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

OMB No. 1545-0047 2015
Open to Public Inspection

Internal Revenue Service

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

		-	•
>	Information about Form 990 and its instructions is	at www.irs.g	ov/form990.

A F	or the	e 2015 calendar year, or tax year beginning OCT 1, 2015 and 6	enaing Si	SP 30, 2016	
3 C	heck if	C Name of organization		D Employer identif	fication number
	Addre	ss Smithsonian Institution			
	Name	Doing business as		53-02	06027
	]Initial return	A COLUMN TO A COLU	Room/suite	E Telephone numb	er
	Final return	, 1000 Jefferson Drive, S. W.		· ·	33-1000
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,628,330,534.
	Amen return	Washington, DC 20560		H(a) Is this a group	
	Applie tion			for subordinate	es? Yes X No
	pendi	1000 Jefferson Dr., Sw., Washington, DC 20560		H(b) Are all subordinates	included? Yes No
		empt status: 🗓 501(c)(3) 🔲 501(c) ( ) ◀ (insert no.) 🔲 4947(a)(1) o	or 527	1	a list. (see instructions)
		te: > www.si.edu		H(c) Group exempti	
		organization: Corporation Trust Association X Other ► Sch O	L Year	of formation: 1846	M State of legal domicile:
PE	rt I	Summary		<del> </del>	
9	1	Briefly describe the organization's mission or most significant activities: "Increa	ise and d	iffusion of	
ıan		knowledge" is the mission set forth by James Smithson.			· · · · · · · · · · · · · · · · · · ·
/err	_	Check this box if the organization discontinued its operations or dispos		1	1
g)	3				<del></del>
8	4			·····	
Activities & Governance	_				
	6				
Ac					
	В	Net unrelated business taxable income from Form 990-1, line 34	·····		<del></del>
_	8	Contributions and grants (Part VIII, line 1h)	ļ		
Revenue	9			<del> </del>	
	10	• • • • • • • • • • • • • • • • • • • •			<del></del>
Œ	11				
	12				<del></del>
	13			<del></del>	<del></del>
	14	50 50 114 5 1 50 1M 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			
Ģ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		614,850,732	. 653,696,354.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		6,348,145	
De C		Total fundraising expenses (Part IX, column (D), line 25) 50,181,			
Ω į		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		581,335,768	. 631,334,735.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,220,524,063	1,307,694,171.
	19	Revenue less expenses. Subtract line 18 from line 12		134,213,765	. 141,936,211.
d Balances			Be	<del>``</del>	
alan	20	Total assets (Part X, line 16)		4,516,291,473	4,712,932,038.
38	21	Total liabilities (Part X, line 26)			
켣	22	Net assets or fund balances. Subtract line 21 from line 20		3,638,578,392	3,830,939,636.
1,71,741,7		Signature Block			
					my knowledge and belief, it is
rue,	corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer	has any knowledge.	
		Signature of officer	the governing body (Part VI, line 1a)  members of the governing body (Part VI, line 1b)  ployed in calendar year 2015 (Part V, line 2a)  timate if necessary)  time 10		
Sigr		l' -		Date	•
Her	9	Type or print name and title			
			10	Date Check	I II PTIN
Pald	]	Print/Type preparer's name  Margaret A. Bradshaw  Preparer's signature  Margaret A. Bradshaw		H	
	arer	Firm's name KPMG LLP			0,00
	Only	Firm's address 1676 International Drive		THE SERVE	
	J,	McLean, VA 22102		Phone no (7	03)286-8000
VIav	the I	RS discuss this return with the preparer shown above? (see instructions)		1. 110110 110.1 1	X Yes No
_	11 12-				Form 990 (2015)

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Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
-	"Increase and diffusion of knowledge" is the mission set forth by		
	James Smithson. The Smithsonian endeavors to shape the future by		
	preserving our heritage, discovering new knowledge, and sharing our		
	resources with the world.		
2	Did the organization undertake any significant program services during the year which were not listed on		
2		Γ	Yes X No
		L	Tes La_ NO
_	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	'L	Yes X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ers, the total ex	penses, and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 488,998,307. including grants of \$ 17,555,691. ) (Reven	iue \$	45,537,335.
	4A Research and Collections (See Schedule 0)		
4b	(Code: ) (Expenses \$ 435,043,315. including grants of \$ 1,387,230.) (Reven	iue \$	51,675,934.)
	4B Education, Public Programs and Exhibitions (See Schedule 0)		_
			_
4c	(Code: ) (Expenses \$ 76,550,443. including grants of \$ ) (Reven	iue \$	63,129,565.)
	4C Membership (See Schedule 0)		_
			_
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$		)
4e	Total program service expenses 1,000,592,065.		

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See Schedule O for Continuation(s)

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# 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	Х	
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	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			l
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
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	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		37	
4-	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	4-	v	
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	4.	v	
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-	v	
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	4.	v	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		x
	complete Schedule G, Part III	19		^_

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

20-	Did the organization energia one or more beenital facilities? If "Ves " complete Schedule U	200	Yes	No X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
- '	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	
b	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
d	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):			
	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		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? 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	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		37	
~4	contributions? If "Yes," complete Schedule M	30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			х
20	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		
32		32		х
33	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
J-T		34	х	
352	Part V, line 1  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?	555		<del>-</del>
-	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
	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?			
	Note. All Form 990 filers are required to complete Schedule O	38	х	l

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## Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			Щ
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 6935		17	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
2-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	0-	х	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?  If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3a 3b	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O  At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30	Λ	
<del>-t</del> a	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	х	
h	If "Yes," enter the name of the foreign country: Panama, Gabon	<del>T</del> a		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	Х	
		7h	Λ	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		
9	sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.	0		
	Did the appropriate appropriation realize any total blad distributions and appropriate ACCC	9a		
	Did the sponsoring organization make any taxable distributions under section 4906?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	0.5		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	44		v
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Smithsonian Institution

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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			
	<u> </u>		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 17			
	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 15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, 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	X	
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	X	
	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.)			
			Yes	No
	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		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	Describe 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	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40-	v	
40	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent	14	Α	
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_	The organization's CEO, Executive Director, or top management official	15a	х	
	Other officers or key employees of the organization	15b	X	
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130		
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	100		
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) a	availah	le	
	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, and	d finan	cial	
	statements available to the public during the tax year.	•		
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
-	Jean Garvin - 202-633-7218			
	2011 Crystal Dr., Arlington, VA 22202			

Form **990** (2015) 532006 12-16-15

## 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.

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

(A) Name and Title	(B) Average hours per		not c	Pos heck	more	l than is bot		( <b>D</b> ) Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer Officer	irecto	Highest compensated employee	tee)	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Honorable John Roberts, Jr.	0.50									
Regent		Х						0.	0.	0
(2) Honorable Joseph Biden	0.50									
Regent		Х						0.	0.	0
(3) Honorable Xavier Becerra	2.00	1								
Regent		Х						0.	0.	0
(4) Honorable John Boozman	2.00	4								
Regent		Х						0.	0.	0
(5) Honorable Thomas Cole	2.00	1						_	_	_
Regent		Х						0.	0.	0
(6) Honorable Sam Johnson	2.00	ł								_
Regent		Х						0.	0.	0
(7) Honorable Patrick Leahy	2.00	١,,,						0	0	0
Regent	2.00	Х						0.	0.	0
(8) Honorable David Perdue	2.00	X						0.	0.	0
Regent (9) Ms. Barbara Barrett	2,00	_						0.	0.	0
Regent	2.00	x						0.	0.	0
(10) Mr. Steve Case	2,00	A						· ·	0.	0
Regent	2.00	x						0.	0.	0
(11) Mr. John Fahey	2.00	<del> </del>								
Regent		x						0.	0.	0
(12) Dr. Shirley Ann Jackson	8.00									
Regent		х						0.	0.	0
(13) Mr. Robert Kogod	2.00									
Regent		х						0.	0.	0
(14) Dr. Risa Lavizzo-Mourey	2.00									
Regent		х						0.	0.	0
(15) Mr. Michael Lynton	2.00									
Regent		х						0.	0.	0
(16) Mr. John McCarter	16.00									
Regent		Х						0.	0.	0
(17) Mr. David Rubenstein	2.00	1								
Regent		Х						0.	0.	0

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

FORM 990 (2015) SILITERSORTAL									33-0200027	rage <b>G</b>
Part VII Section A. Officers, Directors, Tru	stees, Key Em	ploy	ees	, an	d Hi	ghe	st C	ompensated Employe	es (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per week	hours per (do not check more than one box, unless person is both 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
(18) David Skorton	50.00									
Secretary				Х				508,315.	0.	53,045.
(19) Albert Horvath	50.00									
U/S Finance & Administration/CFO				Х				442,856.	0.	59,932.
(20) Cathy Helm	50.00									
Inspector General				Х				179,434.	0.	19,216.
(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.
(23) Nancy Bechtol	50.00									
Director - Facilities					х			189,653.	0.	25,933.
(24) Claudine Brown(decd 03/17/16)	50.00									
Asst Sec - Education and Access					х			261,211.	0.	46,853.
(25) Deron Burba	50.00									
Chief Information Officer		1			х			189,561.	0.	44,228.
(26) Amy Chen	50.00									
Chief Investment Officer					х			509,771.	0.	37,033.
1b Sub-total							<b>▶</b>	2,588,243.	0.	341,170.
c Total from continuation sheets to Part \							<b>&gt;</b>	5,720,858.	0.	806,547.
d Total (add lines 1b and 1c)							<b>•</b>	8,309,101.	0.	1,147,717.

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

1,363

			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	3	Х	
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	4	Х	
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		Х

#### 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.

Description of services	Compensation
Construction	133,534,271.
Exhibit Design	20,016,314.
Construction	18,329,129.
Construction	18,115,331.
Construction	13,160,731.
those listed above) who received more than 408	
	Exhibit Design  Construction  Construction  Construction  those listed above) who received more than

See Part VII, Section A Continuation sheets

Form **990** (2015)

Form 990 Smithsonian Institution 53-0206027

d Employees (conti	inued)	
(	(E)	(F)
able Repo	ortable	Estimated
ation compe	ensation	amount of
from	related	other
"		compensation
,	)99-MISC)	from the
MISC)		organization and related
		organizations
		5. ga <u>_</u> a5
49,878.	0.	59,932
00,468.	0.	36,638
84,117.	0.	29,921
83,014.	0.	46,225
64,709.	0.	25,382
12,848.	0.	56,047
12,119.	0.	33,998
56,943.	0.	17,170
48,558.	0.	35,001
28,563.	0.	61,991
73,242.	0.	15,178
87,036.	0.	36,811
76,679.	0.	14,637
33,555.	0.	59,441
		50.005
89,547.	0.	60,026
		50 045
90,465.	0.	59,347
24 400		56 400
34,429.	0.	56,409
50 027		42 261
50,92/.	0.	43,261
42 020		4 005
43,239.	0.	4,907
F7 670	_	00 450
51,619.	0.	20,458
4	50,927. 43,239. 57,679.	43,239. 0.

Form 990 Smithsonian Institution 53-0206027

Form 990 Smithsonian  Part VII Section A. Officers, Directors, T	Institution		200	s a	nd l	liah		Compensated Employ	53-020602	1
(A)	(B)	lipit	Јусс	;5, a ((	C)	iigii	ESL	(D)	(E)	(F)
Name and title		Average Position				Reportable	Reportable	Estimated		
	hours				compensation	amount of				
	per						Ī	from	from related	other
	week	_				Highest compensated employee		the	organizations	compensation
	(list any	irecto				emp		organization	(W-2/1099-MISC)	from the
	hours for related	e or d	tee			sated		(W-2/1099-MISC)		organization and related
	organizations	truste	al frus		yee	mpen				organizations
	below	Individual trustee or director	ution	_	Key employee	st co	e e			5. ga <u>_</u> a
	line)	Indiv	Institutional trustee	Officer	Key e	Highe	Former			
47) Kenneth Johnson	50.00									
ormer Acting Director - OPMB							х	177,752.	0.	8,63
48) Andrew Zino	50.00									
ormer Comptroller							Х	165,091.	0.	25,130
			_							
		_	_							
		-								
		-								
			$\vdash$	$\vdash$		-	$\vdash$			
otal to Part VII, Section A, line 1c								5,720,858.		806,54

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 26,497,332 Program Service Revenue 2 a Visitors/Members/Emplo 900099 49,749,773 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 g Total. Add lines 2a-2f 109,747,404 Investment income (including dividends, interest, and 13,983,057 13,983,057. other similar amounts) Income from investment of tax-exempt bond proceeds 14,688,923. 14,688,923. 5 Royalties ..... (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses ...... c Rental income or (loss)  $\triangleright$ 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 Part IV, line 18 a 1,467,824 Other **b** Less: direct expenses ..... 2,267,022 c Net income or (loss) from fundraising events -799,198 -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 С d All other revenue 12,951,235 e Total. Add lines 11a-11d 1,449,630,382 17,627,639. 90,515,312. Total revenue. See instructions. 120,038,370.

532009 12-16-15 Form **990** (2015)

### 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).

Sect	ion 501(c)(3) and 501(c)(4) organizations must com			. , ,	
	Check if Schedule O contains a respon	7.5			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	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,	E 454 400	4 000 007	4 004 005	407.000
_	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	2 500 014	2 500 452	101 561	
_	persons described in section 4958(c)(3)(B)	3,790,014.		191,561.	00 035 005
7	Other salaries and wages	489,706,830.	352,427,453.	116,341,470.	20,937,907.
8	Pension plan accruals and contributions (include	CA 772 FAC	40 444 040	12 666 220	2 662 170
•	section 401(k) and 403(b) employer contributions)	64,772,546. 54,963,088.		13,666,320.	2,662,178.
9	Other employee benefits			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):				
a	• • • • • • • • • • • • • • • • • • • •	4 124 000	2,938,962.	1 100 042	6,294.
b	Legal	4,134,098. 823,533.	2,930,902.	1,188,842. 823,533.	0,294.
C	Accounting	023,333.		023,333.	
d	Lobbying	3,720,161.			3,720,161.
e f	Investment management fees	2,491,374.		2,491,374.	3,720,101.
g		2,151,571.		2,151,571.	
9	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.		
С	Collections & Equipmnt/	24,200,892.	23,613,959.	481,446.	105,487.
d	OH Cost Recovery Grants	0.	24,146,000.	-24,146,000.	
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,307,694,171.	1,000,592,065.	256,920,220.	50,181,886.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here 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)

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 **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 11,162,602. 13,084,526. Inventories for sale or use 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. Investments - publicly traded securities 264,932,851. 11 414,869,111. 11 1,106,485,966. 1,127,208,144. 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 13 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. 17 286,293,705. 17 Accounts payable and accrued expenses 18 18 Grants payable 319,622,707. 343,096,650. 19 19 Deferred revenue Tax-exempt bond liabilities 102,767,192. 101,221,443. 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 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.

06/26/17

Total liabilities and net assets/fund balances \_\_\_\_\_\_

orm	1990 (2015) Smithsonian Institution	53-020602	7	Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				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	6	,		
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-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.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	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 reviewed	d 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 separat	e 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	e 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 Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle 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 requ	ired audit			

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form **990** (2015)

#### **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** Smithsonian Institution

									3-0206027
Pa	rt I	Reason for Public (	Charity Status (	All organizations must co	omplete th	is part.) Se	e instructions.		
he.	organ	ization is not a private found	ation because it is: (	(For lines 1 through 11, o	heck only	one box.)			
1		A church, convention of ch	urches, or association	on of churches describe	d in <b>sectio</b>	n 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 orga	anization described in <b>s</b> e	ection 170	)(b)(1)(A)(ii	i).		
4		A medical research organiz	ation operated in co	njunction with a hospita	describe	d in <b>sectio</b>	n 170(b)(1)(A)(	iii). Enter	the hospital's name,
		city, and state:							
5		An organization operated for	or the benefit of a co	ollege or university owner	d or opera	ted by a go	overnmental ur	nit describ	ed in
		section 170(b)(1)(A)(iv). (C	complete Part II.)						
6		A federal, state, or local gov	vernment or governr	mental unit described in	section 17	70(b)(1)(A)	(v).		
7	Х	An organization that norma	lly receives a substa	intial part of its support	rom a gov	ernmental	unit or from th	e general	public described in
		section 170(b)(1)(A)(vi). (Co	omplete Part II.)						
8		A community trust describe		(1)(A)(vi). (Complete Par	t II.)				
9		An organization that norma				contributio	ons, membersh	nip fees, a	nd gross receipts from
		activities related to its exem							
		income and unrelated busin							
		See section 509(a)(2). (Cor		,			, ,		·
10		An organization organized a	-	ively to test for public sa	fety. See	section 50	9(a)(4).		
11		An organization organized a	and operated exclus	ively for the benefit of, to	perform	the functio	ns of, or to car	ry out the	purposes of one or
		more publicly supported or	ganizations describe	ed in <b>section 509(a)(1)</b> o	r section	509(a)(2). S	See <b>section 5</b> (	<b>09(a)(3).</b> C	heck the box in
		lines 11a through 11d that	-						
а		Type I. A supporting orga	nization operated, s	supervised, or controlled	by its sup	ported org	anization(s), ty	pically by	giving
		the supported organization	on(s) the power to re	gularly appoint or elect	a majority	of the direc	ctors or trustee	s of the s	upporting
		organization. You must c	omplete Part IV, Se	ections A and B.					•
b		Type II. A supporting orga	anization supervised	d or controlled in connec	tion with it	ts supporte	ed organization	n(s), by ha	ving
		control or management o	f the supporting org	anization vested in the s	ame perso	ons that co	ntrol or manag	e the sup	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.					
С		Type III functionally inte	grated. A supportin	g organization operated	in connec	tion with, a	and functionall	y integrate	ed with,
		its supported organization	n(s) (see instructions	s). You must complete	Part IV, Se	ections A,	D, and E.		
d		Type III non-functionally	<b>integrated.</b> A supp	orting organization oper	ated in co	nnection w	ith its support	ed organi	zation(s)
		that is not functionally int	egrated. The organiz	zation generally must sa	tisfy a dist	ribution red	quirement and	an attenti	veness
		requirement (see instruct	ions). <b>You must cor</b>	nplete Part IV, Sections	A and D	and Part	V.		
е		Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	Type I, Type I	I, Type III	
		functionally integrated, or	Type III non-function	nally integrated support	ing organi	zation.			
f	Ente	er the number of supported o	organizations						
g	Pro۱	vide the following information	about the supporte	ed organization(s).					
	(	i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9	(iv) Is the o listed i	rganızation in your			(vi) Amount of
		organization		above (see instructions))	governing (	document?	support (: instructio		other support (see instructions)
					Yes	No	matractic	113)	instructions)

LHA For Paperwork Reduction Act Notice, see the Instructions for

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

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Schedule A (Form 990 or 990-EZ) 2015

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Page 2

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

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

Sec	ction A. Public Support	, ,		,			
	ndar year (or fiscal year beginning in)	(a) 2011	<b>(b)</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>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Amounts from line 4	1126869412.	1120530769.	1190256002.	1097910208.	1221449061.	5757015452.
8	Gross income from interest,						
	dividends, payments received on						
	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						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						5005640005
	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 fo	•	s first, second, third	d, fourth, or fifth ta	ix year as a sectio	n 501(c)(3)	. □
Sec	organization, check this box and stop etion C. Computation of Pub		rcentage				<u></u>
	·			olumn (fl)		14	97.81 %
	Public support percentage for 2015 (					15	97.81 % 97.94 %
	Public support percentage from 2014 33 1/3% support test - 2015. If the					L	
106							
	stop here. The organization qualifies 33 1/3% support test - 2014. If the						
	and stop here. The organization qua						
17:	10% -facts-and-circumstances tes						
110	and if the organization meets the "fac						
	meets the "facts-and-circumstances"				=	-	
r	10% -facts-and-circumstances tes						
	more, and if the organization meets t	_					
	organization meets the "facts-and-cir						´ <b>▶</b> □
18	Private foundation. If the organization			•			s
<u></u>	ato roundationi ii tilo organizatio	,, ala not oncor a	227 OH III O 10, 108	a, .00, ira, 01 17 b	, chook and box a	0000114011011	·

Schedule A (Form 990 or 990-EZ) 2015

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Schedule A (Form 990 or 990-EZ) 2015 Smithsonian Institution

### 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.)

Sec	etion A. Public Support	ciow, picase com	piete i urt ii.j				
	ndar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and	. ,		. ,		, ,	,,
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support		1	1			
	ndar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Amounts from line 6	<del>                                     </del>					
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	<del>                                     </del>					
b	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						
10	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
40	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)				<u> </u>	504( )(0)	<u></u>
14	First five years. If the Form 990 is for	· ·	,		-	. , . ,	
<u>S</u>	check this box and stop here etion C. Computation of Publication						<b>P</b>
	Public support percentage for 2015 (I			acluma (fl)		15	
	Public support percentage from 2014					16	<u>%</u> %
	tion D. Computation of Investigation					1 10 1	70
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	<del></del>
	33 1/3% support tests - 2015. If the						
.54	more than 33 1/3%, check this box a						
h	33 1/3% support tests - 2014. If the						
~	line 18 is not more than 33 1/3%, che	•			*	•	
20	<b>Private foundation.</b> If the organization			•		•	

Schedule A (Form 990 or 990-EZ) 2015

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Schedule A (Form 990 or 990-EZ) 2015 Smithsonian Institution

### 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
		. 55	
	1		
	2		
	За		
	Ja		
	3b		
	JD		
	3с		
	4-		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	•		
	8		
	9a		
	9b		
	9c		
	10a		
	10b		
rm 0	90 or 90	00-E7	2015

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a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

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

trustees of each of the supported organizations? Provide details in Part VI.

Schedule A (Form 990 or 990-EZ) 2015

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Pa	rt V │ Type III Non-Functionally Integrated 509(a)(3) Supporting	g 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 complete 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 <b>Part VI</b> ):							
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	/-integr	ated Type III supporting org	ganization (see				
	instructions)	_						

Schedule A (Form 990 or 990-EZ) 2015

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Par	rt V   Type III Non-Functionally Integrated	509	(a)(3) Supporting Org	anizations <sub>(continued)</sub>				
Secti	ction D - Distributions Current Year							
1	Amounts paid to supported organizations to accomplish exempt purposes							
2	Amounts paid to perform activity that directly furthers exempt purposes of supported							
	organizations, in excess of income from activity							
3	Administrative expenses paid to accomplish exempt pu	urpos	es of supported organizatior	ns				
4	Amounts paid to acquire exempt-use assets							
5	Qualified set-aside amounts (prior IRS approval require	:d)						
6	Other distributions (describe in Part VI). See instruction	ns.						
7	Total annual distributions. Add lines 1 through 6.							
8	Distributions to attentive supported organizations to wl	hich t	he organization is responsive	e				
	(provide details in <b>Part VI</b> ). See instructions.							
9	Distributable amount for 2015 from Section C, line 6							
10	Line 8 amount divided by Line 9 amount							
	•		(i)	(ii)	(iii)			
			Excess Distributions	Underdistributions	Distributable			
Secti	tion E - Distribution Allocations (see instructions)			Pre-2015	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								
d	From 2013							
е	From 2014							
f	Total of lines 3a through e							
	Applied to underdistributions of prior years							
	Applied to 2015 distributable amount							
i								
i	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							
	Applied to 2015 distributable amount							
	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 3	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:							
а								
b								
	Excess from 2013							
	Excess from 2014							
	Excess from 2015							

Schedule A (Form 990 or 990-EZ) 2015

Schedule A	(Form 990 or 990-EZ) 2015 Smithsonian Institution	53-0206027	Page 8
Part VI	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, 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; Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any a (See instructions.)	lines 1 and 2; Part IV, Sect Part V, Section B, line 1e; I	; ion C,

Schedule A (Form 990 or 990-EZ) 2015

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

Department of the Treasury Internal Revenue Service **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

Name of the organization

Employer identification number

53-0206027

Organiz	Organization type (check one):						
Filers of	f:	Section:					
Form 99	0 or 990-EZ	X 501(c)( 3 ) (enter number) organization					
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
		527 political organization					
Form 990-PF		501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
Check if	your organization is	s covered by the <b>General Rule</b> or a <b>Special Rule</b> .					
Note. O	nly a section 501(c)(	(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General	Rule						
		n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special	Rules						
X	sections 509(a)(1) a any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from r, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1. Complete Parts I and II.					
	year, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals. Complete Parts I, II, and III.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \bigcup \$						
but it <b>m</b> ı	ust answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

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)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Payroll Noncash (Complete Part II for noncash contributions.)

	· · · · · · · · · · · · · · · · · · ·	,	,	, ,	,	
Name o	f organization					Employer identification number
Smiths	sonian Inst	ituti	on			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
		\$	

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Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

me of organ	ization			Employer identification number
ithsonia	n Institution			53-0206027
art III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete	ributions to organizations described columns (a) through (e) and the follo	in section 501(c)(7), (8), owing line entry. For organization	ons
	completing Part III, enter the total of exclusively religiou Use duplicate copies of Part III if addition	s, charitable, etc., contributions of \$1,000 or	less for the year. (Enter this info. on	ce.) ► \$
) No.			( ) =	
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
-				
_   -				
		(e) Transfer of gif	t	
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor to transferee
-				
-		<del></del>		
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
#L1				
_				
-	_			
		(e) Transfer of gif	t	
	<b>-</b>	1710 4	5.1	
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor to transferee
-				
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
art I	(b) i dipose of gift	(c) Osc or girt	(u) Des	eription of now gift is field
-				
_   _				
-		(e) Transfer of gif	<u> </u>	
		(e) Transfer of gir	•	
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor to transferee
-		<del></del>		
No.			T	
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
-   -	-			
		(e) Transfer of gif	t	
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor 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

**Employer identification number** 

		Smithsonian Institution			53-0206027
Par	t I	Organizations Maintaining Donor Advised F	Funds or Other Similar Fund	s or Acco	<b>Dunts.</b> Complete if the
		organization answered "Yes" on Form 990, Part IV, line 6.			
			(a) Donor advised funds	<b>(b)</b> Fu	unds and other accounts
1	Totalı	number at end of year			
2		gate value of contributions to (during year)			
3		gate value of grants from (during year)			
4		gate value at end of year			
5		e organization inform all donors and donor advisors in writi		sed funds	
		e organization's property, subject to the organization's exc	_		Yes No
6		e organization inform all grantees, donors, and donor advis			
		aritable purposes and not for the benefit of the donor or do			
				•	Yes No
Par		Conservation Easements. Complete if the organi			
1		se(s) of conservation easements held by the organization (	· ·	•	
-		Preservation of land for public use (e.g., recreation or educ		torically imp	ortant land area
		Protection of natural habitat	Preservation of a cer		
		Preservation of open space			230.010
2		lete lines 2a through 2d if the organization held a qualified	conservation contribution in the form	n of a conse	rvation easement on the last
_		f the tax year.	5556. Valion Contribution III the IOIII	. 5. 4 0011361	Held at the End of the Tax Year
а	•			2a	
b		acreage restricted by conservation easements			<u> </u>
C		er of conservation easements on a certified historic structu			<u> </u>
		er of conservation easements included in (c) acquired after			, <u> </u>
u		. , .	,		0
2		in the National Register		· · · · · · · · · · · · · · · · · · ·	·
3	_	er of conservation easements modified, transferred, releas	sed, extinguished, or terminated by the	ie organizati	ion during the tax
	year D		nent is located > 1		
4		er of states where property subject to conservation easem			
5		the organization have a written policy regarding the period	0,		Yes X No
_		ons, and enforcement of the conservation easements it ho			
6	Stair a	and volunteer hours devoted to monitoring, inspecting, har	ndling of violations, and enforcing cor	iservation ea	asements during the year
-	_				
7		nt of expenses incurred in monitoring, inspecting, handling	of violations, and enforcing conserva	ation easem	lents during the year
_	<b>&gt;</b> \$	0.		2 (L) (A) (D) (')	
8		each conservation easement reported on line 2(d) above s	,	. , , , , , , ,	
_		ection 170(h)(4)(B)(ii)?			
9		t XIII, describe how the organization reports conservation of	•		
		e, if applicable, the text of the footnote to the organization	's financial statements that describes	the organiz	zation's accounting for
Dai	t III	ervation easements.  Organizations Maintaining Collections of A	rt Historical Transuras or C	hor Sim	pilar Assots
rai	t III	Complete if the organization answered "Yes" on Form 99		Julei Siiii	iliai Assets.
4-	16.41				-1
та		organization elected, as permitted under SFAS 116 (ASC 9	**		
		ical treasures, or other similar assets held for public exhibit		ance of pub	lic service, provide, in Part XIII,
		xt of the footnote to its financial statements that describes			
b		organization elected, as permitted under SFAS 116 (ASC 9	**		
		ires, or other similar assets held for public exhibition, educ-	ation, or research in furtherance of pu	ublic service	e, provide the following amounts
		g to these items:		į.	
		evenue included on Form 990, Part VIII, line 1			<b>.</b>
					· \$
2		organization received or held works of art, historical treasu		al gain, prov	vide
		llowing amounts required to be reported under SFAS 116 (			
		nue included on Form 990, Part VIII, line 1			\$
h	Accot	s included in Form 990 Part Y			. Φ

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Schedule D (Form 990) 2015

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		PUBLIC INS	SPECT	ION C	OPY						
Coho	edule D (Form 990) 2015 Smithsonian	Institution					5	3-02060	127	D	age <b>2</b>
	rt III   Organizations Maintaining Co		rt. Histo	rical Tr	easures. (	or Othe					age Z
3	Using the organization's acquisition, accession										ıs
_	(check all that apply):	,	,	,			9				-
а		c	x Lc	an or excl	hange progra	ams					
b		e		her	3 1 3						
С	X Preservation for future generations			-							
4	Provide a description of the organization's co	llections and explai	in how the	y further th	ne organizati	on's exer	npt purpo	se in Part	XIII.		
5	During the year, did the organization solicit or	·			J						
	to be sold to raise funds rather than to be ma							х	Yes		No
Pai	rt IV Escrow and Custodial Arrang	gements. Comple	ete if the o	rganizatio	n answered	"Yes" on	Form 990	, Part IV,	line 9, o	r	
	reported an amount on Form 990, Part	t X, line 21.									
1a	Is the organization an agent, trustee, custodia	an or other intermed	diary for co	ntribution	s or other as	sets not	included				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII a										
									Amoun	t	
С	Beginning balance						. 1c				
d	Additions during the year						. 1d				
е	Distributions during the year						. 1e				
f	Ending balance								,		_
	Did the organization include an amount on Fo						•	L	Yes	Ļ	No
	If "Yes," explain the arrangement in Part XIII.										
Pai	rt V Endowment Funds. Complete if										
		(a) Current year	<del>- `                                   </del>		(c) Two yea		<b>d)</b> Three ye				
		1,288,235,067.	<u> </u>			<del></del>				,279	
	Contributions	52,940,072. 99,512,052.		26,188. 26,301.		4,600.		51,990. 75,394.		,505,	
	Net investment earnings, gains, and losses	99,512,052.	2,9	20,301.	130,40	3,329.	139,0	75,394.	121	, 101	102.
	' ······										
е	Other expenditures for facilities	67,486,808.	59.6	63,483.	57 26	6,941.	55 41	08,994.	51	,207	1//
	and programs  Administrative expenses	4,445,386.				7,377.		90,934.		,928	
	<i>.</i>	1,368,754,997.								<u> </u>	
g 2	Provide the estimated percentage of the curre					•,	_,_,_,	,	_, -, -	,	
		46.00	% (iiiic 19,	COIGITIIT (E	ij) ricia as.						
	Permanent endowment 33.41	%									
	Temporarily restricted endowment	20.59 %									
_	The percentages on lines 2a, 2b, and 2c shou	-									
За	Are there endowment funds not in the posses	•	ation that	are held a	nd administe	ered for th	ne organiz	ation			
	by:	•					· ·			Yes	No
	(i) unrelated organizations								3a(i)		Х
	(ii) related organizations										Х
b	If "Yes" on line 3a(ii), are the related organizat										
4	Describe in Part XIII the intended uses of the	organization's endo	owment fu	nds.							
Pai	rt VI Land, Buildings, and Equipm										
	Complete if the organization answered	l "Yes" on Form 990	0, Part IV,	ine 11a. S	See Form 990	), Part X,	line 10.				
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) Ac	cumulate	d T	(d) Boo	k valu	е
		basis (investr	ment)	basis	(other)	dep	reciation				
1a	Land				,582,149.					,582,	
	•				,662,916.		80,696,		1,800		
С	Leasehold improvements			129	,317,168.		72,611,0	066.	56	,706	102.

Schedule D (Form 990) 2015

117,706,264.

344,124,895.

2,332,085,530.

272,527,196.

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e Other

d Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

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390,233,460.

344,124,895.

Schedule D (Form 990) 2015 Smithsonian Insti	itution		53-0206027	Page 🤄
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes"				1
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation:	Cost or end-of-year mar	ket value
(1) Financial derivatives				
(2) Closely-held equity interests				
(A) Other (A) Global & Emerging Markets	368,682,24	2. End-of-Year Market	Value	
	281,915,71			
	277,953,29	_		
(C) Private Equity & Venture Capital (D) Natural Resources	73,042,03	_		
(E) Real Estate	103,644,65			
(F) Fixed Income	21,970,20	<del>-  </del>		
(G)	22,570,20			
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	1,127,208,14	4.		
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	on Form 990 Part IV lir	ne 11c. See Form 990. Part X. li	ne 13	
(a) Description of investment	(b) Book value	(c) Method of valuation:		ket value
(1)			·	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes"	on Form 990, Part IV, lir	ne 11d. See Form 990, Part X, li	ne 15.	
(a)	Description		<b>(b)</b> Boo	ok value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		<b>&gt;</b>	
Part X Other Liabilities.	E 000 B 1 N/ I	11 111 0 5 000 5		
Complete if the organization answered "Yes"  (a) Description of liability	on Form 990, Part IV, III	ne 11e or 11f. See Form 990, Pa (b) Book value	art X, line 25.	
		(b) Book value		
(1) Federal income taxes (2) Environmental remediation obligation		51 300 604		
		51,380,604.		
(3)				
<u>(4)</u>				
(5)				
(6)				
(7)				
(8) (9)				
Total (Column (b) must equal Form 990, Part X, col. (B) lin.	9 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

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PUBLIC INSPECTION COPY Smithsonian Institution Page 4 Schedule D (Form 990) 2015 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements 1,577,109,649. 1 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains (losses) on investments 55,074,640 2a 9,367,394 **b** Donated services and use of facilities c Recoveries of prior year grants 2c 40,070,107 d Other (Describe in Part XIII.) 104,512,141. e Add lines 2a through 2d 1,472,597,508. Subtract line 2e from line 1 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 2 491 374 -25,458,500 **b** Other (Describe in Part XIII.) ..... -22,967,126. c Add lines 4a and 4b 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 1,449,630,382. 5 Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1,384,748,406. Total expenses and losses per audited financial statements 1 1 Amounts included on line 1 but not on Form 990. Part IX. line 25: a Donated services and use of facilities 9,367,394 2a **b** Prior year adjustments 2b 2c c Other losses d Other (Describe in Part XIII.) 71,345,346. 80,712,740. e Add lines 2a through 2d 3 Subtract line 2e from line 1 1,304,035,666. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 2,491,374 4a 1,167,131 **b** Other (Describe in Part XIII.) c Add lines 4a and 4b 3,658,505. 4c 1,307,694,171. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Part II, Line 3: Smithsonian Institution did not modify, transfer, release, extinguish or

terminate any conservation easements during the year.

Part II, Line 6

The Smithsonian Environmental Research Center (SERC) is located on 2,650

acres of land on the Chesapeake Bay in southern Maryland spanning

forests, wetlands, marshes, and 12 miles of protected shoreline. The

site serves as a natural laboratory for long-term and cutting-edge

ecological research. The Smithsonian has a conservation eastment

associated with property that is immediately adjacent to SERC land owned

by the Institution. Facilities and security staff visit the area

regularly, and are thus able to report any unusual activity on the land

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Schedule D (Form 990) 2015

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Schedule D (Form 990) 2015 Smithsonian Institution	53-0206027	Page <b>5</b>
Part XIII Supplemental Information (continued)		
subject to the easement. The organization does not separately track the		
hours and expenses associated with monitoring the property related to the		
easement.		
Part II, Line 9:		
The Smithsonian Institution's conservation easement does not appear in		
the Institution's audited financial statements.		
Part III, line 1a:		
In conformity with the practice generally followed by museums, no value is		
assigned to the collections in the statement of financial position.		
Purchases of collection items are recognized as reductions in net assets		
in the period of acquisition. Proceeds from sales of deaccessioned		
collection items or insurance recoveries for lost or destroyed collection		
items are recognized as increases in the approriate net asset class and		
are designated for future collection acquisitions.		
Part III, line 4:		
The acquisition, preservation, management, and study of collections are		
fundamental to the Smithsonian's mission to increase and diffuse knowledge		
and have been the foundation upon which it rests. Smithsonian collections		
are a national and global resource accessed each year by millions of		
visitors and researchers who use traditional methods and cutting-edge		
technologies to explore subjects from aeronautics to zoology. Through its		
collections, the Smithsonian presents the astonishing record of American		
and international artistic, historical, cultural, and scientific		
achievement, with a scope and depth no other institution in the world can		
match.		
Smithsonian collections contribute to population recovery of endangered		
	Schedule D (For	m 990) 2015

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Schedule D (Form 990) 2015 Smithsonian Institution	53-0206027	Page <b>5</b>
Part XIII   Supplemental Information (continued)		
species, advances in reproductive biology, genome resource banking,		
medical research, forensic analysis, bio-security, and conservation policy		
worldwide.		
Assembled over more than 165 years, the collections are central to the		
core activities and to the vitality and significance of the Smithsonian.		
Part V, line 4:		
The Endowment includes approximately 600 individual endowment funds. The		
Endowment provides stable financial support for scholarship, research		
activities, other programs, acquisitions of collections and other		
Institutional activities. It plays a critical role in enabling the		
Institution to achieve its mission - "the increase and diffusion of		
knowledge." The Endowment includes both donor-restricted endowment funds		
and funds designated by the Board of Regents to function as endowments.		
Classification and reporting of net assets associated with the Endowment		
reflect donor-imposed restrictions.		
Part X, Line 2:		
The Smithsonian recognizes the effect of income tax positions only if		
those positions are more likely than not of being sustained. The		
Smithsonian does not believe its financial statements include any		
uncertain tax positions.		
Part XI, Line 2d - Other Adjustments:		
Deferred gain on building 3,908,586.		
Change in net assets of related organizations 131,546.		
Change in minority interest - SNI/SI Networks LLC 2,433,900.		
532055 00.0315	Schedule D (For	m 990) 2015

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Schedule D (Form 990) 2015 Smithsonian Institution		53-0206027	Page <b>5</b>
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 statement	ts		
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.		
	-25,458,500.		
Part XII, Line 2d - Other Adjustments:			
Direct expenses - fundraising	2,267,022.		
Direct expenses - cost of goods sold			
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 statement	ts		

Schedule D (Form 990) 2015

### SCHEDULE F (Form 990)

**Statement of Activities Outside the United States** 

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

2015
Open to Public Inspection

Name of the organization

**Employer identification number** 

Smithsonian Institution 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, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total employees, agents, and independent expenditures is a program service, offices (by type) (e.g., fundraising, program for and in the region services, investments, grants to describe specific type investments contractors of service(s) in region recipients located in the region) in region in region Academic appointment Central America and stipends to recipients the Caribbean located in the region 1,952,019. Academic appointment stipends to recipients located in the region East Asia & Pacific 0 1,243,496. Academic appointment stipends to recipients 0 located in the region 2,349,314. Europe Academic appointment Middle East & North stipends to recipients located in the region Africa 0 114,985. Academic appointment stipends to recipients North America 0 located in the region 247,498. Academic appointment Russia & Neighboring stipends to recipients States located in the region 105,265. Academic appointment stipends to recipients located in the region 280,817. South America Academic appointment stipends to recipients located in the region South Asia 0 104,452. 3 a Sub-total 0 0 6,397,846. **b** Total from continuation 10 617 775,538,140. sheets to Part I ...... c Totals (add lines 3a 617 781,935,986. and 3b)

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Schedule F (Form 990) 2015

Schedule F (Form 990)	Smithsonian			53-020602	7 Page 1
Part I Continuation	n of Activitie	s per Regio	<b>n.</b> (Schedule F (Form 990), Part I, line 3	3)	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Sub-Saharan Africa	0	0	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	Travel 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	0	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		Program Services	Travel related to research, conferences and training	546,293.
Totals					

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	(b) Number of offices in the region	employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)  Program Services	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region  Research Facilities	(f) Total expenditures for region
he Caribbean	7	593	Program Services	Research Facilities	
he Caribbean	7	593	Program Services	Research Facilities	
the Caribbean  South America	7	593	Program Services	Research Facilities	
South America	1				25,596,686
South America	1			Design and implement a biodiveristy monitoring	
		7	Program services	progam	850,334
				Develop biodiversity action plan to conserve amazonian tropical	
Sub-Saharan Africa	1	8	Program Services	ecosystems	558,126
				Tropical Research/Forest	
East Asia & Pacific	0	0	Program Services	and Wildlife	888,893
Russia & Neighboring				Joint program with USAID for community-based tourism development in	
States	1	9	Program Services	Armenia	766,346
					,
				Tropical Research/Forest	
South America	0	0	Program Services	and Wildlife	163,512
Central America and the Caribbean	0	0	Investments		622,007,147
Europe	0	0	Investments		73,108,974
East Asia & Pacific	0	0	Investments		32,118,24
Sub-Saharan Africa	0	0	Investments		10,022,027
Totals					

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Schedule F (Form 990) Smithsonian Institution 53-0206027 Page 1

Schedule F (Form 990)	Smithsonian			53-02060	27 Page
			1.(Schedule F (Form 990), Part I, line 3)		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
orth America	0	0	Investments		4,019,073
otals	10	617			775,538,140

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Schedule F (Form 990) 2015

Part II

Smithsonian Institution

53-0206027

Page 2

Grants and Other Assistance to Org	anizations or Entities	Outside the United States. C	omplete if the or	ganization answered	d "Yes" on Form	990, Part IV, line 15, for	any
recipient who received more than \$5,0	00. Part II can be dupli	cated if additional space is nee	eded.				

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)		(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.		
			recognized as charities by the					
the IRS, or for which t			n 501(c)(3) equivalency letter					2

Schedule F (Form 990) 2015

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Smithsonian Institution 53-0206027 Page 3 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 a	additional space is neede	d.					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Academic Appointment Stipends	Central America and the Caribbean	252	1,952,019.	Direct Deposits & Checks	0.		
Academic Appointment Stipends	East Asia and the Pacific	50	1,243,496.	Direct Deposits & Checks	0.		
Academic Appointment Stipends	Europe	88	2,344,314.	Direct Deposits & Checks	0.		
Academic Appointment Stipends	Middle East and North Africa	7	114,985.	Direct Deposits & Checks	0.		
Academic Appointment Stipends	North America	20	247,498.	Direct Deposits & Checks	0.		
Academic Appointment Stipends	Russia and Neighboring States	3	75,995.	Direct Deposits & Checks	0.		
Academic Appointment Stipends	South America	21	280,817.	Direct Deposits & Checks	0.		
Academic Appointment Stipends	South Asia	5	104,452.	Direct Deposits & Checks	0.		
Academic Appointment Stipends	Sub-Saharan Africa	10	130,314.	Direct Deposits & Checks	0.		

Schedule F (Form 990) 2015

Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	□ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; 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

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## 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 candidates and then select the fellows. There are other competitive and non-competitive fellowships for visiting scholar and student appointees selected through the Smithsonian units that go through a variety of other selection processes before an award is made. An official letter/agreement is provided to each award recipient identifying the award title, dates of tenure, stipend allowances, and required responsibilities for holding this position. All recipients either will identify a financial institution for receipt of their monetary award or they will receive US Treasury checks. Depending on the tenure of the appointment, payments can range from one lump sum, biweekly payments or monthly payments. Most fellowship appointments are awarded for one to two years. On occasion, the Smithsonian Institution has visiting scholars or fellows who are conducting research in another country. Payments are usually submitted as stated above, however, on occasion there may be one or two who request that their payments be sent to the country of their research. At the end of tenure, a final report of their

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

Smithsonian

research accomplishments is provided for our records.

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## 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

#### **SCHEDULE G** (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

**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

No

Name of the organization

Smithsonian Institution

Employer identification number

53-0206027

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a X Mail solicitations e X Solicitation of non-government grants Internet and email solicitations f X Solicitation of government grants
- 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, Part VII) or entity in connection with professional fundraising services?

X Yes b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	` ' '		Did aiser ustody trol 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		Х	0.	2,274,218.	2,274,218.
Community Counselling Service						
- 3349 Highway 138, Wall, NJ	Fundraising Consultant		Х	0.	422,500.	422,500.
M & R Strategic Services -						
2120 L St NW, Washington, DC	Online Advisory Services		Х	0.	228,550.	228,550.
Blackbaud - PO Box 930256,						
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						
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			<b>&gt;</b>		3,720,161.	3,720,161.

 or licensing.				

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

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	41 6 1	of fundraising event contributions and great	•	,	, , ,	
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total avents
				American Portrait		(d) Total events
			Hirshhorn Gala	Gala	9	(add col. (a) through
Φ			(event type)	(event type)	(total number)	col. <b>(c)</b> )
Revenue	1	Gross receipts	1,427,800.	1,177,608.	2,509,586.	5,114,994.
ш		Less: Contributions	1,325,505.	1,054,362.	1,267,303.	
			102,295.	123,246.		
	3	Gross income (line 1 minus line 2)	102,293.	123,240.	1,242,283.	1,467,824.
	4	Cash prizes				
SS	5	Noncash prizes				
kpense	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 through	n 9 in column (d)		<b>&gt;</b>	2,267,022.
		Net income summary. Subtract line 10 from li			<b>)</b>	-799,198.
Pa	ırt I		answered "Yes" on Forn	n 990, Part IV, line 19, or i	reported more than	
		\$15,000 on Form 990-EZ, line 6a.	1	a Dulltok - foretent		
ne			(a) Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue				billigo/progressive billige		coi. (a) throught coi. (c)
Be	1	Gross revenue				
ses	2	Cash prizes				
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 through	n 5 in column (d)		<b>&gt;</b>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		<b>&gt;</b>	
		ter the state(s) in which the organization condu				
		the organization licensed to conduct gaming a	ctivities in each of these	states?		Yes No
r	) IT "	No," explain:				
10a	We	ere any of the organization's gaming licenses re	evoked, suspended or te	erminated during the tax y	/ear?	Yes No
b	lf "	Yes," explain:				
	_					
5320	82 09	9-14-15			Schedule G (For	m 990 or 990-EZ) 2015

Sch	nedule G (Form 990 or 990-EZ) 2015 Smithsonian Institution	53-0206	027		Page 3
11	Does the organization conduct gaming activities with nonmembers?		\	es/	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed				
	to administer charitable gaming?	[		es/	☐ No
12	Indicate the percentage of gaming activity conducted in:				110
		1	ا ءمه		07
	a The organization's facility		13a		<u>%</u>
	o An outside facility	<u>L</u>	13b		<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and record	ds:			
	Name				
	Address				
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	[	<u> </u>	es/	☐ No
k	o If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount	unt			
	of gaming revenue retained by the third party > \$				
,	of "Yes," enter name and address of the third party:				
•	on Tes, entername and address of the tillid party.				
	Name ▶				
	Address >				
16	Gaming manager information:				
	Name ▶				
	Gaming manager compensation ▶ \$				
	Description of services provided				
	☐ Director/officer ☐ Employee ☐ Independent contractor				
17	Mandatory distributions:				
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to				
Ī	retain the state gaming license?			es/	☐ No
	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent i	in the			
		11 1116			
Do	organization's own exempt activities during the tax year \$		0 (	N- 40	N- 451-
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and F 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	'art III, Ilne	es 9, s	9b, IC	JD, 15D,
Sch	nedule G, Part I, Line 2b Column (iv) and (v):				
SI	engaged multiple fundraising services and many work on the same				
cam	apaigns. It is not possible to accurately report the exact amount of				
rev	renue associated with each fundraiser. None of these fundraisers had				
con	strol 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	o consideration in future contract negotiations.				

Schedule G (Form 990 or 990-EZ) 2015

Schedule G (Form 990 or 990-EZ) Smithsonian Institution	53-0206027	Page 4
Part IV Supplemental Information (continued)		<u> </u>
Payments to Avalon Consulting Group of approximately \$2,046,550 are not		
reported in Part I. This amount is for reimbursements related to		
fundraising expenses of postage, printing and mailing lists.		
Schedule G, Part I, Line 3:		
SI is a trust instrumentality of the U.S. and as such is exempt from		
state regulations pursuant to the Supremacy Clause of the U.S.		
Constitution. All states that have inquired about SI fundraising		
soliciation registration have acknowledged this exemption.		

Schedule G (Form 990 or 990-EZ)

#### 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	ınd Assistance						
<b>1</b> Does the organization maintain records		e amount of the grants	s or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the selec	
criteria used to award the grants or assi							Yes No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to	_				anization answered "\	es" on Form 990, Parl	: IV, line 21, for any
recipient that received more than		<del>                                     </del>	1 .		(f) Method of	T	T
Name and address of organization or government	( <b>b)</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
American Council of Learned							
Societies - 633 Third Avenue, 8th							Academic Appointment
Flr - New York, NY 10017-6795	13-1851145	501(c)(3)	6,000.	0.			Stipend
Cornell University							
373 Pine Tree Road							Academic Appointment
Ithaca, NY 14850	15-0532082	501(c)(3)	46,407.	0.			Stipend
George Washington University 2121 I St MW							Academic Appointment
Washington, DC 20052	53-0196584	501(c)(3)	4,894.	0.			Stipend
Indiana University 400 E 7th Street, Rm 501 Bloomington, IN 35600-1673	35-6001673	115	12,500.	0.			Academic Appointment Stipend
Michigan State University							Academic Appointment
220 Trowbridge Road	38-6005984	115	5,000.	0.			Stipend
East Lansing, MI 48824	30-0003384	113	5,000.	0.			-
Ohio University HDL Center, Ste 279 Athens, OH 45701	31-6402113	115	3,395.	0.			Academic Appointment Stipend
2 Enter total number of section 501(c)(3) a	and government o	rganizations listed in tl	ne line 1 table				
3 Enter total number of other organization	s listed in the line	1 table					<b>)</b>
111A For Denominant Deduction Act Notice	and the Instruc	tions for Form 000					Cabadula I /Farm 000\ (0045\

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

Schedule I (Form 990) (2015)

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Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II.)	T
(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	<b>(h)</b> 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							
							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							Academic Appointment
12201	14-1368361	501(c)(3)	41,650.	0.			Stipend
Trustees of the Univ. of							
Pennsylvania - 3451 Walnut Street							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							
University of Maryland - College Park - 2119 Main Administration							Academic Appointment
Bldg - College Park, MD 20742	52-6002033	115	33,552.	0.			Stipend
			11,352.	<u> </u>			
Utah State University							
2400 Old Main Hill							Academic Appointment
Logan, UT 84322	87-6000528	115	3,500.	0.			Stipend

Schedule I (Form 990)

Schedule I (Form 990) (2015) Smithsonian Institution 53-0206027 Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (e) Method of valuation (book, FMV, appraisal, other) (a) Type of grant or assistance (b) Number of (d) Amount of non-(f) Description of non-cash assistance (c) Amount of recipients cash grant cash assistance 12,050,170. Academic Appointment Stipends 1096 0. Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Part IV 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

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committees comprised of the Institution's research staff who evaluate the

Schedule I (Form 990) Smithsonian Institution	53-0206027	Page <b>2</b>
Part IV Supplemental Information		
candidates and then select the fellows. There are other competitive and		
non-competitive fellowships for visiting scholar and student appointees		
selected through the Smithsonian units that go through a variety of other		
selections processes before an award is made. An official letter/agreement		
is provided to each award recipient identifying the award title, dates of		
tenure, stipend allowances, and required responsibilities for holding this		
position. All recipients either will identify a financial institution for		
receipt of their monetary award or they will receive US Treasury checks.		
Depending on the tenure of the appointment, payments may be made in a lump		
sum or in periodic payments. Most fellowship appointments are awarded for		
one to two years. At the end of tenure, a final report of their research		
accomplishments is provided for our records. Smithsonian research staff		
who serve as advisors to these fellows, students and scholars are usually		
in the field during their tenure. The individual Smithsonian research		
centers monitor the progress of their fellows, and the funds are managed		
through the Institution's central administration to ensure accountability.		
Similiar processes are followed for awards made to organizations whose		
academic staff perform the related research.		

Schedule I (Form 990)

### **SCHEDULE J** (Form 990)

**Compensation Information** 

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

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

Smithsonian Institution

Employer identification number 53-0206027

Pa	art I Questions Regarding Compensation			
	<u> </u>		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.			
	X Compensation committee			
	X Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		х
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
	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:			
а	The organization?	6a	Х	
	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe 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		

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

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015

Smithsonian Institution

53-0206027

Page 2

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that 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 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.	0.	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.	0.	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

Schedule J (Form 990) 2015

Smithsonian Institution

53-0206027

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 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	Dellents	(15)(1)-(10)	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.	0.	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.	0.	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)							

Schedule J (Form 990) 2015

Page 2

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

#### 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

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.
each successive level giving a higher incentive payment. In addition, the
eligible person must be employed by the organization on the last day of the
fiscal year in order to receive payment. Approvals for incentive payments
are tiered; any payment to a senior executive is reviewed by the Secretary,
with the Regents (either the Compensation Committee or the Full Board)
approving incentive payments to any disqualified person, any direct report
to the Secretary, and any executive with total cash above an annually
determined threshold. The Regents have delegated to the Secretary the
authority to approve other executive incentive payments. For
non-executives, the President of SE approves those payments, except for
payments above \$10,000 which go to the Secretary for approval.

Schedule J (Form 990) 2015

#### 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

Smithsonian Institution

**Employer identification number** 53-0206027

	Smithsonian Inst	itution							5.	3-020	6027			
Part I	Bond Issues													
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issu	ie price	(f) Description	on of purpose	( <b>g</b> ) De	feased	<b>(h)</b> On	behalf	(i) Po	ole
											of is	suer	finar	cin
									Yes	No	Yes	No	Yes	N
Fairf	ax County Economic Development													
A Autho	prity	54-0787833	30382ECZ5	12/03/03	77,5	545,000.	To construct	a museum		Х		Х		Х
<b>B</b> Distr	rict of Columbia	53-6001131	2548397S6	04/29/10	33,8	325,749.	Refunding of	1997 Bonds		Х		Х		Х
_														
С												$\vdash\vdash\vdash$		$\vdash$
D Part II	Proceeds											ш		
raitii	Froceeds						В	С				D		_
<b>1</b> Amo	ount of bonds retired				1		8,035,000.							_
	ount of bonds legally defeased						, , ,							_
	Il proceeds of issue				7,545,000.		33,825,749.							
	ss proceeds in reserve funds													_
	italized interest from proceeds													
<b>7</b> Issu	ance costs from proceeds				530,475.		612,994.							
8 Cred	dit enhancement from proceeds				6,161.									
	king capital expenditures from proceeds													
<b>10</b> Cap	ital expenditures from proceeds			7'	7,008,364.									
<b>11</b> Oth	er spent proceeds						33,212,755.							
<b>13</b> Yea	r of substantial completion				2003		2010							
44 144		·		Yes	No X	Yes X	No	Yes	No		Yes	+	No	—
	e the bonds issued as part of a current re				X	Α	х			-		+		
	e the bonds issued as part of an advance the final allocation of proceeds been mad				Λ	х	^					+		
				х		X						+		
	the organization maintain adequate books and records Private Business Use	to support the final allocat	ion of proceeds?											
· artin	Titale Business Osc						В	С				D		
1 Was	the organization a partner in a partnershi	p. or a member of a	ın LLC.	Yes	No	Yes	No	Yes	No		Yes	Ť	No	_
	ch owned property financed by tax-exemp		•		Х		Х					$\top$		
	there any lease arrangements that may re											$\top$		
bon	d-financed property?				Х		х							
32121	A For Paperwork Reduction Act Notic	a see the Instruct	ions for Form 990							Sche	dula K	(Forn	990	21

<sup>532</sup> LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule K (Form 990) 2015

Schedule K (Form 990) 2015 Smithsonian Institution 53-0206027 Page 2

Part III Private Business Use (Continued)

Part III Private Business Use (Continued)		_		_		_		
		Α		В		<u> </u>		
3a 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?		X	Х					
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
counsel to review any management or service contracts relating to the financed property?			Х					
c Are there any research agreements that may result in private business use of bond-financed property?		X		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?		х		х				
8a Has there been a sale or disposition of any of the bond-financed property to a non-								
governmental person other than a 501(c)(3) organization since the bonds were issued?		х		х				
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed		•		•		•		
of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections								
1.141-12 and 1.145-2?								
Has the organization established written procedures to ensure that all nonqualified								
bonds of the issue are remediated in accordance with the requirements under								
Regulations sections 1.141-12 and 1.145-2?	Х		х					
Part IV Arbitrage				•				
		A		В	(	C		<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?		Х		Х				
2 If "No" to line 1, did the following apply?		•		•				
a Rebate not due yet?		х		х				
b Exception to rebate?	Х		Х					
c No rebate due?		х		х				
If "Yes" to line 2c, provide in Part VI the date the rebate computation was								1
performed								
3 Is the bond issue a variable rate issue?	X	1		l x				
4a Has the organization or the governmental issuer entered into a qualified				1				
hedge with respect to the bond issue?		x		х				
						<u> </u>		
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?		+		+				
e Was the hedge terminated?								<u> </u>

532122 10-22-15

Schedule K (Form 990) 2015

Schedule K (Form 990) 2015 Smithsonian Institution			53-02	06027				Page 3
Part IV Arbitrage (Continued)					_			
		Ą		3	C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		X				
<b>b</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?	X		х					
Part V Procedures To Undertake Corrective Action								
		4	E	3		C		)
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of								
federal tax requirements are timely identified and corrected through the voluntary								
closing agreement program if self-remediation is not available under applicable								
regulations?	Х		х					
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedul	e K (see insti	ructions).	•	•	•		
Schedule K, Part I, Bond Issues, Column (f), Line B		·						
The issue date of the current refunded bonds was January 1, 1998.								
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

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Open To Public Inspection

Nam	e of the organization		•		Employer id	entificati	on nu	mber
	Smithsonian Instit	tution			53-0	0206027		
Pa	t I Types of Property				<u> </u>			
		(a)	(b)	(c)		(d)		
		Check if	Number of	Noncash contribution	Method of		_	
		applicable		amounts reported on Form 990, Part VIII, line 1g	noncash cont	ribution ai	mount	:S
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 Va	lue		
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles	X	6,862					
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy	Х	1					
22	Historical artifacts	Х	2,794					
23	Scientific specimens	X	56,145					
24	Archeological artifacts							
25	Other (Goods)	X	55	5,610,800.	Fair Market Va	.lue		
26	Other ( Arch cf/lf )	X	1,425	0.				
27	Other ( Archival misc )	X	11,477	0.				
28	Other ()							
29	Number of Forms 8283 received by the organ	ization durin	g the tax year for o	contributions				
	for which the organization completed Form 82	283, Part IV,	Donee Acknowled	gement 29			70	
							Yes	No
30a	During the year, did the organization receive b	y contribution	on any property re	ported in Part I, lines 1 throu	igh 28, that it			
	must hold for at least three years from the date			· · · · · · · · · · · · · · · · · · ·				
	exempt purposes for the entire holding period	l?				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	outions?	31	Х	
32a	Does the organization hire or use third parties	or related or	rganizations to sol	icit, process, or sell noncash	1			
						32a	Х	
	If "Yes," describe in Part II.							
33	If the organization did not report an amount in	column (c) 1	for a type of prope	rty for which column (a) is cl	necked,			

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

Schedule M (Form 990) (2015)

Schedule M (Form 990) (2015)

## **SCHEDULE 0** (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.

Department of the Treasury Internal Revenue Service

Name of the organization

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

**Employer identification number** 

OMB No. 1545-0047

Smithsonian Institution	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:	
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.	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 532211 09-02-15

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

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

northeastern deciduous forests of Madagascar, these lemurs are

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
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	

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

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization Smithsonian Institution	Employer identification number 53-0206027
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	_

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization Smithsonian Institution	Employer identification number 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.	
The National Air and Space Museum's GE Aviation Series featured two	
accomplished and decorated female pilots-Suzanna Darcy-Hennemann, who	
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 times a year.	
The print and online publication provides in-depth coverage of history,	
science, nature, the arts, and world cultures. "Smithsonian" magazine	
also hosts the annual Ingenuity Awards, honoring the best and the	
brightest innovators who are making a difference in the world 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.	
The Smithsonian Associates offers unparalleled access to the	

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

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
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.	
Farm 000 Park TV, I in a 12h	
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.	

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

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

Schedule O (Form 990 or 990-EZ) (2015)		Page 2
Name of the organization Smithsonian Institution		Employer identification number 53-0206027
of the Smithsonian may be paid with federally appropriated funds	or with	
nonfederal ("Trust") funds.		
monrederal ( frust ) funds.		
Most Trust funded (nonfederal) officer and key employee positions	s are	
subject to market-based compensation, and the Board of Regent's C	Committee	
on Compensation and Human Resources engages an independent consul	tant to	
develop and assemble comparability data for its consideration and	l to inform	
its decisions. The Committee's annual deliberations and decision	ns are	
documented as part of the final recommendation materials submitted	ed to the	
Board of Regents.		
Salaries for Federal employees are determined by statutorily esta		
pay ranges for civil service employees. As a matter of policy, t	the	
Smithsonian has established similar ranges for certain Trust fund	led officer	
and key employee positions and maintains those ranges in proportion	on 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 publ	ic website	
(www.si.edu). Documents may also be viewed at the Office of Fina	ince 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.	
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Schedule O (Form 990 or 990-EZ) (2015)	Page 2
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 O (Form 990 or 990-EZ) (2015)

#### **SCHEDULE R** (Form 990)

**Related Organizations and Unrelated Partnerships** 

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

➤ Attach to Form 990.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization

Smithsonian Institution

**Employer identification number** 53-0206027

(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	<b>(f)</b> Direct controlli entity

organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	conti	<b>g)</b> 512(b)(13) rolled tity?
				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				Smithsonian		
London, UNITED KINGDOM EC4M 7EG	worldwide	UNITED KINGDOM	501(c)(3)	Line 7	Institution	Х	
	-						
	-						

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

Schedule R (Form 990) 2015

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)		Share of end-of-year assets			Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General managi partne	or Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0

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) etion
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) rolled tity?
		country)		0. 1.0.0.9				Yes	No
Charitable Remainder Trusts (2)									
1000 Jefferson Drive, S.W.	Charitable Remainder								
Washington, DC 20560	Trust	DC	N/A					Х	
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					Х	
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 "Yes" on Form 990, Part IV, line 34, 35b, or 36	i.
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Not	te. 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 with one or more related organizations listed in Parts II-IV?			
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
	Gift, grant, or capital contribution from related organization(s)	1c	Х	
d	Loans or loan guarantees to or for related organization(s)	1d		Х
	Loans or loan guarantees by related organization(s)	1e		Х
f	Dividends from related organization(s)	1f		Х
g	Sale of assets to related organization(s)	1g		Х
h	Purchase of assets from related organization(s)	1h		Х
i	Exchange of assets with related organization(s)	1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		Х
1	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х
	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		Х
	Sharing of paid employees with related organization(s)	10		Х
р	Reimbursement paid to related organization(s) for expenses	1p		Х
	Reimbursement paid by related organization(s) for expenses	1q		Х
r	Other transfer of cash or property to related organization(s)	1r		Х
s	Other transfer of cash or property from related organization(s)	1s	Х	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

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

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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.

Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)		Are a partners 501 (c orgs	s sec. )(3) :.?	Share of total income	Share of end-of-year assets	Dispro tion allocat <b>Yes</b>	por- ate ions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gener mana partr	own	centage
of entity		(state or foreign country)	excluded from tax under sections 512-514)	orgs Yes			end-of-year assets	allocat	ions?	of Schedule K-1	partr	er? own	
		country)	sections 512-514)	Yes		income	assets	Vac					nership
								11621	NO.	(Form 1065)	Yes	NO	
	I												
								Ш			Ш		
					$\dashv$			Н				-	
					_			Ш					
					_			Н			$\Box$		
					$\dashv$			$\vdash\vdash$			$\vdash$		

Schedule R (Form 990) 2015

Schedule R	(Form 990) 2015	Smithsonian	Institution	53-0206027	Page <b>5</b>
Part VII	(Form 990) 2015  Supplemental Info	ormation			
			es to questions on Schedule R (see instructions).		
	T TOVIGO GGGILIOTIGI IITIOTI	nation for respons	oo to quodicino en contoquio in (coo inicinaciono).		

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