8) Honorable David Perdue	2.00									
Regent		Х						0.	0.	0.
(9) Ms. Barbara Barrett	2.00									
Regent		Х						0.	0.	0.
(10) Mr. Steve Case	2.00									
Regent		Х						0.	0.	0.
(11) Mr. John Fahey	2.00									
Regent		Х						0.	0.	0.
(12) Dr. Shirley Ann Jackson	8.00	ļ								
Regent		Х						0.	0.	0.
(13) Mr. Robert Kogod	2.00	١							0	
Regent	2 00	Х						0.	0.	0.
(14) Dr. Risa Lavizzo-Mourey	2.00	ļ.,						0.	0	0
Regent (15) Mr. Michael Lynton	2.00	Х						0.	0.	0.
Regent	2.00	x						0.	0.	0.
(16) Mr. John McCarter	16.00	^	\vdash	\vdash			\vdash	0.	0.	
Regent	10.00	x						0.	0.	0.
(17) Mr. David Rubenstein	2.00	 						-	•	
Regent		x						0.	0.	0.
532007 12-16-15	1	_	_				_		<u> </u>	Form 990 (2015)

532007 12-16-15 Form **990** (2015)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (C) (F) (D) (E) Position Name and title Average Reportable Reportable Estimated (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any organizations compensation ndividual trustee or director the hours for organization (W-2/1099-MISC) from the related nstitutional trustee (W-2/1099-MISC) organization organizations (ey employee and related below organizations **Offlicer** line) (18) David Skorton 50.00 Secretary Х 508,315 0 53,045. (19) Albert Horvath 50.00 Х U/S Finance & Administration/CFO 442,856 0 59,932. (20) Cathy Helm 50.00 179,434 19,216. Inspector General Х 0 (21) Judith Leonard 50.00 General Counsel Х 188,345. 0 33,650. (22) Porter Wilkinson 50.00 Chief of Staff - Regents Х 119,097 0 21,280. 50.00 (23) Nancy Bechtol Director - Facilities Х 189,653. 0 25,933. (24) Claudine Brown(decd 03/17/16) 50.00 Х Asst Sec - Education and Access 261,211 0 46,853. (25) Deron Burba 50.00 Chief Information Officer 0 189,561. 44,228. (26) Amy Chen 50.00 Chief Investment Officer 509,771, 0 37,033. 1b Sub-total 2,588,243, 0 341,170. 0. 806,547. 5,720,858. c Total from continuation sheets to Part VII, Section A 8,309,101. 0. 1,147,717. d Total (add lines 1b and 1c)

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

Yes No

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 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? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

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)	(B)	(C)
Name and business address	Description of services	Compensation
Clark/Smoot/Russell, A Joint Venture, 7500		
Old Georgetown Road, Bethesda, MD 20814	Construction	133,534,271.
Design and Production		
7110 Rainwater Place, Lorton, VA 22079	Exhibit Design	20,016,314.
Grunley Construction Company		
888 17th Street NW, Washington, DC 20006	Construction	18,329,129.
Consigli Construction Company		
72 Sumner Street, Milford, MA 01757	Construction	18,115,331.
Hensel Phelps Construction Company, 4437		
Brookefield Corp. Dr., Chantilly, VA 20151	Construction	13,160,731.
2 Total number of independent contractors (including but not limited	d to those listed above) who received more than	
\$100,000 of compensation from the organization		

See Part VII, Section A Continuation sheets

Form **990** (2015)

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Form 990 Smithsonian Institution								53-0206027					
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Higher							est	Compensated Employees (continued)					
(A)	(B)				C)			(D)	(E)	(F)			
Name and title	Average			Pos	•	ı		Reportable	Reportable	Estimated			
	hours	(cl				app	ly)	compensation	compensation	amount of			
	per					Ė	<u>, , , , , , , , , , , , , , , , , , , </u>	from	from related	other			
	week					yee		the	organizations	compensation			
	(list any	ector				old me		organization	(W-2/1099-MISC)	from the			
	hours for	or dir	g.			ated 6		(W-2/1099-MISC)		organization			
	related	ıstee	fruste		يو	bens				and related			
	organizations	ual tri	ional		ploye	tcom				organizations			
	below line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former						
(27) Virginia Clark	50.00	_	┢			\vdash							
Director - Advancement & Giving					х			349,878.	0.	59,932.			
(28) Bruce Dauer	50.00												
VP Finance/Adm - (SE)					Х			300,468.	0.	36,638.			
(29) James Douglas	50.00												
Director - Office of Human Resources					х			184,117.	0.	29,921.			
(30) Jean Garvin	50.00									-			
Director - Finance & Accounting					х			183,014.	0.	46,225.			
(31) John Kress	50.00									_			
Interim Under Secretary - Science					Х			164,709.	0.	25,382.			
(32) Richard Kurin	50.00												
Acting Provost-U/S for Museums/Resea					Х			312,848.	0.	56,047.			
(33) John Lapiana	50.00							\					
Acting Asst Sec/Comm & External Affr					Х	C		212,119.	0.	33,998.			
(34) Dorothy Leffler	50.00				(16)						
Director - Office of Contracts					3	V		156,943.	0.	17,170.			
(35) Evelyn Lieberman(Decd 12/12/15)	50.00				\mathcal{C}								
Senior Advisor to the Secretary			\triangle		Х			248,558.	0.	35,001.			
(36) Christopher Liedel	50.00			•									
President - Smithsonian Enterprises		6			Х			628,563.	0.	61,991.			
(37) Era Marshall	50.00	-1											
Dir-Equal Emplymt & Minority Affairs	(),				Х			173,242.	0.	15,178.			
(38) Mary Payne	50.00												
Director - Office of Govt Relations					Х			187,036.	0.	36,811.			
(39) David Voyles	50.00												
Director - OPMB					Х			176,679.	0.	14,637.			
(40) Michael Caruso	50.00												
Editor in Chief - (SE)						Х		333,555.	0.	59,441.			
(41) Melissa Chiu	50.00												
Director - Hirschhorn Museum						Х		389,547.	0.	60,026.			
(42) Edward Howell	50.00												
SVP Retail-Smithsonian Enterprises						Х		390,465.	0.	59,347.			
(43) Carol LeBlanc	50.00												
SVP Licensing-Smithsonian Enterprise						Х		334,429.	0.	56,409.			
(44) Jeffrey Smith	50.00												
Investment Officer						Х		350,927.	0.	43,261.			
(45) G. Wayne Clough	50.00												
Former Secretary							Х	143,239.	0.	4,907.			
(46) Charles R. Alcock	50.00												
Former Acting Under Sec - Science							X	157,679.	0.	20,458.			
Total to Part VII, Section A, line 1c													

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	nstitution								53-020602	/
Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	oyee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A) Name and title	(B) Average	erage Position						(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any hours for related organizations below line)	stee or director	neck	all to	Key employee	Highest compensated employee	ly)	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(47) Kenneth Johnson	50.00						х	177 750	0.	0 627
Former Acting Director - OPMB (48) Andrew Zino	50.00						X	177,752.	0.	8,637
Former Comptroller	30,00	_					х	165,091.	0.	25,130
		L								
						5				
			/	C	9					
		X								
	08	7								
		L								
		L								
		L								
		L								
		\vdash								
		\vdash								
		_								
		_								
Fotal to Part VII, Section A, line 1c			<u> </u>	I		<u> </u>	<u> </u>	5,720,858.		806,547

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Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (**D)** Revenue excluded Related or Unrelated Total revenue from tax under exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 43,693 1 a Federated campaigns **b** Membership dues 1b 19,952,493. 3,647,170. c Fundraising events 508,408 d Related organizations 1d 951,570,661. e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 245,726,636 25,035,328. g Noncash contributions included in lines 1a-1f: \$ 1,221,449,061 h Total. Add lines 1a-1f Business Code 2 a Visitors/Members/Emplo Program Service Revenue 900099 49,749,773 26,497,332 23,252,441. 511120 33,826,982 **b** Subscriptions-magazine 33,826,982 Tours/Classes 900099 12,038,910 11,958,852 80,058 512131 2,631,866 Theater Income 11,964,784 9,332,918. Traveling Exhibitions 712110 2,066,955 2,066,955 900099 100,000 100,000 f All other program service revenue 109,747,404 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 13,983,057 13,983,057. other similar amounts) Income from investment of tax-exempt bond proceeds 4 688 923 14,688,923. 5 Royalties (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses c Rental income or (loss) d Net rental income or (loss) . 7 a Gross amount from sales of (i) Securities (ii) Other 192,631,741. 575,616. assets other than inventory b Less: cost or other basis 153,241,652 and sales expenses 39,390,089. 575,616. c Gain or (loss) 39,965,705. 575,616. 39,390,089. d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue 3,647,170. of including \$ contributions reported on line 1c). See 1,467,824 Part IV, line 18 a Other **b** Less: direct expenses 2,267,022 -799,198 c Net income or (loss) from fundraising events -799,198. 9 a Gross income from gaming activities. See Part IV, line 19 a **b** Less: direct expenses c Net income or (loss) from gaming activities ... 10 a Gross sales of inventory, less returns and allowances 60,835,673. 23,191,478. **b** Less: cost of goods sold 37,644,195. 35,779,715 1,864,480 c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a Magazine/Website Adver 541800 12,951,235 12,951,235 b d All other revenue 12,951,235 e Total. Add lines 11a-11d 1,449,630,382, 90,515,312. Total revenue. See instructions. 120,038,370. 17,627,639.

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Part IX | Statement of Functional Expenses

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

Do	Check if Schedule O contains a resport not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		1		,
	and domestic governments. See Part IV, line 21	364,591.	364,591.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	12,050,170.	12,050,170.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	6,528,160.	6,528,160.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	7,151,183.	1,889,887.	4,834,296.	427,000
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	3,790,014.	3,598,453.	191,561.	
7	Other salaries and wages	489,706,830.	352,427,453.	116,341,470.	20,937,907
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	64,772,546.	48,444,048.	13,666,320.	2,662,178
9	Other employee benefits	54,963,088.	38,704,680.	13,956,366.	2,302,042
10	Payroll taxes	33,312,693.	23,236,179.	8,735,910.	1,340,604
11	Fees for services (non-employees):				
а	Management		6'\		
b		4,134,098,	2,938,962.	1,188,842.	6,294
	Accounting	823,533.	V	823,533.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	3,720,161.			3,720,161
f	Investment management fees	2,491,374.		2,491,374.	
g	,				
	column (A) amount, list line 11g expenses on Sch O.)	127,878,911.	88,693,468.	27,466,202.	11,719,241
12	Advertising and promotion	6,376,997.	4,641,097.	943,748.	792,152
13	Office expenses	51,836,856.	41,459,053.	9,248,355.	1,129,448
14	Information technology	49,302,375.	12,528,378.	35,573,574.	1,200,423
15	Royalties	309,564.	309,519.		45
16	Occupancy	121,255,309.	100,725,964.	18,624,784.	1,904,561
17	Travel	14,787,306.	11,440,921.	2,226,486.	1,119,899
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,661,437.	3,235,566.	1,257,236.	168,635
20	Interest	3,018,592.	3,018,592.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	136,008,297.	116,849,524.	18,893,818.	264,955
23	Insurance	1,210,453.	563,177.	647,117.	159
24	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 0.)				
а	Periodical & Program Pr	46,724,203.	42,869,726.	3,473,782.	380,695
b	Research/Subcontracts	36,314,538.	36,314,538.	, = ,	, , , , , , , , , , , , , , , , , , , ,
C	Collections & Equipmnt/	24,200,892.	23,613,959.	481,446.	105,487
d	OH Cost Recovery Grants	0.	24,146,000.	-24,146,000.	, , , == :
e			,,	, ,	
25 25	Total functional expenses. Add lines 1 through 24e	1,307,694,171.	1,000,592,065.	256,920,220.	50,181,886
<u>26</u>	Joint costs. Complete this line only if the organization	,, = ,= . 2 .	, , , , , , , = , = -5.	, , , , , , , , , , , , , , , , , , , ,	, , = = , = 00
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here X if following SOP 98-2 (ASC 958-720)	11,231,431.	2,918,367.	0.	8,313,064

532010 12-16-15 Form **990** (2015)

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Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X ... (A) (B) Beginning of year End of year 506,406,711. 1 407,562,748. Cash - non-interest-bearing 25,628,497. 23,446,852. Savings and temporary cash investments 2 Pledges and grants receivable, net 274,734,852. 3 288,750,726. 47,018,136. 48,830,546. 4 Accounts receivable, net 4 **5** Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 Assets employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 Notes and loans receivable, net 7 13,084,526. Inventories for sale or use 11,162,602. 8 16,727,691. 18,171,247. Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other 4,357,920,588. basis. Complete Part VI of Schedule D ______ 10a b Less: accumulated depreciation 10b 2,025,835,058. 2,226,521,998. 10c 2,332,085,530. 264,932,851. 11 414,869,111. 11 Investments - publicly traded securities 1,106,485,966. Investments - other securities. See Part IV, line 11 12 1,127,208,144. 13 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 14 36,672,169. 38,922,608. 15 Other assets. See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) ... 4,516,291,473. 16 4,712,932,038. 304,981,578. 286,293,705. 17 17 Accounts payable and accrued expenses 18 18 Grants payable _____ 319,622,707. 343,096,650. 19 19 Deferred revenue 102,767,192. 101,221,443. 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part V of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, _iabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 100,000,000. 100,000,000. 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 50,341,604. 51,380,604. 25 Schedule D 877,713,081. 881,992,402. **Total liabilities.** Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34. **Net Assets or Fund Balances** 2,397,125,664. 2,651,205,341. 27 Unrestricted net assets 27 Temporarily restricted net assets 754,106,270. 28 670,393,313. 487,346,458. 509,340,982. 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 3,830,939,636. Total net assets or fund balances 3,638,578,392. 33 33

4,712,932,038. Form **990** (2015)

4,516,291,473.

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Total liabilities and net assets/fund balances

Form	1990 (2015) Smithsonian Institution	53-020602	7	Pag	ge 12
Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		Х
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,449	,630	,382.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,307	,694,	,171.
3	Revenue less expenses. Subtract line 2 from line 1	3	141	,936	,211.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,638	,578	,392.
5	Net unrealized gains (losses) on investments	5	55	,074	,640.
6	Donated services and use of facilities	_			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)		-4	,649,	,607.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,		,		
	column (B))	10	3,830	,939	,636.
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		
				Yes	No
1	Accounting method used to prepare the Form 990:				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Sche	dule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review	ewed on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a sep	oarate basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in	Schedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	ne Single Audit			
	Act and OMB Circular A-133?		. 3a	Х	
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		3b	Х	1

Form **990** (2015)

532012 12-16-15

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number 53-0206027 Smithsonian Institution 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 11, 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X 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.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 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 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. 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. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of listed in your (described on lines 1-9 organization support (see other support (see governing document? above (see instructions)) instructions) instructions) Yes No

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2015

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Form 990 or 990-EZ. 532021 09-23-15

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1126869412.	1120530769.	1190256002.	1097910208.	1221449061.	5757015452.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1126869412.	1120530769.	1190256002.	1097910208.	1221449061.	5757015452.
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)						
	Public support. Subtract line 5 from line 4.						5757015452.
	ction B. Total Support		1				
	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	1126869412.	1120530769	1190256002.	1097910208.	1221449061.	5757015452.
8	Gross income from interest,		~~	, ,			
	dividends, payments received on		, 0				
	securities loans, rents, royalties						
	and income from similar sources	17,395,111.	20,622,076.	35,313,796.	26,621,870.	28,671,980.	128,624,833.
9	Net income from unrelated business						
	activities, whether or not the		(-)				
	business is regularly carried on	V	*				
10	Other income. Do not include gain	_					
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						5885640285.
	Gross receipts from related activities,	•				12	795,164,104.
13	First five years. If the Form 990 is for	•	s first, second, thir	d, fourth, or fifth ta	ax year as a section	n 501(c)(3)	
80/	organization, check this box and storection C. Computation of Publ		rcentage				<u></u>
				. (0)		44	07 91 0/
	Public support percentage for 2015 (14	97.81 % 97.94 %
	Public support percentage from 2014					15	
Iba	33 1/3% support test - 2015. If the c	•		•		•	x and
	stop here. The organization qualifies						
L	33 1/3% support test - 2014. If the c						
47-	and stop here. The organization qual 10% -facts-and-circumstances tes						
17 a							
	and if the organization meets the "fact				•	-	
J	meets the "facts-and-circumstances"						
10	10% -facts-and-circumstances tes	· ·				•	
	more, and if the organization meets the		·				·
40	organization meets the "facts-and-circ		· ·		,		\
<u>IQ</u>	Private foundation. If the organization	ni dia not check a	DOX ON IME 13, 16	a, 100, 1/a, 0r 1/k	o, crieck this box a	nu see instruction	s ▶∟∟

Schedule A (Form 990 or 990-EZ) 2015

532022 09-23-15

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

(Complete only if you checked the box on line 9 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.)

Se	ction A. Public Support	olow, ploade comp	order are m.,				
	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Gifts, grants, contributions, and	` ,	` ,	` `	` ′	` ′	,,
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
2	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7	Amounts included on lines 1, 2, and						
	3 received from disqualified persons			.1			
ŀ	Amounts included on lines 2 and 3 received			C'			
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the			70			
	amount on line 13 for the year		C	10			
(Add lines 7a and 7b		. 0'	1			
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		<i>\'</i>				
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6		7				
	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
(Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
12	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for	the ergenization?	first second th	rd fourth or fifth t	1	n 501(a)(2) aracri	ration
14	•	Ü	,		•	()()	
50	check this box and stop here ction C. Computation of Publ						
				ook man (f))		15	0/
	Public support percentage for 2015 (I					 	<u>%</u>
	Public support percentage from 2014					16	<u>%</u>
	ction D. Computation of Inves		<u>-</u> _			14-1	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from 2					18	<u>%</u>
19	a 33 1/3% support tests - 2015. If the	-					
	more than 33 1/3%, check this box a						
ŀ	o 33 1/3% support tests - 2014. If the	•			•	•	
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see ir	structions	▶∟

Schedule A (Form 990 or 990-EZ) 2015

532023 09-23-15

Part IV | Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	ı.u		
	4b		
	4-		
	4c		
	5a		
	Ja		
	5b		
	5с		
	6		
	7		
	8		
	-		
	9a		
	9b		
	9с		
	50		
	10a		
	10b		
m a	90 or 99	0-F7	2015

Schedule A (Form 990 or 990-EZ) 2015

Pa	TT IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
<u>Sac</u>	tion C. Type II Supporting Organizations			<u> </u>
<u> </u>	tion of Type it Supporting Organizations		Yes	No
_	Managarania, of the companies time to discontinuous and surface of suiters the device of the continuous and surface of the con		Yes	NO
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions):			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3</i> below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see insi	ructions	.)	
2	Activities Test. <i>Answer (a) and (b) below.</i>	ractions	Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	NO
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	0-		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b				
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	Orga	anizations		
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 com	nplete :	Sections A through E.		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other				
	factors (explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d	3			
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by .035	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Year	
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2	Enter 85% of line 1	2			
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4	Enter greater of line 2 or line 3	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions)	6			
7	Check here if the current year is the organization's first as a non-functionally	integra	ated Type III supporting org	anization (see	
	instructions).				

Schedule A (Form 990 or 990-EZ) 2015

06/26/17 20

ı aı	Type iii Non-Functionally integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Secti	on D - Distributions		,	Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S	
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 tl	he organization is responsive	9	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
а				
b		_		
С		. 1		
d	From 2013	67,		
е	From 2014	00		
f	Total of lines 3a through e	-61		
g	Applied to underdistributions of prior years	. 00		
h	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)	Z		
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	`		
4	Distributions for 2015 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2015 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a				
b				
	Excess from 2013			
	Excess from 2014			
е	Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

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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.
	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.)
	600
	00
	GV .
	<u> </u>
	*

Schedule A (Form 990 or 990-EZ) 2015

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Employer identification number

2015

	Smi	thsonian Institution	53-0206027				
Organizatio	n type (check or	ie):					
Filers of:		Section:					
Form 990 or	990-EZ	X 501(c)(3) (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
527 political organization		527 political organization					
Form 990-PF	=	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
		covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule. See instructions				
Note: Only a	30011011 30 1(0)(y, (o), or (10) organization can eneal boxes for both are deficial rule and a opecial ric	ne. dec mandenona.				
General Rul	е						
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor					
Special Rule	es	OR IK					
X For	an organization	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support	test of the regulations under				
		nd 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a,					
		, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amountine 1. Complete Parts I and II.	nt on (i) Form 990, Part VIII, line 1h,				
	-	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from	-				
		ions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educuelty to children or animals. Complete Parts I, II, and III.	ational purposes, or for				
		described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from exclusively for religious, charitable, etc., purposes, but no such contributions totaled m					
•	•	ere the total contributions that were received during the year for an exclusively religious	•				
	•	mplete any of the parts unless the General Rule applies to this organization because i , etc., contributions totaling \$5,000 or more during the year	-				
	-	at is not covered by the General Rule and/or the Special Rules does not file Schedule I					
		Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its F the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	orm 990-PF, Part I, line 2, to				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

06/26/17 23

Name of organization

Employer identification number

Smithsonian Institution

53-0206027

Part I	rt I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution		
1	United States Government Federal Appropriations Washington, DC 20220	\$_	819,922,179.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution		
		\$_		Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution		
	2AX 0620	\$_		Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution		
		\$_		Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution		
		\$_		Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution		
		\$_		Person Payroll Noncash (Complete Part II for noncash contributions.)		

Smithsonian Institution 53-0206027

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of orga	anization	Employer identification number				
Smithsoni	an Institution		53-0206027			
Part III		ntributions to organizations describe	ped in section 501(c)(7), (8), or (10) that total more than \$1,000 for			
	completing Part III, enter the total of exclusively religi	ous, charitable, etc., contributions of \$1,000	10 or less for the year. (Enter this info. once.)			
() N	Use duplicate copies of Part III if addition					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of g	gift			
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
	Transferee's name, address,	Relationship of transferor to transferee				
()))						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of g	gift			
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee			

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.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Smithsonian Institution

Employer identification number 53-0206027

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accou	unts.Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.		
		(a) Donor advised funds	(b) Fun	ds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in		ed funds	
	are the organization's property, subject to the organization's	s exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor			
			-	Yes No
Pa	rt II Conservation Easements. Complete if the or			
1	Purpose(s) of conservation easements held by the organizat	tion (check all that apply).		
	Preservation of land for public use (e.g., recreation or	education) Preservation of a histo	rically impor	rtant land area
	X Protection of natural habitat	Preservation of a certif	fied historic	structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form o	of a conserv	ation easement on the last
	day of the tax year.	. 1		Held at the End of the Tax Year
а	Total number of conservation easements	<u> </u>	2a	1
b		00	-	88.25
С	Number of conservation easements on a certified historic st	ructure included in (a)	2c	0
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structu	re	
	listed in the National Register	, ,	0.1	0
3	Number of conservation easements modified, transferred, re			n during the tax
	year ▶ 0			
4	Number of states where property subject to conservation ea	asement is located > 1		
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements	it holds?		Yes X No
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing cons	ervation eas	sements during the year
	D 0			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservat	ion easeme	nts during the year
	▶ \$0.			
8	Does each conservation easement reported on line 2(d) abo	ve 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 conservat	tion easements in its revenue and expense	statement,	and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	ation's financial statements that describes t	he organiza	tion's accounting for
	conservation easements.			
Pa	rt III Organizations Maintaining Collections of		her Simil	ar Assets.
	Complete if the organization answered "Yes" on Forn	n 990, Part IV, line 8.		
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue statem	ent and bal	ance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherar	ice of public	service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ribes these items.		
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statement	and balance	e sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of pub	lic service, _l	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 tre	easures, or other similar assets for financial	gain, provid	le
	the following amounts required to be reported under SFAS 1	116 (ASC 958) relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1			\$
h	Assets included in Form 990, Part Y		_	\$

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

Schedule D (Form 990) 2015

		Institution					53-02060			age 2		
Pai	rt III Organizations Maintaining C											
3	Using the organization's acquisition, accessi	on, and other record	ds, check any of the	following that	t are a siç	gnificant	use of its	collectior	item:	S		
	(check all that apply):											
а	Y Public exhibition	d	I <u>X</u> Loan or exc	hange progra	ıms							
b												
С	c X Preservation for future generations											
4	Provide a description of the organization's co	ollections and explai	n how they further t	he organization	on's exen	npt purpo	ose in Par	XIII.				
5												
	to be sold to raise funds rather than to be ma	aintained as part of t	the organization's c	ollection?			Х	Yes		No		
Pai	t IV Escrow and Custodial Arran											
	reported an amount on Form 990, Pa		3				, ,	,				
1a	Is the organization an agent, trustee, custod		diary for contribution	ns or other as	sets not i	included						
	on Form 990, Part X?							Yes		No		
h	If "Yes," explain the arrangement in Part XIII							103		110		
b	ii res, explain the anangement in Fait Alli	and complete the id	mowing table.					Amount				
_	Decinging halance					4.		Amount				
	Beginning balance											
	Additions during the year											
_	Distributions during the year											
f	Ending balance							1.,		Τ		
	Did the organization include an amount on F					•	└─	Yes		No		
	If "Yes," explain the arrangement in Part XIII.											
Pai	T V Endowment Funds. Complete i			1								
		(a) Current year	(b) Prior year	(c) Two years								
1a	Beginning of year balance	1,288,235,067.					-		279,			
b	Contributions	52,940,072.					61,990.		505,			
С	Net investment earnings, gains, and losses	99,512,052.	2,426,301.	130,483	3,529.	139,8	75,394.	121,	707,	182.		
d	Grants or scholarships		S									
е	Other expenditures for facilities		0									
	and programs	67,486,808.	59,663,483.	57,266	5,941.	55,4	08,994.	51,	207,	144.		
f	Administrative expenses	4,445,386.	3,001,063.	2,997	,377.	2,5	90,934.	1,	928,	136.		
	End of year balance	1,368,754,997.	1,288,235,067.	1,299,208	3,124.	1,191,0	94,313.	1,074,	356,	857.		
2	Provide the estimated percentage of the cur	rent vear end balanc	ce (line 1a, column (a)) held as:								
а	Board designated or quasi-endowment	46.00	%	,,								
	Permanent endowment 33.41	%	_ ^-									
	Temporarily restricted endowment	20.59 %										
·	The percentages on lines 2a, 2b, and 2c sho											
32	Are there endowment funds not in the posse	-	ation that are held a	and administer	red for th	e organi	zation					
ou	by:	oolon or the organiz	ation that are note t	ara darriiriioto	100 101 111	io organiz	Lation	Г	Yes	No		
	(i) unrelated organizations							3a(i)	103	X		
	(**)							3a(ii)		X		
b	If "Yes" on line 3a(ii), are the related organizations	ations listed as requi										
								3b				
Bar	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		owment funds.									
Fai			0 Death/ Bas 44 - 7	000	D-4V							
	Complete if the organization answere	1	<u> </u>	-								
	Description of property	(a) Cost or o	' '	t or other	. ,	cumulate	ed	(d) Book	value	9		
		basis (investr		(other)	aep	reciation			-	4		
	Land			2,582,149.					582,			
	Buildings			1,662,916.		80,696,		1,800,				
	Leasehold improvements			317,168.		72,611,			706,			
d	Equipment			,233,460.	2	72,527,	196.		706,			
	Other		344	1,124,895.				344,	124,	895.		
Tota	tal. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)											

Schedule D (Form 990) 2015

532052 09-21-15

Part VII	Investments -	Other Securities.

Complete if the organization answered "Yes" or	n Form 990, Part IV, line 1	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) Global & Emerging Markets	368,682,242.	End-of-Year Market Value
(B) Marketable Alternatives	281,915,714.	End-of-Year Market Value
(C) Private Equity & Venture Capital	277,953,294.	End-of-Year Market Value
(D) Natural Resources	73,042,036.	End-of-Year Market Value
(E) Real Estate	103,644,655.	End-of-Year Market Value
(F) Fixed Income	21,970,203.	End-of-Year Market Value
(G)		
(H)		
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	1 127 208 144.	

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)	C	
(8)	0/0	
(9)	6	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶	00	

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.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	Environmental remediation obligation	51,380,604.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	51,380,604.

^{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 X

Schedule D (Form 990) 2015

532053 09-21-15

Sche	dule D (Form 990) 2015 Smithsonian Institution			53-020	06027 Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial Stateme		Revenue per R	eturn	•
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	l .			
1				1	1,577,109,649.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	اما	FF 074 C40		
a	Net unrealized gains (losses) on investments		55,074,640.	-	
b	Donated services and use of facilities		9,367,394.	-	
C C	Recoveries of prior year grants Other (Describe in Part VIII.)	1 1	40,070,107.	-	
d e	Other (Describe in Part XIII.) Add lines 2a through 2d	. — —		2e	104,512,141.
3	Add lines 2a through 2d Subtract line 2e from line 1			3	1,472,597,508.
4	Amounts included on Form 990. Part VIII. line 12, but not on line 1:				_,,,
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	2,491,374.		
b	Other (Describe in Part XIII.)		-25,458,500.		
	Add lines 4a and 4b	•	•	4c	-22,967,126.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,449,630,382.
Pa	t XII Reconciliation of Expenses per Audited Financial Statem	nents Witl	n Expenses per	Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	l .			
1	Total expenses and losses per audited financial statements			1	1,384,748,406.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	. 2a	9,367,394.		
b	Prior year adjustments	. 2b			
С	Other losses				
d	Other (Describe in Part XIII.)		71,345,346.		00 710 710
_	Add lines 2a through 2d	\		2e	80,712,740.
3	Subtract line 2e from line 1 Amounts included on Form 990. Part IX, line 25, but not on line 1:			3	1,304,035,666.
4	Amounts included on Form 990, Part IX, line 23, but not on line 1.	امدا	2,491,374.		
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	4a 4b	1,167,131.	-	
b c			, ,	4c	3,658,505.
	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (<i>This must equal Form</i> 990 , <i>Part I</i> , <i>line</i> 18 .)			5	1,307,694,171.
	t XIII Supplemental Information.				2,007,002,272
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	t IV lines 1b	and 2b: Part V line	4· Part 1	X line 2: Part XI
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add			1,1 0.11	A, 1110 E, 1 are 70,
	, , , , , , , , , , , , , , , , , , ,				
Part	II, Line 3:				
Smit	hsonian Institution did not modify, transfer, release, extingu	ish or			
tern	inate any conservation easements during the year.				
Part	II, Line 6				
ml	Guithania Duninguntal Dancard Guber (GDDG) in landad an	2 (50			
The	Smithsonian Environmental Research Center (SERC) is located on	1 2,650			
2000	g of land on the Chaganeska Bay in gouthern Maryland granning				
acre	s of land on the Chesapeake Bay in southern Maryland spanning				
fore	sts, wetlands, marshes, and 12 miles of protected shoreline.	The			
	bes, westernes, marshes, and is miles of proceeded shorterine.				
site	serves as a natural laboratory for long-term and cutting-edge	•			
eco]	ogical research. The Smithsonian has a conservation eastment				
asso	ciated with property that is immediately adjacent to SERC land	l owned			
by t	he Institution. Facilities and security staff visit the area				
	larly, and are thus able to report any unusual activity on the	land			
53205 09-21-	; 15			Sched	ule D (Form 990) 2015

06/26/17

30

Smithsonian collections contribute to population recovery of endangered

achievement, with a scope and depth no other institution in the world can

Schedule D (Form 990) 2015

match.

131,546.

2,433,900.

Schedule D (Form 990) 2015

Change in net assets of related organizations

Change in minority interest - SNI/SI Networks LLC

Schedule D (Form 990) 2015 Smithsonian Institution		53-0206027	Page 5
Part XIII Supplemental Information (continued)			
Imputed benefit revenue	44,763,206.		
Increase in allowance for uncollectible pledges netted	-11,167,131.		
against contribution revenue on audited financial state	ements		
Total to Schedule D, Part XI, Line 2d	40,070,107.		
Part XI, Line 4b - Other Adjustments:			
Direct expenses - fundraising	-2,267,022.		
Direct expenses - cost of goods sold	-23,191,478.		
Total to Schedule D, Part XI, Line 4b	-25,458,500.		
Part XII, Line 2d - Other Adjustments:	<u> </u>		
Direct expenses - fundraising	2,267,022.		
Direct expenses - cost of goods sold	23,191,478.		
Imputed benefit costs	44,763,206.		
Environmental remediation liability adjustment	1,123,640.		
Total to Schedule D, Part XII, Line 2d	71,345,346.		
· 			
Part XII, Line 4b - Other Adjustments:			
Increase in allowance for uncollectible pledges netted	1,167,131.		
against contribution revenue on audited financial state	ements		
,			
,			

Schedule D (Form 990) 2015

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

➤ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

United States.

Smithsonian Institution

Employer identification number

53-0206027

General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I 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? X 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

3 Activities per Region. (T	he following Par	t I, line 3 table c	an be duplicated if additional space is no	eeded.)	
(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
			Academic appointment		
Central America and			stipends to recipients		
the Caribbean		,	located in the region		1,952,019.
	 		located in the legion		1,332,013.
			Academic appointment		
			stipends to recipients		
East Asia & Pacific		0	located in the region		1,243,496.
			COV		
			Academic appointment		
			stipends to recipients		
Europe	0	0	located in the region		2,349,314.
			0,		
			Academic appointment		
Middle East & North		0,	stipends to recipients		
Africa	0	0	located in the region		114,985.
			Academic appointment		
			stipends to recipients		
North America	0	0	located in the region		247,498.
B A T 13			Academic appointment		
Russia & Neighboring		0	stipends to recipients		105 265
States	-	0	located in the region		105,265.
			Academic appointment		
			stipends to recipients		
South America		0	located in the region		280,817.
			l l l l l l l l l l l l l l l l l l l		
			Academic appointment		
			stipends to recipients		
South Asia	0	0	located in the region		104,452.
3 a Sub-total	C	0			6,397,846.
b Total from continuation					
sheets to Part I	10	617			775,538,140.
c Totals (add lines 3a					
and 3b)	10	617			781,935,986.

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

Schedule F (Form 990) 2015

Schedule F (Form 990) Part I Continuatio	Smithsonian		n. (Schedule F (Form 990), Part I, line 3	53-020602	27 Page 1
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Sub-Saharan Africa	0		Academic appointment stipends to recipients located in the region		130,314.
Central America and the Caribbean	0	0	Program Services	Travel related to research,conferences and training	599,041.
East Asia & Pacific	0	0	Program Services	Fravel related to research, conferences and training	1,055,397.
Europe	0	0	Program Services	Travel related to research, conferences and training	1,985,563.
Middle East & North Africa	0	0	Program Services	Travel related to research, conferences and training	109,576.
North America	0	0	Program Services	Travel related to research, conferences and training	409,800.
Russia & Neighboring States	0	o?	Program Services	Travel related to research, conferences and training	118,167.
South America	0	0	Program Services	Travel related to research, conferences and training	364,245.
South Asia	0	0	Program Services	Travel related to research, conferences and training	120,379.
Sub-Saharan Africa	0	0	Program Services	Travel related to research, conferences and training	546,293.
Totals					

532181 04-01-15

Schedule F (Form 990) Part I Continuatio	Smithsonian n of Activitie		n. (Schedule F (Form 990), Part I, line :	53-020602	Page 1
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean	7	593	Program Services	Research Facilities	25 506 696
che caribbean	/	393	Program Services	Research Facilities	25,596,686.
		_		Design and implement a biodiveristy monitoring	
South America	1	7	Program services	progam Develop biodiversity	850,334.
				action plan to conserve	
Sub-Saharan Africa	1	8	Program Services	ecosystems	558,126.
				Tropical Research/Forest	
East Asia & Pacific	0	0	Program Services	and Wildlife	888,893.
				Joint program with USAID	
Russia & Neighboring			1	for community-based tourism development in	
States	1	9	Program Services	Armenia	766,346.
South America	0	0	Program Services	Tropical Research/Forest and Wildlife	163,512.
Central America and	0	8	Investments		622,007,147.
Europe	0	0	Investments		73,108,974.
East Asia & Pacific	0	0	Investments		32,118,247.
Sub-Saharan Africa	0	0	Investments		10,022,027.
Totals					

532181 04-01-15

Schedule F (Form 990) Part I Continua	Smithsonian		n. (Schedule F (Form 990), Part I, line 3)	53-02060	027 Page 1
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
North America		0	Investments		4,019,073.
NOI CII AIIICI ICA	0	0	Investments		4,019,073.
			4		
			AFT 062611		
			NET ON		
		OR	<i>Y</i>		
Totals	10	617			775,538,140.

532181 04-01-15

53-0206027 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			Academic appointment					
		Europe	stipend	5,000.	EFT	0.		
			Academic appointment					
		Russia	stipend	29,270.	EFT	0.		
				•				
				1				
				·6'				
			-6					
			, 0,					
			or RAF					
			O.					
			recognized as charities by the					
			n 501(c)(3) equivalency letter			> .		2
3 Enter total number of	other organizations	or entities						0

Schedule F (Form 990) 2015

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

Part III can be duplicated if additional space is needed. (g) Description of (h) Method of (c) Number of (d) Amount of (e) Manner of (f) Amount of (a) Type of grant or assistance (b) Region valuation recipients cash grant cash disbursement non-cash non-cash assistance (book, FMV, assistance appraisal, other) Central America Academic Appointment Stipends and the Caribbean 252 1,952,019. Direct Deposits & Checks 0. East Asia and the Academic Appointment Stipends Pacific 50 1,243,496.Direct Deposits & Checks 0. Academic Appointment Stipends Europe 88 2,344,314.Direct Deposits & Checks 0. Middle East and 114,985.Direct Deposits & Checks 0. Academic Appointment Stipends North Africa 7 20 247,498.Direct Deposits & Checks 0. Academic Appointment Stipends North America Russia and Neighboring Academic Appointment Stipends States 3 75,995. Direct Deposits & Checks 0. 280,817. Direct Deposits & Checks Academic Appointment Stipends South America 21 0. Academic Appointment Stipends South Asia 5 104,452. Direct Deposits & Checks 0. Sub-Saharan Academic Appointment Stipends Africa 130,314. Direct Deposits & Checks 10

Page 3

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015 Spart IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	□ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	X Yes	□ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	☐ No
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)	X Yes	□ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X Yes	□ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	X Yes	□ No

Schedule F (Form 990) 2015

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.

Part I, Line 2:

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 There are other competitive and candidates and then select the fellows. 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

Schedule F (Form 990) 2015

06/26/17

532075 10-01-15

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.

research staff who serve as advisors to these fellows, students and
scholars are usually in the field during their tenure. The eight
Smithsonian research centers located in the United States and one located
in Panama monitor the progress of their fellows especially those fellows
in other countries, and the administrative management of funds is managed
through the Institution's central administration for accountability.
Part I, Line 3:
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.
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.
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.

532075 10-01-15 Schedule F (Form 990) 2015

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SCHEDULE G

Internal Revenue Service

Part I

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Smithsonian Institution

Employer identification number

53-0206027

Fundraising Activities.	 Complete if the organization answered "Y 	es" on Form 990,	Part IV, line 17. F	orm 990-EZ filers are not
required to complete this part				

1 Indicate whether the organization rai	ised funds through any of the followi	ng acti	vities.	Check all that apply						
a X Mail solicitations e X Solicitation of non-government grants										
b X Internet and email solicitations f X Solicitation of government grants										
c X Phone solicitations g X Special fundraising events										
d X In-person solicitations										
2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or										
key employees listed in Form 990, F	Part VII) or entity in connection with p	orofess	ional f	undraising services?	Yes	☐ No				
b If "Yes," list the ten highest paid inc	dividuals or entities (fundraisers) purs	suant to	o agre	ements under which	the fundraiser is to	be				
compensated at least \$5,000 by the	e organization.									
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundi have co or cor contrib	Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization				
Avalon Consulting Group -	Direct Marketing	Yes	No							
2030 M St, NW, Washington, DC	Consulting & Services		X	0.	2,274,218.	2,274,218.				
Community Counselling Service		<u> </u>	1							
- 3349 Highway 138, Wall, NJ	Fundraising Consultant		Х	0.	422,500.	422,500.				
M & R Strategic Services -		70								
2120 L St NW, Washington, DC	Online Advisory Services	11	х	0.	228,550.	228,550.				
Blackbaud - PO Box 930256,	. 0'	7								
Atlanta, GA 31193-0256	Fundraising Consultant		х	0.	211,712.	211,712.				
Marts & Lundy - 1200 Wall St										
W, Lyndhurst, NJ 07071-3680	Fundraising Consultant		Х	0.	166,087.	166,087.				
Donor Services Group - 1150	(A)									
Olympic Bvd, Los Angeles, CA	Telemarketing Services		Х	0.	113,869.	113,869.				
Impact Communications - 1009	•									
E St, 2nd Flr, Washington, DC	Fundraising Consultant		Х	0.	97,400.	97,400.				
Kimbia Inc - 2500 Bee Caves										
Rd, #2, Austin, TX	Fundraising Consultant		Х	0.	82,300.	82,300.				
SD&A Teleservices - 101										
Continental Blvd, El Segundo,	Telemarketing Services		Х	0.	123,525.	123,525.				
Total		1			3,720,161.	3,720,161.				
7 List all states in which the organization	on is registered or licensed to policit	oontrik	. Lition	or has been notifie						
3 List all states in which the organization or licensing.	on is registered or licerised to solicit	CONTIN	DULIONS	s or has been notine	u it is exempt from re	egistration				

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

See Part IV for continuations

Schedule G (Form 990 or 990-EZ) 2015

532081 09-14-15

06/26/17 43

		of fundraising event contributions and g	ross income on Form 990	0-EZ, lines 1 and 6b. List	events with gross receip	ots greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
				American Portrait		(add col. (a) through
			Hirshhorn Gala	Gala	9	col. (c))
Φ			(event type)	(event type)	(total number)	COI. (C))
Revenue						
Rev	1	Gross receipts	1,427,800.	1,177,608.	2,509,586.	5,114,994.
	2	Less: Contributions	1,325,505	1,054,362.	1,267,303.	3,647,170.
	3	Gross income (line 1 minus line 2)	102,295	. 123,246.	1,242,283.	1,467,824.
	4	Cash prizes				
	5	Noncash prizes				
sesued	6	Rent/facility costs	50,000		19,564.	69,564.
Direct Expenses	7	Food and beverages	74,910.	137,000.	323,107.	535,017.
	8	Entertainment				
	9	Other direct expenses		568,207.	669,201.	1,662,441.
	10	Direct expense summary. Add lines 4 throug	h 9 in column (d)	.1	>	2,267,022.
_	11	Net income summary. Subtract line 10 from				-799,198.
Pa	ırt I		answered "Yes" on Forr	n 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))
Be	1	Gross revenue	2AY			
ses	2	Cash prizes	OL			
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	7 from line 1, column (d)		>	
_	_					
9		ter the state(s) in which the organization cond	_			Yes No
		the organization licensed to conduct gaming a		states?		Yes No
L	"	No," explain:				
	_					
		ere any of the organization's gaming licenses r Yes," explain:	•	erminated during the tax y	/ear?	Yes No
	_					
5320	32 0	9-14-15			Schedule G (For	rm 990 or 990-EZ) 2015

<u>Sch</u>	edule G (Form 990 or 990-EZ) 2015 Smithsonian Institution 53-0	206027		Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	☐ No
	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:	. —		
	a The organization's facility	13a		%
	o An outside facility		+	
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	100		
14	Efficient the frame and address of the person who prepares the organization's gaming/special events books and records.			
	Name ▶			
	Address			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
b	o 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 convices provided			
	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			
			Yes	☐ No
	retain the state gaming license?	<u> </u>	163	110
L	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
Da	organization's own exempt activities during the tax year \$		01 4	01 451
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III. 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	, lines 9	, 96, 1	Jb, 15b,
Sch	nedule G, Part I, Line 2b Column (iv) and (v):			
	engaged multiple fundraising services and many work on the same			
	engaged muttiple landialing belvices and many work on the bame			
cam	npaigns. It is not possible to accurately report the exact amount of			
rev	renue associated with each fundraiser. None of these fundraisers had			
con	atrol of contributions; all were paid under the terms of negotiated			
con	stracts. SI closely monitors fundraising performance against			
est	ablished campaign goals for its contractors, and results are taken			
int	co consideration in future contract negotiations.			

Schedule G (Form 990 or 990-EZ) 2015

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.

OMB No. 1545-0047

Open to Public Inspection

Name of	the organization							Employer identification number
	Smithsonian I							53-0206027
Part I	General Information on Grants a							
	es the organization maintain records							
	eria used to award the grants or assis							X Yes No
2 Des	scribe in Part IV the organization's pro							
Part II	Grants and Other Assistance to	-				anization answered "Y	es" on Form 990, Part	: IV, line 21, for any
	recipient that received more than		· ·	· ·		(f) Method of		
1 (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	valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
3	n Council of Learned				.1			
	es - 633 Third Avenue, 8th				C-/,			Academic Appointment
	ew York, NY 10017-6795	13-1851145	501(a)(3)	6,000.	0.			Stipend
TII N	ew 101K, N1 10017 0755	13 1031143	501(0)(3)	0,000.	ů.			beipend
Cornell	University			, 00				
	e Tree Road							Academic Appointment
Ithaca,	NY 14850	15-0532082	501(c)(3)	46,407.	0.			Stipend
2121 I	Washington University St MW ton, DC 20052	53-0196584	501(c)(3)	4,894.	0.			Academic Appointment Stipend
	University							
	th Street, Rm 501	35-6001673	115	12 500	0.			Academic Appointment Stipend
BIOOMIII	gton, IN 35600-1673	35-6001673	115	12,500.	0.			scipena
220 Tro	n State University wbridge Road nsing, MI 48824	38-6005984	115	5,000.	0.			Academic Appointment Stipend
	iversity							
	ter, Ste 279	21 (422112	115	2 22-				Academic Appointment
	OH 45701	31-6402113		3,395.				Stipend
	er total number of section 501(c)(3) a							
	er total number of other organization							

Schedule I (Form 990) (2015)

Smithsonian Institution 53-0206027

(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
Regents of the University of							
Michigan - 3003 South State Street							Academic Appointment
- Ann Arbor, MI 48109-1287	38-6006309	115	13,183.	0.			Stipend
Regents of the University of							
Minnesota - 2221 University Ave SE							Academic Appointment
- Minneapolis, MN 41600-7513	41-6007513	115	37,610.	0.			Stipend
Research Foundation for the State							
Univ of NY - PO Box 9 - Albany, NY				1			Academic Appointment
12201	14-1368361	501(c)(3)	41,650.	0.			Stipend
Trustees of the Univ. of			6	9			
Pennsylvania – 3451 Walnut Street			(0)				Academic Appointment
- Philadelphia, PA 19104-6205	23-1352685	501(c)(3)	53,000.	0.			Stipend
University of Chicago			< \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
6054 South Drexel Avenue			/				Academic Appointment
Chicago, IL 60637	36-2177139	501(c)(3)	31,950.	0.			Stipend
University of Illinois		_					
506 S Wright Avenue							Academic Appointment
Urbana, IL 61801	37-6000511	115	16,950.	0.			Stipend
University of Mary Washington							
1301 College Avenue							Academic Appointment
Fredricksburg, VA 22401-5300	54-6001757	115	55,000.	0.			Stipend
University of Maryland - College							
Park - 2119 Main Administration							Academic Appointment
Bldg - College Park, MD 20742	52-6002033	115	33,552.	0.			Stipend
Utah State University							
2400 Old Main Hill							Academic Appointment
Logan, UT 84322	87-6000528	115	3,500.	0.			Stipend

Schedule I (Form 990)

Page 1

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Schedule I (Form 990)

06/26/17 48

(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of non-	(e) Method of valuation	(f) Description of non-cash assistance
	recipients	cash grant	cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(,, = =================================
Academic Appointment Stipends	1096	12,050,170	0.		
			1		
			CA /		
		C			
		. 00			
		'V'			
Part IV Supplemental Information. Provide the informa	tion required in Part I, lin	e 2, Part III, columr	ı (b), and any other a	dditional information.	
Part I, Line 2:	\vee				
1410 1, 1110 2.					
The Office of Fellowships has central managem	ent and administra	tive			
responsibility for the Smithsonian programs o	f research fellows	hips and			
other academic appointments for undergraduate	graduate students	s			
other addamic appointments for analyzadade	, gradace seadens	~ <i>i</i>			
postdoctoral and senior scholars. The Smithso	nian Institution F	ellowship			
Program is a competitive fellowship program f	or graduate and po	stdoctoral			
fellows, who apply to conduct research at the	Institution with	rogoardh			
refrows, who appry to conduct research at the	Institution with	research			
staff serving as advisors. The review process	is made up of disc	ciplinary			
committees comprised of the Institution's res	earch staff who eva	aluate the			

532102 10-28-15

Schedule I (Form 990) (2015)

SCHEDULE J (Form 990)

Department of the Treasury

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.

Smithsonian Institution

► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

Internal Revenue Service Name of the organization

Inspection Employer identification number

53-0206027

OMB No. 1545-0047

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

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

Schedule J (Form 990) 2015

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.

		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Delletits	(15)(1)-(10)	reported as deferred on prior Form 990	
(1) David Skorton	(i)	355,853.	150,000.	2,462.	39,710.	14,360.	562,385.	0.	
Secretary	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) Albert Horvath	(i)	434,815.	6,000.	2,041.	39,710.	21,498.	504,064.	0.	
U/S Finance & Administration/CFO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) Cathy Helm	(i)	176,798.	2,636.	0.	0.	19,585.	199,019.	0.	
Inspector General	(ii)	0.	0.	٥.	0.	0.	0.	0.	
(4) Judith Leonard	(i)	182,262.	4,000.	2,083.	26,217.	8,229.	222,791.	0.	
General Counsel	(ii)	0.	0.	6 9.	0.	0.	0.	0.	
(5) Nancy Bechtol	(i)	183,958.	5,000.	695.	25,933.	793.	216,379.	0.	
Director - Facilities	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) Claudine Brown(decd 03/17/16)	(i)	251,563.	6,500.	3,148.	37,420.	10,393.	309,024.	0.	
Asst Sec - Education and Access	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) Deron Burba	(i)	183,671.	5,500	390.	26,962.	18,073.	234,596.	0.	
Chief Information Officer	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) Amy Chen	(i)	253,635.	255,080.	1,056.	36,565.	1,424.	547,760.	0.	
Chief Investment Officer	(ii)	0.	0.	0.	0.	0.	0.	0.	
(9) Virginia Clark	(i)	337,335.	8,000.	4,543.	39,710.	21,397.	410,985.	0.	
Director - Advancement & Giving	(ii)	0.	0.	0.	0.	0.	0.	0.	
(10) Bruce Dauer	(i)	218,037.	79,817.	2,614.	31,707.	6,050.	338,225.	0.	
VP Finance/Adm - (SE)	(ii)	0.	0.	0.	0.	0.	0.	0.	
(11) James Douglas	(i)	181,533.	499.	2,085.	26,241.	4,477.	214,835.	0.	
Director - Office of Human Resources	(ii)	0.	0.	0.	0.	0.	0.	0.	
(12) Jean Garvin	(i)	176,940.	5,000.	1,074.	26,003.	21,016.	230,033.	0.	
Director - Finance & Accounting	(ii)	0.	0.	0.	0.	0.	0.	0.	
(13) John Kress	(i)	158,709.	6,000.	0.	8,212.	17,497.	190,418.	0.	
Interim Under Secretary - Science	(ii)	0.	0.	0.	0.	0.	0.	0.	
(14) Richard Kurin	(i)	301,002.	8,000.	3,846.	44,660.	12,456.	369,964.	0.	
Acting Provost-U/S for Museums/Resea	(ii)	0.	0.	0.	0.	0.	0.	0.	
(15) John Lapiana	(i)	186,399.	25,000.	720.	26,660.	8,141.	246,920.	0.	
Acting Asst Sec/Comm & External Affr	(ii)	0.	0.	0.	0.	0.	0.	0.	
(16) Dorothy Leffler	(i)	152,943.	4,000.	0.	0.	17,486.	174,429.	0.	
Director - Office of Contracts	(ii)	0.	0.	0.	0.	0.	0.	0.	

Schedule J (Form 990) 2015

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.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(17) Evelyn Lieberman(Decd 12/12/15)	(i)	237,891.	6,000.	4,667.	35,001.	980.	284,539.	0.
Senior Advisor to the Secretary	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) Christopher Liedel	(i)	427,226.	199,328.	2,009.	39,125.	24,751.	692,439.	0.
President - Smithsonian Enterprises	(ii)	0.	0.	0.	0.	0.	0.	0.
(19) Era Marshall	(i)	168,242.	5,000.	0.	0.	15,178.	188,420.	0.
Dir-Equal Emplymt & Minority Affairs	(ii)	0.	0.	٥.	0.	0.	0.	0.
(20) Mary Payne	(i)	184,306.	2,000.	730.	26,974.	10,644.	224,654.	0.
Director - Office of Govt Relations	(ii)	0.	0.	6 9.	0.	0.	0.	0.
(21) David Voyles	(i)	171,179.	5,500.	0.	7,035.	7,946.	191,660.	0.
Director - OPMB	(ii)	0.	0.	0.	0.	0.	0.	0.
(22) Michael Caruso	(i)	298,877.	33,965.	713.	39,125.	21,738.	394,418.	0.
Editor in Chief - (SE)	(ii)	0.	0.	0.	0.	0.	0.	0.
(23) Melissa Chiu	(i)	389,129.	0.	418.	39,710.	21,607.	450,864.	0.
Director - Hirschhorn Museum	(ii)	0.	0.	0.	0.	0.	0.	0.
(24) Edward Howell	(i)	266,635.	120,409.	3,421.	39,125.	21,527.	451,117.	0.
SVP Retail-Smithsonian Enterprises	(ii)	0.	0.	0.	0.	0.	0.	0.
(25) Carol LeBlanc	(i)	240,282.	93,599.	548.	36,187.	21,433.	392,049.	0.
SVP Licensing-Smithsonian Enterprise	(ii)	0.	0.	0.	0.	0.	0.	0.
(26) Jeffrey Smith	(i)	179,007.	171,756.	164.	26,144.	17,913.	394,984.	0.
Investment Officer	(ii)	0.	0.	0.	0.	0.	0.	0.
(27) G. Wayne Clough	(i)	142,573.	0.	666.	4,806.	224.	148,269.	0.
Former Secretary	(ii)	0.	0.	0.	0.	0.	0.	0.
(28) Charles R. Alcock	(i)	152,558.	4,300.	821.	20,458.	719.	178,856.	0.
Former Acting Under Sec - Science	(ii)	0.	0.	0.	0.	0.	0.	0.
(29) Kenneth Johnson	(i)	172,752.	5,000.	0.	8,638.	343.	186,733.	0.
Former Acting Director - OPMB	(ii)	0.	0.	0.	0.	0.	0.	0.
(30) Andrew Zino	(i)	163,091.	2,000.	0.	7,959.	17,505.	190,555.	0.
Former Comptroller	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

Part I, Line 1a:

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.

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

Schedule J (Form 990) 2015

532113 10-14-15 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.

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 2015, two (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.

Part I, Line 6:

Incentive Plan

Certain employees of Smithsonian Enterprises (SE), a unit of the

Smithsonian are eligible to participate in the Smithsonian Enterprises

Management Incentive Plan. This eligibility is determined on an annual

basis. Even if eligible to participate, a performance review rating of

"Fully Successful" must be received. The Plan includes both financial and

individual (operational) goals, and these goals must be met in order to

receive an incentive payment. There are different performance levels, with

Schedule J (Form 990) 2015

532113 10-14-15

Schedule J (Form 990) 2015

53-0206027

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990. Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 2015 Open to Public Inspection

Name of the organization

Employer identification number Smithsonian Institution 53-0206027

Part I Bond Issues									020								
(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	d (e) Issu	ıe price	(f) Description of purpose		(f) Description of purpo		(f) Description of purpose		(g) De	eased	(h) On of is:	behalf suer	(i) Po	
								Yes	No	Yes	No	Yes	No				
Fairfax County Economic Development																	
A Authority	54-0787833	30382ECZ5	12/03/03	77,	545,000.	To construct	a museum		Х		Х		Х				
B District of Columbia	53-6001131	2548397s6	04/29/10	33,8	325,749.	Refunding of	1997 Bonds		Х		х		х				
С																	
D				1													
Part II Proceeds			~~~	`													
			C V	<u> </u>		В	С				D						
1 Amount of bonds retired						8,035,000.			_								
2 Amount of bonds legally defeased																	
3 Total proceeds of issue			7	7,545,000.		33,825,749.											
4 Gross proceeds in reserve funds																	
5 Capitalized interest from proceeds																	
6 Proceeds in refunding escrows				500 455		510 001			-								
7 Issuance costs from proceeds				530,475.		612,994.			-								
8 Credit enhancement from proceeds				6,161.					-								
9 Working capital expenditures from proceeds				7 000 264					-								
10 Capital expenditures from proceeds			***	7,008,364.		22 010 755			-								
11 Other spent proceeds						33,212,755.			+								
12 Other unspent proceeds				2003		2010			_								
13 Year of substantial completion					Vaa		Yes	N.	-	V		N.					
14 Were the bonds issued as part of a current re	funding issue?		Yes	No X	Yes X	No	Yes	No	+	Yes		No					
15 Were the bonds issued as part of an advance	•			X	<u> </u>	х			+		-						
16 Has the final allocation of proceeds been made					Х				+		-						
17 Does the organization maintain adequate books and records					x												
Part III Private Business Use	to support the illiar anocat	non or proceeds!	···	1		ı	<u> </u>										
				A		В	С				D						
1 Was the organization a partner in a partnershi	ip, or a member of a	an LLC.	Yes	No	Yes	No	Yes	No		Yes	Ī	No					
which owned property financed by tax-exemp	• *	,		X		Х			1								
2 Are there any lease arrangements that may re									1								
bond-financed property?	•			х		х											
532121 10-22-15 LHA For Paperwork Reduction Act Notice	e, see the Instruct	ions for Form 990.	•		•	•	•		Sche	dule K	(Forn	n 990)	2015				

10-22-15 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part	Private Business Use (Continued)								
			A		В	C)
За	Are there any management or service contracts that may result in private	Yes	No	Yes	No	Yes	No	Yes	No
	business use of bond-financed property?		Х	X					
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
	counsel to review any management or service contracts relating to the financed property?			X					
c	$\label{lem:continuous} \mbox{Are there any research agreements that may result in private business use of bond-financed property?}$		Х		Х				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
	counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by								
	entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5	Enter the percentage of financed property used in a private business use as a result of								
	unrelated trade or business activity carried on by your organization, another								
	section 501(c)(3) organization, or a state or local government		%		4.57 %		%		%
6	Total of lines 4 and 5		/ %		4.57 %		%		%
7	Does the bond issue meet the private security or payment test?	1	Х		Х				
8a	Has there been a sale or disposition of any of the bond-financed property to a non-	O _C							
	governmental person other than a 501(c)(3) organization since the bonds were issued?		Х		Х				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed	√O.							
	of)	%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections								
	1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified								
	bonds of the issue are remediated in accordance with the requirements under								
	Regulations sections 1.141-12 and 1.145-2?	Х		X					
Part	IV Arbitrage	r		1		1			
		,	Ą		В	(Ç		<u> </u>
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		X		Х				
2	If "No" to line 1, did the following apply?			1		1			
a	Rebate not due yet?		Х		X				
	Exception to rebate?	Х		X					
c	No rebate due?		X		X				
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
	performed		,	1	,	1	,		1
3	Is the bond issue a variable rate issue?	Х			X				
4a	Has the organization or the governmental issuer entered into a qualified								
	hedge with respect to the bond issue?		X		X				
	Name of provider								
	Term of hedge								
d	Was the hedge superintegrated?								
<u>e</u>	Was the hedge terminated?								

Schedule K (Form 990) 2015

Schedule K (Form 990) 2015 Smithsonian Institution 53-0206027 Page 3

Contradict (1 cm 600) 2010								r ago t
Part IV Arbitrage (Continued)								
	Α		ı	3		;	D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		Х				
b Name of provider				•				
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		Х		Х				
7 Has the organization established written procedures to monitor the requirements of								
section 148?	Х		х					
Part V Procedures To Undertake Corrective Action			1					
		4		3		<u>;</u>	Г	<u> </u>
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of		110	1.00		100	110	100	110
federal tax requirements are timely identified and corrected through the voluntary		4						
closing agreement program if self-remediation is not available under applicable		^ \						
	x C	`	x					
regulations?		147						
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedul	e K (see instr	uctions).					
Schedule K, Part I, Bond Issues, Column (f), Line B	$\mathcal{O}_{\mathcal{O}}$							
The issue date of the current refunded bonds was January 1, 1998.	<u> </u>							
Part III Private Business Use, Line 5, Column B								
The percentage of financed property used in a private business use as a								
result of unrelated trade or business activity is based on the								
percentage of unrelated revenue to total revenue in the gift shop and								
theater within the space financed by this bond issue.								
				_				

532123 10-22-15 Schedule K (Form 990) 2015

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Smithsonian Institution

Employer identification number 53-0206027

Par	t I Types of Property						
		(a)	(b)	(c)	(d)		
		Check if applicable	Number of contributions or	Noncash contribution amounts reported on	Method of determ noncash contribution	_	
		арріісавіе		Form 990, Part VIII, line 1g	Horicasii contribution	amount	.5
1	Art - Works of art	Х	3,081				
2	Art - Historical treasures						
3	Art - Fractional interests	Х	3				
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	Х	286	19,424,528.	Fair Market Value		
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or						
	trust interests						
12	Securities - Miscellaneous			A			
13	Qualified conservation contribution -						
	Historic structures		0				
14	Qualified conservation contribution - Other		O,)			
15	Real estate - Residential		- COV				
16	Real estate - Commercial		, 0				
17	Real estate - Other						
18	Collectibles	Х	6,862				
19	Food inventory						
20	Drugs and medical supplies		1				
21	Taxidermy	X	2,794				
22	Historical artifacts	X	56,145				
23 24	Scientific specimens	A	30,143				
25	Archeological artifacts Other ▶ (Goods)	X	55	5 610 800	Fair Market Value		
26	Other (Arch cf/lf)	X	1,425		rail market varae		
27	Other (Archival misc)	X	11,477				
28	Other ()						
29	Number of Forms 8283 received by the organi	zation durin	a the tax vear for c	ontributions			
	for which the organization completed Form 82		•			70	
		, ,	·			Yes	No
30a	During the year, did the organization receive b	y contributio	on any property rep	oorted in Part I, lines 1 through	gh 28, that it		
	must hold for at least three years from the date						
	exempt purposes for the entire holding period	?			30a		Х
b	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance	policy that re	equires the review	of any non-standard contrib	utions? 31	Х	
32a	Does the organization hire or use third parties	or related or	rganizations to soli	cit, process, or sell noncash			
	contributions?				32a	X	
b	If "Yes," describe in Part II.						
33	If the organization did not report an amount in	column (c) f	for a type of prope	rty for which column (a) is ch	necked,		
	describe in Part II.						

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

Schedule M (Form 990) (2015)

532142 08-21-15

Schedule M (Form 990) (2015)

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
Schedule M, Line 32b:
Although the Smithsonian acquires collections with the good faith
intention of retaining them for an indefinite period of time, prudent
collections management includes judicious consideration of appropriate
deaccessioning and disposal to refine and improve the quality and
relevance of the collections with respect to the Smithsonian's mission
and purpose. When objects are deaccessioned for disposal by sale, the
Smithsonian contracts with commercial galleries or auction houses to
sell the objects in order to assure the best return from the sale.
Schedule M, Line 33:
In accordance with professional practice, as allowed by SFAS 116, the
Smithsonian does not assign value to collection items acquired by
donation.

06/26/17 61

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Smithsonian Institution

Employer identification number 53 - 0206027

Form 990, Page 1, Line K
Form of organization (Other)
The Smithsonian Institution is a trust instrumentality of the U.S.,
created by Congress; organized pursuant to 20 U.S.C. sec. 41 et seq.
Form 990, Page 1, Line M
State of legal domicile:
As a trust instrumentality of the United States, the Smithsonian
Institution is a federal entity that is not domiciled in any state.
Form 990, Part III, Line 4a, Program Service Accomplishments:
O.S.
Research and Collections - The Smithsonian collections of nearly 154
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 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 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

Name of the organization Smithsonian Institution	Employer identification number 53-0206027
A fossil that has been in the National Museum of Natural History's	
collection since it was discovered in 1951 is helping scientists piece	
together the evolutionary history of whales and dolphins, including the	
origins of the endangered South Asian river dolphin. The fossil has	
been determined to belong to a dolphin that swam in subarctic marine	
waters about 25 million years ago. It represents a new genus and	
species, which Smithsonian scientists have named Arktocara yakataga.	
The 1 millionth object from the Smithsonian's collections was digitized	
by the Smithsonian's Mass Digitization Program. A silver-and-wood	
teapot crafted by African American master silversmith Peter Bentzon in	
Philadelphia between 1817 and 1829 is one of the prized objects in the	
collection of the National Museum of African American History and	
Culture.	
Staff from the National Air and Space Museum and the Smithsonian's 3D	
Digitization Program discovered writing on the interior walls of the	
Apollo 11 command module - something that was previously unknown to the	
Smithsonian. The astronaut "graffiti," unseen for almost 50 years,	
includes notes, figures and a calendar, presumably written by the crew	
during their historic flight to the moon.	
The Smithsonian National Zoo celebrated the birth of three critically	
endangered red-ruffed lemurs born in April 2016. Unlike most primates	
who carry their offspring with them, red-ruffed lemurs typically leave	
their young in nests while they search for food. Native to the	
northeastern deciduous forests of Madagascar, these lemurs are	
northeastern deciduous forests of Madagascar, these lemurs are	Schedule O /Form 990 or 990-l

Schedule O (Form 990 or 990-EZ) (2015)

Name of the organization Smithsonian Institution	Employer identification number 53-0206027
considered critcally endangered by the International Union for	
Conservation of Nature due to deforestation, hunting and trapping for	
the pet trade.	
Michael Jordan donated a game-worn 1996 NBA Finals home jersey to the	
National Museum of African American History and Culture's permanent	
collection.	
Form 990, Part III, Line 4b, Program Service Accomplishments:	
Education, Public Programs and Exhibitions - The Arthur M. Sackler	
Gallery and Freer Gallery of Art opened "Turquoise Mountain Artists	
Transforming Afghanistan" March 5, 2016, in which a large gallery has	
been converted into a marketplace of Old Kabul with artisans	
demonstrating their skills in jewelry making, woodworking, calligraphy,	
ceramics and other crafts. Turquoise Mountain is a British charity	
based in Afghanistan that works with Afghan artisans and architects to	
revive the country's cultural heritage and revitalize Murad Khani,	
Kabul's historic Old City where artisans live and work. The immersive	
exhibition includes videos, an interactive touchscreen map, a	
caravanserai and a social-media wall.	
The first gallery on the National Mall designed for the learning needs	
of children from infancy to age 6 opened Dec. 9, 2015, at the National	
Museum of American History. "Wonderplace," a 1,700-square-foot	
children's center, provides the youngest historians with	
age-appropriate activities and experiences. The early-learning gallery	
completes the museum's 45,000-square-foot Innovation Wing, which	Schodula O (Form 990 or 990-F7) (2015

Schedule O (Form 990 or 990-EZ) (2015)

Name of the organization Smithsonian Institution	Employer identification number
	33 723327
features 12 exhibitions, learning spaces and program places all	
centered on the themes of invention, creativity and business.	
The National Museum of African American History and Culture opened to	
the public on September 24, 2016. Participants in the program included	
President Barack Obama and First Lady Michelle Obama, former President	
George W. Bush and Mrs. Laura Bush, Chief Justice John G. Roberts Jr.,	
Smithsonian Secretary David Skorton, Rep. John Lewis and Lonnie G.	
Bunch III, the museum's founding director. Vice President Joseph R.	
Biden Jr., Dr. Jill Biden and former President Bill Clinton also	
attended the ceremony.	
The Smithsonian Asian Pacific American Center debuted CrossLines: A	
Culture Lab on Intersectionality" at the historic Arts and Industries	
Building. The two-day event over Memorial Day weekend featured the	
works of more than 40 artists, scholars and performers. "CrossLines"	
began traveling to various cities after closing at the Smithsonian.	
The National Museum of the American Indian presented a free	
museum-wide, two-day festival celebrating the Choctaw Nation of	
Oklahoma's tribal history and heritage. There were hands-on activities	
for children and families including crafting corn-husk dolls and beaded	
necklaces.	
The Anacostia Community Museum presented "Twelve Years that Shook and	
Shaped Washington: 1963-1975," an exhibition documenting the slow but	
steady movement toward home rule as District residents obtained	
appointed representation and later the right to elect them. "Twelve	
532212 09-02-15	Schedule O (Form 990 or 990-EZ) (2015)

Name of the organization	Employer identification number
Smithsonian Institution	53-0206027
Years" also included historical images, autobiographical stories and	
interviews with current and former Washingtonians involved with or	
observers of events significant to the era.	
OBSCIVED OF EVENES SIGNIFICANCE to the CIU.	
The National Air and Space Museum's GE Aviation Series featured two	
accomplished and decorated female pilots-Suzanna Darcy-Hennemann, who	
anaka ahaut har aynariangag ag Daging's first famala tast pilat and	
spoke about her experiences as Boeing's first female test pilot, and	
Lt. Col. Christine Mau, the first and only female pilot of the F-35.	
Form 990, Part III, Line 4c, Program Service Accomplishments:	
Membership - The National Associate program is the Institution's	
largest and most basic membership program. The program provides members	
with "Smithsonian" magazine which is published 11 rimes 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 in 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.	

Name of the organization Smithsonian Institution	Employer identification number
	53-0206027
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. In FY 2016 notable guests	
included Donna Karan, Kevin Costner, Shonda Rhimes and several members	
of ABC's "Scandal" cast.	
. 1	
Form 990, Part IV, Line 12b	
The Smithsonian's operations funded through federal appropriation are	
included in the U.S. Government's consolidated audited financial	
statements.	
Form 990, Part VI, Section A, line 1:	
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.	

Name of the organization Smithsonian Institution	Employer identification number 53-0206027
Form 990, Part VI, Section A, line 7a:	
Pursuant to federal statute, the Board of Regents consists of the Vice	
President of the United States, the Chief Justice of the United States,	
three members of the U.S. Senate, three members of the U.S. House of	
Representatives, and nine additional citizen Regents. The three Senators	
are appointed by the President Pro Tempore of the U.S. Senate, and the	
three members of the House of Representatives are appointed by the Speaker	
of the House of Representatives. Their appointment terms coincide with the	
terms for which they are elected, and they may be reappointed if	
re-elected. The citizen Regents are nominated by the Board of Regents, and	
appointed by a Joint Resolution of Congress which is signed by the	
President of the United States.	
Form 990, Part VI, Section B, line 11:	
The Form 990 return is prepared by staff in the Office of Finance &	
Accounting. It is then reviewed by the Director of Finance and Accounting,	
the Office of General Counsel, Chief Financial Officer and the Secretary of	
the Smithsonian, as well as by external tax advisors. 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.	
Form 990, Part VI, Section B, Line 12c:	
All officers, key employees, and certain other employees are required to	
complete and file annually a Confidential Financial Disclosure Report.	
These Reports - which require disclosure of certain assets, earned income,	
liabilities, outside positions, outside contracts and agreements, gifts,	
hospitality, reimbursements, and other interests related to the employee's	Schedule O (Form 990 or 990-F7) (2015

Schedule O (Form 990 or 990-EZ) (2015)

Name of the organization Smithsonian Institution	Employer identification number 53-0206027
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.	
Form 990, Part VI, Section B, Line 15:	
The Smithsonian ensures that compensation paid to officers and other key	
employees is reasonable and comparable to similar organizations. Employees	Schadula O (Form 990 or 990_E7) (2015)

Name of the organization Smithsonian Institution		Employer identification number
of the Smithsonian may be paid with federally appropriated funds	or with	33 0200027
nonfederal ("Trust") funds.	or with	
nonrederal (Trust) lunds.		
Most Trust funded (nonfederal) officer and key employee position	s are	
subject to market-based compensation, and the Board of Regent's	Committee	
on Compensation and Human Resources engages an independent consu	ltant to	
develop and assemble comparability data for its consideration an	d to inform	
its decisions. The Committee's annual deliberations and decision	ns are	
documented as part of the final recommendation materials submitte	ed to the	
Board of Regents.		
	1	
Salaries for Federal employees are determined by statutorily est	ablished	
pay ranges for civil service employees. As a matter of policy,	the	
Smithsonian has established similar ranges for certain Trust fun	led officer	
and key employee positions and maintains those ranges in proport	ion to the	
appropriate Federal pay ranges.		
Form 990, Part VI, Section C, Line 19:		
The Smithsonian makes its governing documents, statement of value	es and code	
of ethics, and audited financial statements available on its pub	lic website	
(www.si.edu). Documents may also be viewed at the Office of Fin	ance and	
Accounting or mailed.		
Form 990, Part XI, line 9, Changes in Net Assets:		
Change in related party net assets	131,547.	
Deferred gain on building	3,908,586.	
Change in minority interest - SNI/SI Networks LLC	2,433,900.	
Environmental remediation obligation FASB ASC 410-20	-1,123,640.	
532212 09-02-15	Sch	nedule O (Form 990 or 990-EZ) (2015

Name of the organization Smithsonian Institution	Employer identification number 53-0206027
Bad Debt reserve established for prior years pledge -10,000,000.	
Total to Form 990, Part XI, Line 9 -4,649,607.	
Form 990, Part VII and Schedule J-2	
The following are abbreviations found in the body of the return:	
OPMB - Office of Planning, Management and Budget	
SE - Smithsonian Enterprises	
•	

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.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Smithsonian Inst	itution				E	Employer identific 53-0206027	cation n	umber
Part I Identification of Disregarded Entities Co	mplete if the organization answered "Yes"	on Form 990, Part IV, line 3	3.					
(a)	(b)	(c)	(d)	(e))		(f)	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state foreign country)	I			:s Direct c	ontrollin ntity	g
		1						
		(6)0,						
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ganizations Complete if the organization a	answered "Yes" on Form 990	0, Part IV, line 34 b	ecause it had one	or mor	e related tax-exer	npt	
(a)	(b)	(c)	(d)	(e)		(f)	((g) 512(b)(13)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section		rect controlling entity	conf	trolled
				501(c)(3))			Yes	No
Clay Fellowships Charitable Trust -								
04-3560268, 10 Memorial Boulevard,	Support of Smithsonian			Line 11d,				
Providence, RI 02903	Astrophysical Observatory	Massachusetts	501(c)(3)	III-O	N/A			Х
Smithsonian UK Charitable Trust	Advance the work of the							
c/o Withers LLP, 16 Old Bailey	Smithsonian Institution				Smitl	nsonian		

UNITED KINGDOM

501(c)(3)

Line 7

Institution

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

worldwide

Schedule R (Form 990) 2015

Х

London, UNITED KINGDOM EC4M 7EG

Page 2

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

Organization to the transfer product of the transfer p											
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of	Disprop	ortionate	Code V-UBI	General	Percentage
of related organization		(state or foreign	entity	excluded from tax under	income	end-of-year assets		tions?	amount in box 20 of Schedule K-1 (Form 1065)	partner	e ownersnip
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	
]										
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	1			~ (C)							
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				•							

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	((i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	512(l contr	(b)(13) trolled tity?
		country)		or trusty		uosets		Yes	No
Charitable Remainder Trusts (2)									
1000 Jefferson Drive, S.W.	Charitable Remainder								
Washington, DC 20560	Trust	DC	N/A					X	
Charitable Remainder Trusts (2)									
1000 Jefferson Drive, S.W.	Charitable Remainder								
Washington, DC 20560	Trust	MA	N/A					Х	
Charitable Remainder Trusts (1)									
1000 Jefferson Drive, S.W.	Charitable Remainder								
Washington, DC 20560	Trust	MI	N/A					Х	
Charitable Remainder Trusts (5)									
1000 Jefferson Drive, S.W.	Charitable Remainder								
Washington, DC 20560	Trust	NY	N/A					X	
Charitable Remainder Trusts (4)									
1000 Jefferson Drive, S.W.	Charitable Remainder								
Washington, DC 20560	Trust	VA	N/A					Х	

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

	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No				
	During the tax year, did the organization engage in any of the following transactions										
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		Х				
b	Gift, grant, or capital contribution to related organization(s)				1b		Х				
С	Gift, grant, or capital contribution from related organization(s)				1c	Х					
d	Loans or loan guarantees to or for related organization(s)				1d		X				
е	e Loans or loan guarantees by related organization(s)										
f	Dividends from related organization(s)				1f		Х				
g											
h	Purchase of assets from related organization(s)				1h		Х				
i	Exchange of assets with related organization(s)				1i		Х				
j	j Lease of facilities, equipment, or other assets to related organization(s)										
			1								
k	Lease of facilities, equipment, or other assets from related organization(s)		()		1k		Х				
ı	Performance of services or membership or fundraising solicitations for related organ	nization(s)			11		Х				
m	Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) 1 n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) 1										
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization	on(s)			1n		Х				
0	Sharing of paid employees with related organization(s)				10		Х				
р	Reimbursement paid to related organization(s) for expenses	X			1p		х				
a .					1a		Х				
•		,									
r	Other transfer of cash or property to related organization(s)				1r		х				
	Other transfer of cash or property from related organization(s)				1s	Х					
	If the answer to any of the above is "Yes," see the instructions for information on w				1						
		-		·							
	(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amount inv	olved						
	•	type (a-s)		Ğ							
(1)											
(2)											
<u>(3)</u>											
(4)											
(7)											
(5)											

Schedule R (Form 990) 2015 532163 09-08-15

Schedule R (Form 990) 2015 Smithsonian Institution 53-0206027 Page 4

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

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

(a)	(b)	(c)	(d)	(e) Are all	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners se	Share of	Share of	Dispropor	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or	Percentage
of entity		(state or foreign	related, unrelated, lexcluded from tax under	partners se 501(c)(3) orgs.?) total	end-of-year	allocations	amount in box 20 of Schedule K-1?	partner?	ownership
		country)	sections 512-514)	Yes No		assets	Yes No	(Form 1065)	Yes NO	
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	_									
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