4	000 T		Exempt Organization Busin	ess	Income Tax	Retur	1		OMB No 1545-06	387
Form	990-T	_	(and proxy tax under	sect	ion 6033(e))	1900				
		For cale	ndar year 2018 or other tax year beginning 10/					l	2018	•
Denartm	ent of the Treasury	l or cale	► Go to www.irs.gov/Form990T for instru				•	<u> </u>		
	Revenue Service	Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).  Open to Public Inspection for 501(c)(3) Organizations Only								
	heck box if iddress changed		Name of organization (	anged a	nd see instructions)		D Emp		r identification nu	
	pt under section	١ ـ	SMITHSONIAN INSTITUTION				(Emp	oloyee	es' trust, see instruc	ctions)
_	on( C )(03)	Print or	Number, street, and room or suite no. If a P.O. box	k, see in:	structions			5	3-0206027	
□ 40	)8(e) 220(e)	Type	1000 JEFFERSON DRIVE S W						business activity uctions)	code
□ 40	98A 🔲 530(a)		City or town, state or province, country, and ZIP or	r foreign	postal code		(See	: 1115111	ucuoris )	
52			WASHINGTON, DC 20560						45	
C Book at en	yalue of all assets of year		oup exemption number (See instructions				1 1011			
			neck organization type ► ☐ 501(c) corp				401(a	<u> </u>		r trust
			organization's unrelated trades or busines						or first) unrelat	
					nly one, complete					
		-	at the end of the previous sentence, con omplete Parts III-V.	npiete	Parts I and II, co	mpiete a S	cneau	ie ivi	ior each add	illoriai
			e corporation a subsidiary in an affiliated gro		narant cubaidian	controlled a	roup?		▶ ☐ Yes 🗹	7 No
			e corporation a subsidiary in an anniated gro and identifying number of the parent corp			controlled g	oup:	•	P [] les E	J 140
			► OFFICE OF FINANCE & ACCOUNTING			one numbe	r 🕨		(202) 633-716	7
			e or Business Income		(A) Income		penses		(C) Net	<del></del>
	Gross receipts			T	· · · ·			*	* ***	<b>等公司</b>
, b	Less returns and		~	1c	o	j. i. 20	٠, ١	. 1		1
2			Schedule A, line 7)	2	0			١ -	なるない	-5°4
3			line 2 from line 1c	3	0	-	•		0	
4a			ne (attach Schedule D)		0	, , ,		, ,	0	
b	Net gain (loss)	(Form 4	4797, Part II, line 17) (attach Form 4797)	4b	0		-	-	0	<u> </u>
С	Capital loss de	eductio	n for trusts	4c	0	,		٠.	0	+
ষ্ট	Income (loss) fro	m a parl	tnership or an S corporation (attach statement)	5	0		<u>·                                      </u>	<u> </u>	0	<del></del>
THE GORAN	Rent income (	Schedu	lle C)	6	0		0		0	<del></del>
ತ			ced income (Schedule E)	7	0		0		0	<del></del>
€		•	and rents from a controlled organization (Schedule F)		0		0		0	+
≥9			ction 501(c)(7), (9), or (17) organization (Schedule G)		0		0		. 0	<del></del>
₹6			ivity income (Schedule I)	10	4,426,396	3,910	0,658		515,738	+
$\mathbf{d}^{1}$	_	•	Schedule J)	11	0		0	18	, o	<del> </del>
Щ <sup>2</sup>	•		ructions, attach schedule) .	12	4,426,396		0.658	- '	515,738	
<b>≥</b> 13 Part	Total. Combin		3 through 12					con		12.18.70
⋖	deduction	s must	be directly connected with the unrelate	ed bus	siness <del>ineome.\_</del>					
() () 14			cers, directors, and trustees (Schedule K)		RE	CEIVE	ח	14	位,形态10	1.334
15	Salanes and w						<u>ب</u>	.15	3.c - 4.c · · · · · · · · · · · · · · · · · · ·	,
16	Repairs and m	naintena	ance		AUI	1 8 202	n [	ўб.	357 ° 1 0	
17	Bad debts .					1 1 0 202	- 11 -	<u> </u>	<u> الراب</u> 0	
18	Interest (attach	n sched	lule) (see instructions)					स्र	•• 0	<del></del> -
19					. UG	DEN, L	IT L	19	. 0	<del></del>
20			ns (See instructions for limitation rules)					<b>2</b> 0	0	<del>                                     </del>
21	•		Form 4562)			0				1
22	•		imed on Schedule A and elsewhere on re			0		22b	0	<del> </del>
23							-	23 24	0	
24			rred compensation plans					25	0	
25 26			grams					26	0	
26 27			ists (Schedule J)					27	0	-
27 28			ach schedule)					2B		
28 29								<u>29</u>	0	<del></del>
30			xable income before net operating loss de					30	515,738	
31			ating loss arising in tax years beginning on o					31	*	33
32			exable income. Subtract line 31 from line					32	515,738	<del></del>
For Po			Notice see instructions		Cat No. 11291.I		<del>- 1'</del>		Form <b>990-T</b>	(2018)

Schedule A-Cost of Goods Sold.	Enter method	of invent	tory va	luation >				-
1 Inventory at beginning of year	1	0	6	Inventory a	at end of year	6	0	
2 Purchases	2	0	7	Cost of	goods sold. Subtract			
3 Cost of labor	3	0			line 5 Enter here and			
4a Additional section 263A costs			7	ın Part I, lır	ne 2	7	0	
(attach schedule)	4a	0	8	Do the rul	les of section 263A (wit	th respect to	Yes	No
b Other costs (attach schedule)	4b	0			roduced or acquired for			
5 Total. Add lines 1 through 4b	5	0		to the orga	nization?			
Schedule C-Rent Income (From R	leal Property	and Per	sonal	Property I	Leased With Real Pro	perty)		
(see instructions)	· <del></del>					<del></del>		
1. Description of property		·						
(1)				<del></del>	<del></del>	<u></u>		
(5)								
(3)								
(4)								
2. Rent rec	eived or accrued	····			-			
(a) From personal property (If the percentage of rer for personal property is more than 10% but not more than 50%)	percentage of		sonal pro	perty (if the perty exceeds fit or income)	3(a) Deductions directly in columns 2(a) and			3
(1)		· · · · · · · · · · · · · · · · · · ·			<del></del>			
(2)	1							
(3)								
(4)				<del></del> -				
	0 Total				0			
(c) Total income. Add totals of columns 2(a)					(b) Total deductions.  Enter here and on page	1		
here and on page 1, Part I, line 6, column (A)	and 2(b) the				0 Part I, line 6, column (B)			0
Schedule E-Unrelated Debt-Finan	ced Income	(see ınstru	uctions	)	1			
Description of debt-financed pr		2. (	Gross inc	ome from or debt-financed	t <u> </u>	ced property		
				perty	(a) Straight line depreciation (attach schedule)	(b) Other ded (attach sch		
(1)				<u></u>				
(2)								
(3)								
(4)								
acquisition debt on or of allocable to debt-financed debt-	age adjusted basis or allocable to financed property tach schedule)		4 div	olumn vided lumn 5	7. Gross income reportable (column 2 × column 6)	8. Allocable de (column 6 × total 3(a) and	of colu	
(1)				%				
(2)				%				
(3)				%				
(4)				%				
					Enter here and on page 1, Part I, line 7, column (A)	Enter here and Part I, line 7, c		
Totals .				<b>•</b>	o			0
Total dividends-received deductions include	ed in column 8				<u> </u>			0

Schedule F-Interest, Annu	uities,	Royalties,					<b>anizations</b> (see	e instru	ctions)	
						Organizations			_	
Name of controlled organization		Employer cation number			ted income structions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income		conne	ductions directly ected with income in column 5
(1)					-					
(2)										
(3)								1		
(4)										
Nonexempt Controlled Organiz	zations									
7. Taxable Income		Net unrelated ind ss) (see instructi				tal of specified ments made	10. Part of colum included in the corganization's gro	ontrolling	connec	eductions directly sted with income in column 10
(1)									<u> </u>	
(2)										
(3)				+				-	-	<del></del>
(4)							<del> </del>		-	
							Add columns 5 Enter here and o Part I, line 8, col	n page 1	, Enter h	columns 6 and 11 ere and on page 1, line 8, column (B)
Totals							<u> </u>		0	0
Schedule G-Investment I	ncom	e of a Sect	ion 50	1(c						tal deductions
1. Description of income		2. Amount of	income		direc	Deductions ctly connected ach schedule)	4. Set-asides (attach schedu			et-asides (col 3 olus col 4)
(1)										
(2)					ļ					
(3)										
(4)									<b>5</b>	
		inter here and Part I, line 9, c								re and on page 1, ne 9, column (B)
Totals	<b>•</b>			0	1					0
Schedule I-Exploited Exe	empt A	ctivity Inco	ome, C	Oth	er Than	Advertising In	come (see inst	ruction	s)	
Description of exploited activity	ty	2. Gross unrelated business incoi from trade o business	me c	dı onne prodi unr	kpenses rectly ected with action of related ss income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	attrıbı	penses utable to umn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1) RETAIL SHOPS		4,426,	396		3,910,658	515,738	41,421,972		2,155,811	0
(2) THEATER		170,0	089		253,504	(83,415)	7,693,338		7,444,035	0
(3) TRAVEL TOURS		187,	980		0	187,980	7,590,279		0	0
(4) (SEE STATEMENT)										
		Enter here and page 1, Part line 10, col (/	1,   5	bage	ere and on 1, Part I, 0, col (B)					Enter here and on page 1, Part II, line 26
Totals	<b>•</b>	5,377,			4,701,811					52,027
Schedule J-Advertising I										
Part I Income From P	eriodi	cals Repor	ted or	ı a	Consoli	dated Basis		1		· · · · · · · · · · · · · · · · · · ·
1. Name of periodical		2. Gross advertising income	ac		Direct ising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income		adership osts	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)										]
(2)			_			1				
(3)						]				
(4)										
Totals (carry to Part II, line (5))	<b>&gt;</b>		0	_	0	0				0_
									F	orm <b>990-T</b> (2018)

1

Part II	Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in c	alumna
raitii	income From Feriodicals neported on a Separate basis (For each periodical listed in Fart II, IIII III C	Olulliis
	2 through 7 on a line-by-line basis )	
3.13.1	2 through 7 on a line-by-line basis.)	O.G.

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1) SMITHSONIAN MAGAZINE	5,040,793	5,980,575	(939,782)			
(2) AIR & SPACE MAGAZINE	311,678	656,148	(344,470)			
(3) AMERICAN INDIAN MAGAZINE	16,200	53,187	(36,987)			
(4) (SEE STATEMENT)						
Totals from Part I	0	0				0
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1–5)	8,567,257	7,099,984				2,646,162

Schedule K-Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1) CAROL LEBLANC (12/10/2018 TO PRESENT)	PRESIDENT SMITHSONIAN ENTERPRISES	5 %	23,824
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0

Form **990-T** (2018)

# Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No 1545-0687

2018

Department of the Treasury Internal Revenue Service Name of the organization For calendar year 2018 or other tax year beginning 10/01, 2018, and ending 09/30, 20 19

► Go to www.irs.gov/Form990T for instructions and the latest information.

► Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Employer identification number

53-0206027 SMITHSONIAN INSTITUTION Unrelated business activity code (see instructions) ▶ Describe the unrelated trade or business ▶ THEATERS (A) Income (B) Expenses (C) Net Part I Unrelated Trade or Business Income 1a Gross receipts or sales 0 **b** Less returns and allowances c Balance ► 1c 0 2 Cost of goods sold (Schedule A, line 7) . 2 3 0 Gross profit. Subtract line 2 from line 1c . . . 3 0 0 4a Capital gain net income (attach Schedule D) . . . . 4a 0 0 **b** Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b 0 O c Capital loss deduction for trusts . . . . 4c Income (loss) from a partnership or an S corporation (attach Schadula C) 0 0 statement) 5 6 0 0 0 6 Rent income (Schedule C) 0 0 0 7 Unrelated debt-financed income (Schedule E) . 7 R Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 8 0 0 0 . . . . Investment income of a section 501(c)(7), (9), or (17) 9 organization (Schedule G) 9 0 0 0 10 170,089 253.504 (83.415)Exploited exempt activity income (Schedule I) . . 10 0 Advertising income (Schedule J) 11 0 0 11 0 0 Other income (See instructions, attach schedule) 12 12 13 170,089 253,504 (83,415) 13 Total. Combine lines 3 through 12 . . . . Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income) 0 14 Compensation of officers, directors, and trustees (Schedule K) . 14 Salaries and wages . . . . . 0 15 15 0 16 16 Repairs and maintenance . . . 0 17 Bad debts . . . . 17 18 0 18 Interest (attach schedule) (see instructions) 19 0 19 Taxes and licenses . . . . 0 20 Charitable contributions (See instructions for limitation rules) . . . . 21 21 0 22a 22b 22 Less depreciation claimed on Schedule A and elsewhere on return . 23 0 23 Depletion . . . . 24 0 24 Contributions to deferred compensation plans 25 0 25 Employee benefit programs . . . . . 0 26 26 Excess exempt expenses (Schedule I) . . . 27 0 Excess readership costs (Schedule J) 27 28 0 28 Other deductions (attach schedule) 29 0 29 Total deductions. Add lines 14 through 28 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 (83,415)30 31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see ō instructions) Unrelated business taxable income Subtract line 31 from line 30 (83,415)

For Paperwork Reduction Act Notice, see instructions.

Cat No 71329Y

# **Unrelated Business Taxable Income for Unrelated Trade or Business**

OMB No 1545-0687

Department of the Treasury Internal Revenue Service Name of the organization For calendar year 2018 or other tax year beginning 10/01, 2018, and ending

▶ Go to www.irs.gov/Form990T for instructions and the latest information. ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Open to Public Inspection for 501(c)(3) Organizations Only

Employer identification number

SMITH	HSONIAN INSTITUTION				53-02	206027	
Ur	nrelated business activity code (see instructions) ▶ 56						
De	escribe the unrelated trade or business  TRAVEL TOURS		=				
Pari	Unrelated Trade or Business Income		(A) Income	(B) Expense	es	(C) Net	
1a	Gross receipts or sales 0				T		
b	Less returns and allowances 0 c Balance ▶	1c	0			1	
2	Cost of goods sold (Schedule A, line 7)	2	0				
3	Gross profit Subtract line 2 from line 1c	3	0			0	
4a	Capital gain net income (attach Schedule D)	4a	0		1	0	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	0		1	0	
С	Capital loss deduction for trusts	4c	0			0	
5	Income (loss) from a partnership or an S corporation (attach						
	statement)	5	l ol			0	
6	Rent income (Schedule C)	6	0	0		0	
7	Unrelated debt-financed income (Schedule E)	7	0	0		0	
8	Interest, annuities, royalties, and rents from a controlled						
	organization (Schedule F)	8	l o	0		o	
9	Investment income of a section 501(c)(7), (9), or (17)						
	organization (Schedule G)	9	0	0		0	
10	Exploited exempt activity income (Schedule I)	10	187,980	0		187,980	
11	Advertising income (Schedule J)	11	0	0		0	
12	Other income (See instructions, attach schedule)	12	0			0	
13	Total. Combine lines 3 through 12	13	187,980	0		187,980	
Part	Deductions Not Taken Elsewhere (See instructions for deductions must be directly connected with the unrelated to the connected with the connected with the unrelated to the connected with the co			ons) (Except fo	or cor	itributions,	
14	Compensation of officers, directors, and trustees (Schedule K)				14	0	
15	Salaries and wages				15	0	
16	Repairs and maintenance				16	0	
17	Bad debts			•	17	0	
18	Interest (attach schedule) (see instructions)			•	18	0	
19	Taxes and licenses				19	0	
20	Charitable contributions (See instructions for limitation rules) .				20	0	
21	Depreciation (attach Form 4562)		21	0	<u> </u>		
22	Less depreciation claimed on Schedule A and elsewhere on re-	turn	22a	0	22b	0	
23	Depletion				23	0	
24	Contributions to deferred compensation plans .			•	24	0	
25	Employee benefit programs				25	0	
26	Excess exempt expenses (Schedule I)				26	0	
27	Excess readership costs (Schedule J)			•	27	0	
28	Other deductions (attach schedule)				28	0	
29	Total deductions. Add lines 14 through 28		•	•	29	0	
30	Unrelated business taxable income before net operating loss d				30	187,980	
31	Deduction for net operating loss arising in tax years beginning		-				
				•	31	0	]
32	Unrelated business taxable income Subtract line 31 from line 3	30	•		32	187,980	

For Paperwork Reduction Act Notice, see instructions.

Cat No 71329Y

# Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No 1545-0687

2018

Department of the Treasury Internal Revenue Service

For calendar year 2018 or other tax year beginning 10/01 , 2018, and ending 09/30 , 20 19

► Go to www.irs.gov/Form990T for instructions and the latest information.

► Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Name of the organization Employer identification number SMITHSONIAN INSTITUTION 53-0206027 Unrelated business activity code (see instructions) ▶ Describe the unrelated trade or business ▶ ADVERTISING Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales **b** Less returns and allowances c Balance ▶ 1c 0 2 Cost of goods sold (Schedule A, line 7) 2 0 3 Gross profit Subtract line 2 from line 1c . . . 3 0 0 4a Capital gain net income (attach Schedule D) . . 0 4a Λ b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 0 4b 0 **c** Capital loss deduction for trusts . . . . . 0 4c 0 Income (loss) from a partnership or an S corporation (attach 5 0 0 6 Rent income (Schedule C) 0 . . 6 0 0 7 Unrelated debt-financed income (Schedule E) 7 0 0 0 Interest, annuities, royalties, and rents from a controlled 8 organization (Schedule F) . . . . . . . . . . 8 0 0 0 Investment income of a section 501(c)(7), (9), or (17) 9 organization (Schedule G) . . . . . 9 0 0 10 Exploited exempt activity income (Schedule I) . . . 10 592,676 537.649 55.027 11 Advertising income (Schedule J) . 11 8,567,257 7,099,984 1,467,273 12 Other income (See instructions, attach schedule). 12 0 0 13 Total. Combine lines 3 through 12 . . . . 9.159.933 7.637.633 1,522,300 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.) 14 Compensation of officers, directors, and trustees (Schedule K) 23,824 15 Salaries and wages . . . . 15 16 Repairs and maintenance 16 0 17 Bad debts . . . . 17 0 18 Interest (attach schedule) (see instructions) . 18 n 19 19 0 20 Charitable contributions (See instructions for limitation rules) . . . 20 O 21 21 Less depreciation claimed on Schedule A and elsewhere on return 22 22b ٥ 23 Depletion . . . . . . 23 0 24 Contributions to deferred compensation plans 24 0 25 Employee benefit programs . . . 25 n 26 Excess exempt expenses (Schedule I) 26 52,027 27 Excess readership costs (Schedule J) 27 2,646,162 28 Other deductions (attach schedule) 28 0 29 **Total deductions.** Add lines 14 through 28 . . . 29 2.722.013 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 (1,199,713)31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) 31 n Unrelated business taxable income. Subtract line 31 from line 30 (1,199,713)

For Paperwork Reduction Act Notice, see instructions.

Cat No 71329Y

# Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No 1545-0687

2018

Department of the Treasury Internal Revenue Service Name of the organization For calendar year 2018 or other tax year beginning 10/01, 2018, and ending 09/30, 20 19

► Go to www.irs.gov/Form990T for instructions and the latest information.

► Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Employer identification number

SMITH	ASONIAN INSTITUTION				53-02	06027	
Ur	related business activity code (see instructions) ▶ 52						
De	escribe the unrelated trade or business ALT INVESTMENTS						
Part	Unrelated Trade or Business Income		(A) Income	(B) Expense	s	(C) Net	
1a	Gross receipts or sales 0						
b	Less returns and allowances 0 c Balance ▶	1c	0				
2	Cost of goods sold (Schedule A, line 7)	2	0				
3	Gross profit Subtract line 2 from line 1c	3	0			0	
4a	Capital gain net income (attach Schedule D)	4a	92,224			92,224	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	0	1		0	
С	Capital loss deduction for trusts	4c	0	Ī		0	
5	Income (loss) from a partnership or an S corporation (attach						
	statement)	5	(665,027)			(665,027)	
6	Rent income (Schedule C)	6	0	0		0	
7	Unrelated debt-financed income (Schedule E)	7	0	0		0	
8	Interest, annuities, royalties, and rents from a controlled						
	organization (Schedule F)	8	0	0		0	
9	Investment income of a section 501(c)(7), (9), or (17)						
	organization (Schedule G)	9	0	0		` 0	
10	Exploited exempt activity income (Schedule I)	10	0	0		0	
11	Advertising income (Schedule J)	11	0	0		0	
12	Other income (See instructions, attach schedule).	12	0			0	
13	<b>Total.</b> Combine lines 3 through 12 .	13	(572,803)	0		(572,803)	
Part	Deductions Not Taken Elsewhere (See instructions for deductions must be directly connected with the unrelated to the connected with			ons.) (Excépt fo	r cor	tributions,	
14	Compensation of officers, directors, and trustees (Schedule K)				14	0	
15	Salaries and wages			•	15	0	
16	Repairs and maintenance .				16	0	
17	Bad debts				17	0	
18	Interest (attach schedule) (see instructions)				18	0	
19	Taxes and licenses				19	0	
20	Charitable contributions (See instructions for limitation rules) .				20	0	
21	Depreciation (attach Form 4562)		21	0			
22	Less depreciation claimed on Schedule A and elsewhere on re	turn	22a	0	22b	0	
23	Depletion		•	•	23	0	
24	Contributions to deferred compensation plans				24	0	
25	Employee benefit programs			•	25	0	
26	Excess exempt expenses (Schedule I)				26	0	
27	Excess readership costs (Schedule J)				27	0	
28	Other deductions (attach schedule)				28	0	
29	5				29	0	
30	Unrelated business taxable income before net operating loss d				30	(572,803)	
31	Deduction for net operating loss arising in tax years beginn	-	•	•		,	
	instructions)				31	0	
_32	Unrelated business taxable income Subtract line 31 from line	30		<u> </u>	32	(572,803)	

For Paperwork Reduction Act Notice, see instructions.

Cat No 71329Y

# Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No 1545-0687

2018

Department of the Treasury Internal Revenue Service Name of the organization For calendar year 2018 or other tax year beginning 10/01 , 2018, and ending 09/30 , 20 19

► Go to www.irs.gov/Form990T for instructions and the latest information.

► Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Employer identification number

SMITHSONIAN INSTITUTION 53-0206027 Unrelated business activity code (see instructions) ▶ Describe the unrelated trade or business ▶ BLACKBIRD INVESTMENTS Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales **b** Less returns and allowances c Balance ▶ 0 1c 2 Cost of goods sold (Schedule A, line 7) 2 0 Gross profit. Subtract line 2 from line 1c. 3 0 0 4a Capital gain net income (attach Schedule D) . . . 0 0 4a **b** Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 0 4b 0 c Capital loss deduction for trusts 4c (188)(188)Income (loss) from a partnership or an S corporation (attach 5 173.569 173,569 Rent income (Schedule C) . . . . . . . 6 6 0 0 0 7 7 0 Unrelated debt-financed income (Schedule E) 0 0 8 Interest, annuities, royalties, and rents from a controlled 8 0 0 0 Investment income of a section 501(c)(7), (9), or (17) 9 organization (Schedule G) . . . . . . 9 0 0 0 Exploited exempt activity income (Schedule I) . . . 10 10 0 0 0 11 Advertising income (Schedule J) 11 0 0 0 12 Other income (See instructions, attach schedule) . 12 0 0 13 Total. Combine lines 3 through 12 . . . . . . 13 173.381 0 173,381 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income ) 14 Compensation of officers, directors, and trustees (Schedule K) 0 15 Salaries and wages 15 16 Repairs and maintenance 0 16 Bad debts . . . . . . 17 17 0 Interest (attach schedule) (see instructions) . . . 18 18 0 19 19 n 20 Charitable contributions (See instructions for limitation rules) . . . . 0 21 21 22 Less depreciation claimed on Schedule A and elsewhere on return . 22a 22b 0 23 Depletion 23 0 24 Contributions to deferred compensation plans 24 0 25 Employee benefit programs . . . . . 25 0 26 Excess exempt expenses (Schedule I) 26 27 Excess readership costs (Schedule J) 27 0 28 Other deductions (attach schedule) 0 28 29 **Total deductions.** Add lines 14 through 28 29 0 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 173,381 30 31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) 31 0 Unrelated business taxable income Subtract line 31 from line 30 32 173.381

For Paperwork Reduction Act Notice, see instructions.

Cat No 71329Y

# Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No 1545-0687

2018

Department of the Treasury Internal Revenue Service Name of the organization For calendar year 2018 or other tax year beginning 10/01 , 2018, and ending 09/30 , 20 19

► Go to www.irs.gov/Form990T for instructions and the latest information.

► Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Employer identification number

SMITHSONIAN INSTITUTION 53-0206027 Unrelated business activity code (see instructions) ▶ Describe the unrelated trade or business ▶ JEN IV CO-INVESTMENTS Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales **b** Less returns and allowances 0 c Balance ► 1c 2 Cost of goods sold (Schedule A, line 7) . . . 2 0 Gross profit. Subtract line 2 from line 1c 3 0 0 4a Capital gain net income (attach Schedule D) 4a 0 **b** Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b 0 0 **c** Capital loss deduction for trusts . . . 0 0 4c Income (loss) from a partnership or an S corporation (attach 5 231.343 231,343 Rent income (Schedule C) . 6 6 0 0 0 7 Unrelated debt-financed income (Schedule E) . 7 0 0 0 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 8 0 0 n Investment income of a section 501(c)(7), (9), or (17) 9 organization (Schedule G) . . . . . . . . . 9 0 0 0 10 Exploited exempt activity income (Schedule I) 10 0 0 0 11 Advertising income (Schedule J) 11 0 0 0 12 Other income (See instructions, attach schedule) 12 0 0 13 Total. Combine lines 3 through 12 . . . 13 231,343 0 231,343 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.) 14 Compensation of officers, directors, and trustees (Schedule K) 0 15 Salaries and wages 15 0 16 Repairs and maintenance . 0 16 17 Bad debts 17 0 18 Interest (attach schedule) (see instructions) 18 0 19 Taxes and licenses . . 19 0 20 Charitable contributions (See instructions for limitation rules) . . . 0 21 21 Less depreciation claimed on Schedule A and elsewhere on return 22 22a 22b 0 23 Depletion . . . 23 0 24 Contributions to deferred compensation plans 24 0 25 Employee benefit programs . . . 25 0 26 Excess exempt expenses (Schedule I) 26 27 Excess readership costs (Schedule J) 27 0 28 Other deductions (attach schedule) 28 0 29 **Total deductions.** Add lines 14 through 28 . 29 30 231,343 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see 31 0 Unrelated business taxable income Subtract line 31 from line 30 231,343

For Paperwork Reduction Act Notice, see instructions.

Cat No 71329Y

Name of Partnership	EIN	UBI
ALT INVESTMENTS		
(1) ALCON REAL ESTATE PARTNERS TAX-EXEMPT PARALLEL FUND II, L P	26-3367751	2,463
(2) BERKSHIRE FUND VIII, L P	27-5270108	1,309
(3) GREY MOUNTAIN PARTNERS FUND III, L P	80-0917135	-1,588
(4) LS POWER FUND III FEEDER 1 LP	46-3422831	82,082
(5) LS POWER FUND IV FEEDER 1 LP	46-3422831	812
(6) OATV III, L P	46-1346948	-6
(7) OATV IV, LP	47-5507113	-16
(8) RHINO RESOURCE PARTNERS, LP	27-2377517	20
(9) SFC ENERGY PARTNERS II, L P	45-1008148	432
(10) STONELAKE OPPORTUNITY PARTNERS IV, LP	47-5331725	2,462
(11) YORKTOWN ENERGY PARTNERS IX, LP	27-3125579	359
(12) YORKTOWN ENERGY PARTNERS X, LP	46-2445852	681
(13) SUSPENDED PASSIVE LOSSES UTILIZED UPON DISPOSITION		-754,037
BLACKBIRD		
(1)		173,569
JEN IV CO-INVEST 2, LP		
(1)		231,343
	Total for Part I, Line 5	-260.115

Form 990T Part II. Line 20	Charitable Contributions
----------------------------	--------------------------

Year Generated	Amount Generated	Amount Used in Prior Years	Amount Used in Current Year	Amount Converted to NOL	Amount Remaining	Contribution Carryover Expires
9302018	4,097			4,097	0	
9302019	4,431			4,431	0	
Totals	8 528	0	0	8 528	0	

Form 990T Part III. Line 35	Deduction for net operating loss arising in tax years beginning before January 1, 2018
i emi ee i an m, eme ee	

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining	NOL Expires
9302011	552,845		552,845		0	9302031
9302012	1,552,998		154,602	1,108,442	289,954	9302032
9302013	2,188,675	-			2,188,675	9302033
9302014	2,008,036			1	2,008,036	9302034
9302015	544,677				544,677	9302035
9302016	974,784				974,784	9302036
9302017	484,279				484,279	9302037
9302018		4,097			4,097	9302039
9302019		4,431			4,431	
Totals	8,306,294	8,528	707,447	1,108,442	6,498,933	

Form 990-T	Supplemental Information	

Return Reference - Identifier	Explanation
PART III, LINE 35 - DEDUCTIONS FOR NOL ARISING IN TAX YEARS BEGINNING BEFORE JANUARY 1, 2018	NOL AND AMTNOL CARRYFORWARD HAS BEEN ADJUSTED UNDER REV RUL 81-88 DUE TO THE REPEAL OF IRC SECTION 512(A)(7) AND QUALIFIED TRANSPORTATION FRINGE BENEFIT UBTI

Form 990T Part IV, Line 42

Alternative Minimum Tax

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining	AMT NOL Expires
2012	1,393,194		1,393,194		0	2031
2013	1,783,670		1,288,329	495,341	0	2032
2014	993,845 -			505,112	488,733	2033
2017				•	0	
2018					0	
					0	
Totals	4,170,709	0	2,681,523	1,000,453	488,733	

Form 990T Part V, Line 50b	Estimated Tax Payments	

Date	Amount
01/15/2019	50,000
03/15/2019	50,000
	Totals 100,000

Schedule I	Exploited Exer	npt Activity Incom	e, Other Than Adv	ertising Income		
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(4) EVENT ADVERTISING	3,000		3,000			o
(5) TWEEN TRIBUNE ONLINE ADS	589.676	537.649	52.027		697.046	52.027

Schedule J, Part II Income From Periodicals Reported on a Separate Basis									
1 Name of penodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)			
(4) ONLINE	3,054,698	408,536	2,646,162		2,878,265	2,646,162			
(5) SMITHSONIAN CHANNEL CONTENT AND ADVERTISIN	3 143,888	1.538	142 350			1			

# SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

**Capital Gains and Losses** 

► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

► Go to www.irs.gov/F1041 for instructions and the latest information.

OMB No 1545-0092

2018

	e of estate or trust		Employer identification number			
	THSONIAN INSTITUTION				3-020	6027
	e: Form 5227 filers need to complete only Parts I and II		H-1-1 O X			
	rt I Short-Term Capital Gains and Losses—Ge	nerally Assets	Heid One Yea	<u>`</u>	e ins	T
lines This	instructions for how to figure the amounts to enter on the s below.  form may be easier to complete if you round off cents to le dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustme to gain or los Form(s) 8949, line 2, colun	s from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					0
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked					0
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					0
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked	0	17,8	02	0	(17,802)
4	Short-term capital gain or (loss) from Forms 4684, 6252	, 6781, and 8824			4	
5	Net short-term gain or (loss) from partnerships, S corpo	•			5	
6	Short-term capital loss carryover Enter the amount, in Carryover Worksheet			·	6	( 0)
7	Net short-term capital gain or (loss). Combine lines 1 line 17, column (3) on the back	<u> </u>	<u></u>	. ▶	7	(17,802)
	Long-Term Capital Gains and Losses—Ger	nerally Assets F	leid More Tha	an One Year	(see	instructions)
lines This	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to le dollars	(d) Proceeds (sales pnce)	(e) Cost (or other basis)	(g) Adjustmer to gain or los Form(s) 8949, line 2, colum	s from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					0
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked					0
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					0
10	Totals for all transactions reported on Form(s) 8949 with Box F checked.	110,026		0	0	110,026
11	Long-term capital gain or (loss) from Forms 2439, 4684,	6252, 6781, and	8824		11	
12	Net long-term gain or (loss) from partnerships, S corpor	ations, and other e	estates or trusts		12	
13	Capital gain distributions				13	
14	Gain from Form 4797, Part I				14	_
15	Long-term capital loss carryover Enter the amount, if Carryover Worksheet				15	( 0)
16	Net long-term capital gain or (loss). Combine lines 8a line 18a, column (3) on the back			nere and on . ►	16	110,026

Schedule D (Form 1041) 2018			

Schedu	lle D (Form 1041) 2018				Page 2
Part	Summary of Parts I and II Caution: Read the instructions before completing this part	t	(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
17	Net short-term gain or (loss)	17		(17,802)	(17,802)
18	Net long-term gain or (loss):				
а	Total for year	18a		110,026	110,026
b	Unrecaptured section 1250 gain (see line 18 of the worksheet)	18b			0
С	28% rate gain	18c			0
19	Total net gain or (loss). Combine lines 17 and 18a ▶	19	0	92,224	92,224

Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a) If lines 18a and 19, column (2), are net gains, go to Part V, and don't complete Part IV If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary

Part I	V Capital Loss Limitation			
20	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of			
а	The loss on line 19, column (3) <b>or b</b> \$3,000	20	(	o 📗

Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 38), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover

## Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero

Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions if

- Either line 18b, col (2) or line 18c, col (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero

Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 38, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 18b, col. (2) or line. 18c, col. (2) is more than zero.

21	Enter taxable income from Form 1041, line 22 (or Fo	rm 99	90-T, line 38) .	. [		0				
22	Enter the smaller of line 18a or 19 in column (2)									
	but not less than zero	22	92,224							
23	Enter the estate's or trust's qualified dividends from									
	Form 1041, line 2b(2) (or enter the qualified dividends									
	included in income in Part I of Form 990-T)	23								
24	Add lines 22 and 23	24	92,224							
25	If the estate or trust is filing Form 4952, enter the									
	amount from line 4g, otherwise, enter -0 ▶	25							'	
26	Subtract line 25 from line 24. If zero or less, enter -0	-			26	92,224				
27	Subtract line 26 from line 21. If zero or less, enter -0	-		Γ	27	0				
28	Enter the smaller of the amount on line 21 or \$2,600	)		Γ	28	0				
29	Enter the smaller of the amount on line 27 or line 28	} .		. [	29	0		<b> </b>		
30	Subtract line 29 from line 28 If zero or less, enter -0	- This	s amount is tax	ed at	0%		<b></b>	30	o	
31	Enter the <b>smaller</b> of line 21 or line 26				31	o				
32	Subtract line 30 from line 26 .				32	92,224				
33	Enter the <b>smaller</b> of line 21 or \$12,700				33	0				
34	Add lines 27 and 30			.	34	0				
35	Subtract line 34 from line 33 If zero or less, enter -0		•	. [	35	0				
36	Enter the smaller of line 32 or line 35				36	0				
37	Multiply line 36 by 15% (0 15)			_			<b>&gt;</b>	37	О	
38	Enter the amount from line 31				38	ol				
39	Add lines 30 and 36			. [	39	0				
40	Subtract line 39 from line 38 If zero or less, enter -0	-		<u> </u>	40	0				
41	Multiply line 40 by 20% (0 20)						<b>•</b>	41	o	
42	Figure the tax on the amount on line 27 Use the 2018 Tax	Rate S	Schedule for Esta	ates	1					
	and Trusts (see the Schedule G instructions in the instruction				42	o			1	
43	Add lines 37, 41, and 42			.	43	0				
44	Figure the tax on the amount on line 21. Use the 2018 Tax	Rate S	Schedule for Esta	ates						
	and Trusts (see the Schedule G instructions in the instruction				44	0				
45	Tax on all taxable income. Enter the smaller of line			nd on	i Forr	n 1041, Sched	ule			
	G line 1a (or Form 990-T line 40)						<b>•</b>	45	o	

## \*\*\*ALTERNATIVE INVESTMENTS SILO - IRC 512(A)(6)\*\*\*

# Schedule D Part II, Line 15 Long-term Capital Loss Carryforward Schedule

Year Generated	Amount Generated	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining	Capital NOL Expires
				. 0	_
Totals	0	0	0	0	

Form **8949** 

# **Sales and Other Dispositions of Capital Assets**

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

2018

Attachment Sequence No 12A

OMB No 1545-0074

Department of the Treasury Internal Revenue Service

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return SMITHSONIAN INSTITUTION Social security number or taxpayer identification number 53-0206027

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check

Part I

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions)

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

<ul><li>☐ (B) Short-term transactions</li><li>☑ (C) Short-term transactions</li></ul>				sis <b>wasn't</b> report	ted to the IF	RS	•
1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed of (Mo , day, yr )	Proceeds	(e) Cost or other basis See the Note below	Adjustment, if If you enter an a enter a co See the sepa	(h) Gain or (loss) Subtract column (e	
(Example 100 sh XYZ Co)	(Mo , day, yr)			and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
PARTNERSHIP K-1 SHORT-TERM					· · · · · · · · · · · · · · · · · · ·		
	VARIOUS	VARIOUS		17,802			(17,802)
						-	
			-				
							<u>-</u>
<del></del>							
-							
							<del>- ,-</del>
Totals. Add the amounts in columns negative amounts) Enter each total Schedule D, line 1b (if Box A above)	al here and incl	lude on your					<u> </u>
above is checked), or line 3 (if Box 6			n	17 802		٥	(17.802)

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

## \*\*\*ALTERNATIVE INVESTMENTS SILO - IRC 512(A)(6)\*\*\*

Form 8949 (2	018)					Attach	ment Sequence No	12A Page 2
	n on return Name and SSN or to NIAN INSTITUTION	axpayer identifica	tion no not requir	red if shown on other s	Social secu	ırity number o	r taxpayer identifica 53-0206027	ation number
statement v	check Box D, E, or F below will have the same informat may even tell you which bo	ion as Form 10	r you received 099-B Either (	any Form(s) 1099 will show whether	-B or substitute si your basis (usuall)	atement(s) fr vyour cost) v	om your broker A vas reported to the	substitute e IRS by your
Part II	Long-Term. Transa	nort-term tra	ansactions,	see page 1.				•
	Note: You may agg to the IRS and for v 8a; you aren't requi	vhich no ad red to repo	justments o rt these trar	or codes are rensactions on Fo	quired. Enter ti orm 8949 (see	ne totals d instruction	rectly on Schens).	edule D, line
a separate	check Box D, E, or F to Form 8949, page 2, for e boxes, complete as m	each applica	able box. If y	ou have more lo	ng-term transac			
🗌 (E) l	Long-term transactions Long-term transactions Long-term transactions	reported on	Form(s) 1099	9-B showing bas			•	·)
1	(a)	(b)	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f) parate instructions	(h) Gain or (loss). Subtract column (e)
(E	Description of property  Example 100 sh XYZ Co)	Date acquired (Mo , day, yr)	disposed of (Mo , day, yr )	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
PARTNER	SHIP K-1 LONG-TERM			110,026				110,026
				_				<del>, _</del>
							····	
			-					
		-						
			_					
						-		
					-			
negative Schedul	Add the amounts in columns amounts) Enter each totale D, line 8b (if Box D above checked), or line 10 (if Box	l here and incl is checked), <b>lin</b>	ude on your e 9 (if Box E	110,026	0		0	110,026

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Form **8949** (2018)

### SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Name of estate or trust

**Capital Gains and Losses** 

► Attach to Form 1041, Form 5227, or Form 990-T.

► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

► Go to www.irs.gov/F1041 for instructions and the latest information.

OMB No 1545-0092

Employer identification number

2018

SMIT	HSONIAN INSTITUTION			5	3-0206	027
	: Form 5227 filers need to complete only Parts I and II.					
	Short-Term Capital Gains and Losses—Ge	nerally Assets	Held One Year	or Less (se	e inst	
lines This	instructions for how to figure the amounts to enter on the below.  form may be easier to complete if you round off cents to e dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (q)
					(3/	(3)
1a 	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked					
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked				,	
4	Short-term capital gain or (loss) from Forms 4684, 6252	, 6781, and 8824			4	
5	Net short-term gain or (loss) from partnerships, S corpo	rations, and other	estates or trusts	i	5	
6	Short-term capital loss carryover. Enter the amount, i	f any, from line 9	of the 2017 Ca	apıtal Loss	_	
_	Carryover Worksheet			ore and an	6	( )
7	Net short-term capital gain or (loss). Combine lines 1 line 17, column (3) on the back	<del>-</del>	iumn (n) Entern	ere and on ▶	7	
Pa		nerally Assets H	Held More Tha	n One Year	(see i	nstructions)
See instructions for how to figure the amounts to enter on the lines below  (d) (e) Adjustmen to gain or loss				from	(h) Gain or (loss) Subtract column (e) from column (d) and	
	form may be easier to complete if you round off cents to le dollars.	(sales price)	(or other basis)	Form(s) 8949, line 2, colum		combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked.	0	)1	38		(188)
11	Long-term capital gain or (loss) from Forms 2439, 4684,	, 6252, 6781, and	8824 .		11	
12	Net long-term gain or (loss) from partnerships, S corpor	ations, and other	estates or trusts		12	
13 Capital gain distributions						
14	Gain from Form 4797, Part I				14	
15	Long-term capital loss carryover. Enter the amount, if Carryover Worksheet				15	( )
16	Net long-term capital gain or (loss). Combine lines 8a	a through 15 in co	lumn (h) Enter h	ere and on	16	(188)

Schedu	ile D (Form 1041) 2018							P	age ∠
Part	III Summary of Parts I and II		,	(1) Ben	eficiaries	(2) Est	ate's	(3) Total	
	Caution: Read the instructions before completing	ng this pa	art	(see	ınstr.)	or tru	st's	(3) Total	
17	Net short-term gain or (loss)		17						
18	Net long-term gain or (loss):							-	
а	Total for year		18a				188)	(188)	
b	Unrecaptured section 1250 gain (see line 18 of the wor	ksheet)	18b						<u> </u>
C	28% rate gain		18c						L
19	Total net gain or (loss). Combine lines 17 and 18a		19				188)	(188)	<u> </u>
Note: gains, neces:	If line 19, column (3), is a net gain, enter the gain on Form go to Part V, and don't complete Part IV If line 19, column sary	1041, lini i (3), is a i	e 4 (or F net loss,	orm 990-7 complete	, Part I, III Part IV an	ne 4a) If lines d the <b>Capital</b>	18a and <b>Loss Ca</b>	19, column (2), a arryover Workshe	re ne et, a
Part	V Capital Loss Limitation						•		
20	Enter here and enter as a (loss) on Form 1041, line 4 (or	Form 990	-T, Part	I, line 4c,	ıf a trust),	the smaller	of.		ĺ
а	The loss on line 19, column (3) or b \$3,000				. :		20	( 188	
	If the loss on line 19, column (3), is more than \$3,000, <b>or</b> if Carryover Worksheet in the instructions to figure your capita			1, line 22	(or Form !	990-T, line 38 <u>)</u>	. is a loss	s, complete the <b>C</b>	apita
Part	V Tax Computation Using Maximum Ca	oital Ga	ins Ra	tes					
	1041 filers. Complete this part only if both lines 18a and 1 on Form 1041, line 2b(2), and Form 1041, line 22, is more that		nn (2) are	e gains, or	an amour	nt is entered in	Part I o	or Part II and there	ıs aı
•	on: Skip this part and complete the Schedule D Tax Worksh		instructi	ions if					
	er line 18b, col (2) or line 18c, col (2) is more than zero, or								
	h Form 1041, line 2b(1), and Form 4952, line 4g are more tha	n zero							
and F	990-T trusts. Complete this part only if both lines 18a and orm 990-T, line 38, is more than zero Skip this part and con 3c, col (2) is more than zero								
21	Enter taxable income from Form 1041, line 22 (or Fo	rm 990-	Γ, line 3	8)	21				i
22	Enter the <b>smaller</b> of line 18a or 19 in column (2) but not less than zero	22				,			
23	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)	23							
24	Add lines 22 and 23	24							
25	If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0-	25							
26	Subtract line 25 from line 24 If zero or less, enter -0				26	Ì	Ì		l
27	Subtract line 26 from line 21. If zero or less, enter -0		•		27		$\dashv$		l
28	Enter the smaller of the amount on line 21 or \$2,600			•	28	-	$\dashv$	j	
29	Enter the smaller of the amount on line 27 or line 28			•	29		$\dashv$	i	
30	Subtract line 29 from line 28 If zero or less, enter -0		nount is	s taxed at			▶ 30	<del>-</del>	l
31	Enter the smaller of line 21 or line 26	<b>.</b> ui			31	· 1	-	1	

32 Subtract line 30 from line 26 . 32 33 Enter the smaller of line 21 or \$12,700 . 33 34 Add lines 27 and 30 34 35 Subtract line 34 from line 33 If zero or less, enter -0-35 36 36 Enter the smaller of line 32 or line 35 37 Multiply line 36 by 15% (0 15) . . 37 38 Enter the amount from line 31 . . . 38 39 Add lines 30 and 36 39 Subtract line 39 from line 38 If zero or less, enter -0-40 40 41 41 Multiply line 40 by 20% (0 20) . Figure the tax on the amount on line 27 Use the 2018 Tax Rate Schedule for Estates 42 42 and Trusts (see the Schedule G instructions in the instructions for Form 1041) 43 43 Add lines 37, 41, and 42 Figure the tax on the amount on line 21. Use the 2018 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) 44 Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 40) . . . .

Form **8949** 

# **Sales and Other Dispositions of Capital Assets**

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

Department of the Treasury Internal Revenue Service ▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2018 Attachment Sequence No 12A

OMB No 1545-0074

Name(s) show	n on return		Social secu	Social security number or taxpayer identification number							
	AN INSTITUTION	<del></del>				53-0206027					
statement wi	theck Box A, B, or C below the same informat the properties and the same th	ion as Form 10	r you received 099-B. Either v	any Form(s) 1099 Will show whether	I-B or substitute si your basis (usually	tatement(s) fi your cost) v	rom your broker A was reported to th	N substitute e IRS by your			
Part I	Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.  Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).										
complete a for one or n	check Box A, B, or C I separate Form 8949, p nore of the boxes, com- thort-term transactions	page 1, for ea oplete as mar	ach applicabl ny forms with	e box If you have the same box o	ve more short-te thecked as you i	rm transac need	tions than will fit	on this page			
☐ ( <b>B</b> ) S	short-term transactions short-term transactions	reported on	Form(s) 1099	9-B showing bas				-)			
	(a) Description of property	(b) Date acquired	(c) Date sold or disposed of	(d)	(e) Cost or other basis See the Note below and see Column (e)	If you enter an enter a c See the sep	f any, to gain or loss amount in column (g), ode in column (f) parate instructions.	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)			
(E)	xample 100 sh XYZ Co)	(Mo , day, yr)	(Mo , day, yr )	(sales price) (see instructions)	in the separate	(f) Code(s) from instructions	(g) Amount of adjustment				
								· <del>- · · .</del>			
						_	-				
	<u> </u>										
			·								
					<u></u>						
	<del></del>			<u></u> .				<u> </u>			
negative Schedule	Add the amounts in columns amounts) Enter each tota e D, line 1b (if Box A above checked), or line 3 (if Box C	I here and include is checked), lin	lude on your le 2 (if Box B								

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

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above is checked), or line 10 (if Box F above is checked) ▶

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## SCHEDULE I (Form 1041)

# **Alternative Minimum Tax—Estates and Trusts**

OMB No 1545-0092

2018

Department of the Treasury Internal Revenue Service ► Attach to Form 1041.

► Go to www.irs.gov/Form1041 for instructions and the latest information.

Name of estate or trust

Employer identification number 53-0206027

SMITH	ISONIAN INSTITUTION	53	3-0206027	
Part	Estate's or Trust's Share of Alternative Minimum Taxable Income			
1	Adjusted total income or (loss) (from Form 1041, line 17)	. 1	0	
2	Interest	. 2		
3	Taxes	. 3		
4	Reserved for future use	4		
5	Refund of taxes	5	(	)
6	Depletion (difference between regular tax and AMT)	. 6		
7	Net operating loss deduction. Enter as a positive amount	7	1,108,442	
8	Interest from specified private activity bonds exempt from the regular tax	8		
9	Qualified small business stock (see instructions)	. 9		
10	Exercise of incentive stock options (excess of AMT income over regular tax income)	. 10		
11	Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	. 11		
12	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	. 12		
13	Disposition of property (difference between AMT and regular tax gain or loss)	. 13		
14	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) .	14	3,172	
15	Passive activities (difference between AMT and regular tax income or loss)			
16	Loss limitations (difference between AMT and regular tax income or loss)	16		
17	Circulation costs (difference between regular tax and AMT)	17		
18	Long-term contracts (difference between AMT and regular tax income)	18		
19	Mining costs (difference between regular tax and AMT)	. 19		
20	Research and experimental costs (difference between regular tax and AMT)	. 20		
21	Income from certain installment sales before January 1, 1987	21	(	)
22	Intangible drilling costs preference	22		
23	Other adjustments, including income-based related adjustments	. 23		
24	, ,	. 24	( 1,000,453	)
25	Adjusted alternative minimum taxable income. Combine lines 1 through 24 .	. 25	111,161	
	Note: Complete Part II below before going to line 26.	1		
26	Income distribution deduction from Part II, line 44	.		
27	Estate tax deduction (from Form 1041, line 19)			
28	Add lines 26 and 27	28	0	
29	Estate's or trust's share of alternative minimum taxable income. Subtract line 28 from line 25	29	111,161	
	If line 29 is			
	• \$24,600 or less, stop here and enter -0- on Form 1041, Schedule G, line 1c The estate or			
	trust isn't liable for the alternative minimum tax			
	• Over \$24,600, but less than \$180,300, go to line 45			
David	• \$180,300 or more, enter the amount from line 29 on line 51 and go to line 52			
Part		. 30		
30	Adjusted alternative minimum taxable income (see instructions)	31		
31	Adjusted tax-exempt interest (other than amounts included on line 8)  Total net gain from Schedule D (Form 1041), line 19, column (1) If a loss, enter -0-	32	0	
32 33	Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitab			
33	purposes (from Form 1041, Schedule A, line 4)	33		
34	Capital gains paid or permanently set aside for charitable purposes from gross income (se			
J-4	Instructions)	34		
35	Capital gains computed on a minimum tax basis included on line 25	. 35	(	<del></del>
36	Capital losses computed on a minimum tax basis included on line 25 Enter as a positive amount			<u>′</u>
37	Distributable net alternative minimum taxable income (DNAMTI) Combine lines 30 through 3		-	
0,	If zero or less, enter -0-	37	o	
38	Income required to be distributed currently (from Form 1041, Schedule B, line 9)	38	<u> </u>	
39	Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 1			<del></del>
40	Total distributions. Add lines 38 and 39	40	0	<u>_</u>
41	Tax-exempt income included on line 40 (other than amounts included on line 8)	41		<del></del>
42	Tentative income distribution deduction on a minimum tax basis. Subtract line 41 from line 40.	42	0	

Schedul	e I (Form 1041) (2018)		Pa	age 2
Part				
43	Tentative income distribution deduction on a minimum tax basis. Subtract line 31 from line 37			
	If zero or less, enter -0-	.   43	0	
44	Income distribution deduction on a minimum tax basis. Enter the smaller of line 42 or line 43			
	Enter here and on line 26	.   44	0	
Part				
45	Exemption amount	. 45	\$24,600	00
46	Enter the amount from line 29			
47	Phase-out of exemption amount	0		
48	Subtract line 47 from line 46. If zero or less, enter -0			
49	Multiply line 48 by 25% (0 25)	49	7,315	
50	Subtract line 49 from line 45. If zero or less, enter -0-	50	17,285	
51	Subtract line 50 from line 46	51	93,876	
52	Go to Part IV of Schedule I to figure line 52 if the estate or trust has qualified dividends or has a gain on lines 18a and 19 of column (2) of Schedule D (Form 1041) (as refigured for the AMT, necessary). Otherwise, if line 51 is—  • \$191,100 or less, multiply line 51 by 26% (0 26)			
	• Over \$191,100, multiply line 51 by 28% (0 28) and subtract \$3,822 from the result	52	24,408	
53	Alternative minimum foreign tax credit (see instructions)	53		
54	Tentative minimum tax. Subtract line 53 from line 52	. 54	24,408	
55	Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from Schedule G, line 2a)	55		
56	Alternative minimum tax. Subtract line 55 from line 54 If zero or less, enter -0- Enter here and	d		
	on Form 1041, Schedule G, line 1c	56	24,408	
Part	V Line 52 Computation Using Maximum Capital Gains Rates	······································		
57	Caution: If you didn't complete Part V of Schedule D (Form 1041), the Schedule D Tax Worksheet or the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, see the instruction before completing this part  Enter the amount from line 51		93,876	
58	Enter the amount from Schedule D (Form 1041), line 26, line 13 of the Schedule D Tax Worksheet, or line 4 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as refigured for the AMT, if necessary)	. 01	30,010	
59	Enter the amount from Schedule D (Form 1041), line 18b, column (2) (as refigured for the AMT, if necessary). If you didn't complete Schedule D for the regular tax or the AMT, enter -0			
60	If you didn't complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 58. Otherwise, add lines 58 and 59 and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary) .			
61	Enter the <b>smaller</b> of line 57 or line 60	61	0	
62	Subtract line 61 from line 57	62	93,876	
63	If line 62 is \$191,100 or less, multiply line 62 by 26% (0 26) Otherwise, multiply line 62 by 28%	6		
	(0 28) and subtract \$3,822 from the result	63	24,408	
64		0		
65	Enter the amount from line 27 of Schedule D (Form 1041), line 14 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as figured for the regular tax). If you didn't complete Schedule D or either worksheet for the regular tax, enter the amount from Form 1041, line 22, if zero or less, enter -0-			
66	Subtract line 65 from line 64 If zero or less, enter -0 66 2,600			
67	Enter the <b>smaller</b> of line 57 or line 58			
68	Enter the <b>smaller</b> of line 66 or line 67. This amount is taxed at 0% 68 0	_		
69	Subtract line 68 from line 67			

Part	V Line 52 Computation Using Maximum Capital Gains Rates	(con	tinued)				
70	Maximum amount subject to rates below 20%	70	\$12,700	00			
71	Enter the amount from line 66	71	2,600				
72	Enter the amount from line 27 of Schedule D (Form 1041), line 18 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet, whichever applies (as figured for the regular tax). If you didn't complete Schedule D or either worksheet for the regular tax, enter the amount from Form 1041, line 22, if zero or less, enter -0	72	,				
73	Add line 71 and line 72	73	2,600				
74	Subtract line 73 from line 70. If zero or less, enter -0	74	10,100				
75	Enter the <b>smaller</b> of line 69 or 74	75	0				
76	Multiply line 75 by 15% (0 15)			▶	76	0	
77	Add, lines 68 and 75	77	0				
	If lines 77 and 57 are the same, skip lines 78 through 82 and go to line 83.	Othe	wise, go to line	78.		ĺ	
78	Subtract line 77 from line 67	78	0				
79	Multiply line 78 by 20% (0.20)			<b>&gt;</b> [	79	0	
	If line 59 is zero or blank, skip lines 80 through 82 and go to line 83. O	therv	vise, go to line	BO.			
80	Add lines 62, 77, and 78	80	0				
81	Subtract line 80 from line 57	81	0				
82	Multiply line 81 by 25% (0 25) .			▶ [	82	0	
83	Add lines 63, 76, 79, and 82			· [_	83	24,408	
84	If line 57 is \$191,100 or less, multiply line 57 by 26% (0.26) Otherwise, (0.28) and subtract \$3,822 from the result	multı	ply line 57 by 2	L	84	24,408	
85	Enter the <b>smaller</b> of line 83 or line 84 here and on line 52				85	24,408	

Schedule I (Form 1041) (2018)

Smithsonian Institution Schedule I - AMT Adjustments g/30/2019

	Activity #1	Activity #2	Activity #3	Activity #4	Activity #5	Activity #6	Activity #7	Total
			TRAVEL		ALTERNATIVE	BLACKBIRD 1846	JEN IV CO-	
	RETAIL SHOPS	THEATERS	TOURS	ADVERTISING	INVESTMENTS	ENERGY FUND, LP	INVEST 2, LP	Schedule I
Regular Taxable Income (pre-NOL)	515,738	(83,415)	187,980	(1,199,713)	(572,803)	173,381	231,343	1,108,442
AMT adjustments								
Line 13 - Disposition of property (difference between								
AMT and regular tax gain/loss)					(25,088)			
Line 14 Depreciation on assets palced in service after								
1986 (difference between regular tax and AMT)				•	(26,005)	3,172		3,172
Line 22 - Intangible Drilling Costs Preference					_			
Total Alternative Minimum Taxable Income (pre-NOL)	515,738	(83,415)	187,980	(1,199,713)	(533.005)	.75.553	224 242	4411.544
Total Alternative Minimum Taxable Income (pre-NOL)	515,738	(83,415) AMTI from	187,980	(1,199,/13)	(623,896)	176,553	231,343	1,111,614
		this activity		AMTI from				
		silo-ed		this activity	AMTI from this			
		under IRC		silo-ed under	activity silo-ed under			
		512(a)(6)		IRC 512(a)(6)	IRC 512(a)(6)			
		215/0/(0)		>12(0)(0)	WC 215(0)(0)			