	000 -	1	Exempt Organiza	ition	Business	Inc	ome Tax R	eturr	ı	_ c	MB No 1545-0047
Form	990-T	<u> </u>	(and prox	y tax	under sec	tion	6033(e)) 🥖	100	1		2019
		For cale	endar year 2019 or other tax ye						20 .	1	
	nent of the Treasury Revenue Service		► Go to www.irs.gov/Fo						(~)(2)	Open	to Public Inspection c)(3) Organizations O
	Check box if	P D01	not enter SSN numbers on th			•		1 IS a 50 I		_	(3) Organizations O Identification numb
<u>.Ц</u>	address changed		Name of organization ( C C SMITHSONIAN INSTITUT		ir name changed	and see	e instructions )				trust, see instruction
	npt under section 01( C ) 3)	Print	Number, street, and room or		faPO hox see ii	nstructio	ons			53	3-0206027
_	08(e) 220(e)	Or Type	1000 JEFFERSON DRIVE					,		elated b	ousiness activity co
	_	Type	City or,town, state or province		, and ZIP or foreig	n posta	l code		(See	Instruc	ctions)
	29(a)		WASHINGTON, DC 20560								45
Bool at er	k value of all assets nd of year		oup exemption number (								
			neck organization type				☑ 501(c) trust		401(a		
			organization's unrelated t	ades or		_					r first) unrelated
	ade or business			a conto		-	ne, complete Part				
		-	at the end of the previou omplete Parts III–V.	s sente	rice, complete	Parts	s rand ii, compie	ee a S	medu	e W	or each addition
			e corporation a subsidiary	n an affi	liated group or	a nare	nt-subsidiary conti	rolled or	oun?		Ves VI
			and identifying number o				The Substallary Corne	onca gi	oup.		_ 103 1
			► OFFICE OF FINANCE				Telephone	number	•		(202) 633-7167
			e or Business Income				(A) Income		Expens	es	(C) Net
1a	Gross receipts	or sale	es	0					1,	<b>+</b>	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Ь	Less returns a			OC		1c					
2	-	•	Schedule A, line 7)			2		+	<u> </u>	_	E MESS AL A
3			t line 2 from line 1c .			3		<u>′</u>		+4 ,	
4a			ne (attach Schedule D)			45		<del>  _/</del>	A <sup>rt</sup>		<u> </u>
b			4797, Part II, line 17) (atta n for trusts			4b 4c		4	•		
5	•		a partnership or an S			1		, 32-	•		
						5				~} ~ .}s ♣	
6	Rent income (S	Schedu	ile C)			6		5		0	-
. 7	Unrelated deb	t-financ	ced income (Schedule E)			1	C			0	
8	Interest, annuities	royalties	s, and rents from a controlled o	rganizatio	on (Schedule F)	8		<u> </u>		0	
9			ection 501(c)(7), (9), or (17) or	-		9		+		0	
10	•	•	ivity income (Schedule I)		/	10	408,975	+	62	8,999	(220,0
11	Advertising inc	•	,		<i>.</i> /	11		+		0	
12 13	Total. Combin	•	structions; attach schedu	<sup>(e)</sup>	/	12	408,975		62	8,999	(220,0
Part			Taken Elsewhere (See	<u>/</u>	ctions for limit						
	connected	with th	he unrelated business if	ooma	١			, (DCGC	2011011	3 mu.	or be directly
14	Compensation	of offic	cers, directors, and truste	es (Sc)	Pedule III IV/F	<u> </u>				14	
15	Salaries and w	ages	//	. <u> </u>	KECKIVE		٠٠٠ - ١٥			15	
16	•		ince /	. m	1.0	004	<u>[8</u> ]			16	
17	Bad debts .			8	AUG 20)2	.U Z.1	0			17	
18	•		ule) (see instructions).	<u> </u>			기짜	• •	•	18	
19 20	Taxes and lice			1	OGDEN,	·UT	20	• •		19	
20 21			imed on Schedule A and	alsewin.	ere on return		21a		0	21b	
22	•									22	
23			red compensation plans							23	
24			grams							24	
25	Excess exempt	f expen	ses (Schedule I)							25	
26	Excess readers	ship cos	sts (Schedule J)							26	
27			ach schedule)							27	
28			ld lines 14 through 27							28	
29			xable income before net							29	(220,0
20	Déduction for (instructions) .	-	erating loss arising in t	-			-			ر م	
30									•	30	1
30 31/	•		xable income. Subtract li	20 to	rom line 20					31	(220,02

Part 2	II Total Unrelated Business Taxable Income				
32 /	Total of unrelated business taxable income computed from all unrelated trades or businesses (se	ę l			
	instructions)	32		1,442	,506
33	Amounts paid for disallowed fringes				
34	Charitable contributions (see instructions for limitation rules)	34			0
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract lip				<u> </u>
	34 from the sum of lines 32 and 33	7 35		1,442	506
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (se			1,412,	,000
	instructions)	J 36		1,442	EDE
				1,442	0
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35 .				<del>-</del> 0
	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38			
-38	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37				_
7	enter the smaller of zero or line 37	39			0
	V Tax Computation	- +			
	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)				
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax of				
	the amount on line 39 from: 🗹 Tax rate schedule or 💢 Schedule D (Form 1041)	41			0
42	Proxy tax. See instructions	42			
43 🥄	Alternative minimum tax (trusts only)	フ 43		263	,161
	Tax on Noncompliant Facility Income. See Instructions	44			
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	\ 45		263.	,161
Part '	Tax and Payments				
46a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) . 46a	$\Box$			
b	Other credits (see instructions)	<b>」,</b> 」			
C	General business credit. Attach Form 3800 (see instructions)	<b>-</b> 1			
	Credit for pnor year minimum tax (attach Form 8801 or 8827)	┨			
	Total credits. Add lines 46a through 46d	46			0
	Subtract line 46e from line 45	47		263,	161
	Other taxes. Check if from. Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)				0
49	Total tax. Add lines 47 and 48 (see instructions)	4 4		263	,161
<del>49</del> 50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50			<del></del>
	Payments. A 2018 overpayment credited to 2019				
		해 I			
		ᇷᅵ			
	Tax deposited with Form 8868	<del>'</del> 4			
	Foreign organizations: Tax paid or withheld at source (see instructions) . 51d	-1 1			
	Backup withholding (see instructions)				
	Credit for small employer health insurance premiums (attach Form 8941)	-l' l			
	Other credits, adjustments, and payments:    Form 2439	.1 1			
	☐ Form 4136 ☐ Other 0 Total ► [51g]	의ㅡ니			
	Total payments. Add lines 51a through 51g			376,	,156
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ □				
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54			0
	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid . V			112,	,995
\ <u>56'</u>	Enter the amount of line 55 you want: Credited to 2020 estimated tax ▶ 112,995 Refunded ▶	56			0
Part \	Statements Regarding Certain Activities and Other Information (see instructions)				
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or o	ther auth	ority	Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization ma			1 1	1
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the fo	reign co	untry	۔ا۔۔ا	
	here ► AM, GB, PM		į	7	
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a for	eign trust	7 .	7	
	If "Yes," see instructions for other forms the organization may have to file.	•			$\overline{}$
	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$				Į
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the be	st of my kn	owledge	and belief	f, it is
Sign	true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	May the	RS discu	iss this re	tum
Here	1 8/6/2021 CHIEF FINANCIAL OFFICER	with the	preparer	shown be	elow
	Signature of officer Date Title	(see instri	ictions)?	∡]Yes 🔲	INO
			РТ	IN	_=
Paid	RAYMOND IY	ieck 🛄 i If-employe	' !	 0120564	43
Prepa	arer			565207	
Use C	ONLY SOURCE STORY OF MOLETING	m's EIN ▶		86-8000	
thsonlan	Firm's address ► 8350 BROAD ST, MCLEAN, VA 22102 [Ph	44 AM	<del></del>	90-T (2	
				(*	

Sche	dule A - Cost of Goods	Sold. Er	nter method of in	vent	ory va	luation ►					
1	Inventory at beginning of		1 "	0	6		at e	end of year	6		0
2	Purchases	F	2	0	7	Cost of g	300	ds sold. Subtract line	, [		
3	Cost of labor		3	0		6 from line	e 5.	. Enter here and in Part	:   <del> </del>		
4a	Additional section 263A	costs				I, line 2			7		0
	(attach schedule)		4a	0	8			of section 263A (wit			Yes No
b	Other costs (attach sched	lule)	4b	0		property p	oroc	duced or acquired for	resale)	apply	
5	Total. Add lines 1 through	14b	5	0		to the orga	anız	zation?			
Sche	dule C-Rent Income (I	From Re	al Property and	Per	sonal	Property	Le	ased With Real Pro	perty	)	
(see	instructions)										
1. Desc	nption of property										
(1)											
(2)											
(3)											_
(4)											_
		2. Rent recei	ved or accrued				Ц				
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)  (b) From real appropriate of rent percentage of				or per	sonal pro	perty exceeds	,	3(a) Deductions directly in columns 2(a) and			
(1)										-	
(2)											
(3)	<u> </u>				_						
(4)											
Total		0	Total				0	(b) Total deductions.			
	tal income. Add totals of colur		nd 2(b), Enter					Enter here and on page	1,		_
here a	nd on page 1, Part I, line 6, col	umn (A)	/ <u> </u>				0	Part I, line 6, column (B)			0
Sche	dule E—Unrelated Deb	t-Financ	ed Income (see	ınstrı	uctions	)	1	3. Deductions directly cor	nected	with or alloca	able to
	4. Danamakan of dobt 6					ome from or debt-financed	1	debt-finance	ed prop	erty	
	1. Description of debt-f		perty	allo		perty	1	(a) Straight line depreciation		) Other dedu	
				<b>-</b>		0.004.000	+	(attach schedule)	<del> </del>	(attach sche	749,842
	PITAL GALLERY					2,881,303	+	778,327	├──		149,042
(2)		<del></del>		-		<del></del>	╁		<del> </del>		
(3)				-			╁		₩-		
(4)	4. Amount of average	5 Avera	ge adjusted basis	-			╁		<del> </del>		
	acquisition debt on or illocable to debt-financed property (attach schedule)	of o	r allocable to nanced property ch schedule)		4 dr	olumn vided lumn 5	1	7. Gross income reportable (column 2 × column 6)		Allocable ded nn 6 × total d 3(a) and 3(	of columns
(1)	94,627,460	<del></del>	94,411,704		' /	100 00 %	.	2,881,303			1,528,169
(2)						%	$\top$				
(3)						%	T				
(4)						%					
<u>.,</u>		·						nter here and on page 1, Part I, line 7, column (A).		here and o I, line 7, co	
Totals						•		2,881,303	}		1,528,169
	dividends-received deduction	ns included	l ın column 8				_	. •			0
			<del></del>							Form <b>99</b>	<b>0-T</b> (2019

Page 4

Schedule F-Interest, Ann	uities,	Royalties, a					anizations (see	e instru	ctions)		
			Exem	pt C	ontrolled	Organizations			Т.		
Name of controlled organization		Employer ication number			ted income structions)	Total of specified payments made	5. Part of column included in the corganization's gro	ontrolling	conne	ductions directly ected with income in column 5	
(1)		-									
(2)				-							
(3)											
(4)											
Nonexempt Controlled Organiz	zations										
7. Taxable Income	7. Taxable Income  8. Net unrelated inc (loss) (see instruction					tal of specified rments made	10 Part of colum included in the corganization's gro	ontrolling	connec	11. Deductions directly connected with income in column 10	
(1)											
(2)											
(3)				$\perp$							
(4)									ļ.——-		
Enter here and on page 1, Enter here								columns 6 and 11 here and on page 1, line 8, column (B)			
Totals						. ▶	<u> </u>		0	0	
Schedule G-Investment	Incom	e of a Secti	ion 50	)1(c			zation (see inst	ruction	s)		
1. Description of income		2. Amount of			direc	Deductions city connected ach schedule)	4. Set-asides (attach schedule)		and se	otal deductions et-asides (col. 3 plus col. 4)	
(1)						<u> </u>					
(2)											
(3)											
(4)									F-4 b		
		Enter here and Part I, line 9, c			]					re and on page 1, ne 9, column (B).	
		Tarti, inie o, c	Olumni							0	
Totals		A adiniba Imaa		0		Advortising In	come (see inst	ructions	-/		
Schedule I—Exploited Exe	empt /	Activity inco	Jille, v				Come (see inst	Luctions	<u> </u>	7.5	
1. Description of exploited activ	ıty	2. Gross unrelated business incor from trade o business	r	dı onne prodi unr	rectly cted with uction of related ss income	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	om activity that not unrelated attributable to column 5		7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1) RETAIL SHOPS		408,9	975		628,999	(220,024)	14,658,846	2:	2,195,189	0	
(2) THEATERS		10,	354		57,905	(47,551)	2,039,642		5,265,322	0	
(3) TRAVEL TOURS		42,0	086			42,086	2,618,388			0	
(4) TWEEN TRIBUNE ONLINE AD	os	230,	309		117,949	112,360			15,277	15,277	
		Enter here and page 1, Part line 10, col (A	1,	page	ere and on 1, Part I, ), col (B)					Enter here and on page 1, Part II, line 25	
Totals .	<u> </u>	691,	724		804,853					15,277	
Schedule J-Advertising I	ncom	e (see instruc	ctions)							<del></del> ,	
Part I Income From P	eriodi	icals Repor	ted o	n a	Consoli	dated Basis _				т	
1. Name of periodical		2. Gross advertising income	a		Direct sing 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)											
(3)											
(4)										ļ	
<del></del> -	_					1				_	
Totals (carry to Part II, line (5))			0		0	0			F	orm <b>990-T</b> (2019)	

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

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	4,109,216	4,731,344	(622,128)			
(2) AIR & SPACE MAGAZINE	205,59	477,517	(271,926)	-		
(3) AMERICAN INDIAN MAGAZINE	6,850	57,015	(50,165)			
(4) (SEE STATEMENT)						
Totals from Part I .	<b>&gt;</b>	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 26
Totals, Part II (lines 1-5)	7,496,801	5,710,185	_		_	2,313,655

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	PRESIDENT SMITHSONIAN ENTERPRISES	5 %	24,827
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		. •	24,827

Form **990-T** (2019)

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

### 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

	or estate or trust		"	mployer identific		
	ISONIAN INSTITUTION			5	3-0206	
If "Ye	ou dispose of any investment(s) in a qualified opportunity s," attach Form 8949 and see its instructions for additional			gain or loss.	☐ Y	es 🗹 No
	Form 5227 filers need to complete only Parts I and II				<del></del>	
Par	Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Less (se	<u>e inst</u>	
See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmer to gain or los Form(s) 8949, line 2, colum	s from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1b	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.  Totals for all transactions reported on Form(s) 8949 with					
	Box A checked  Totals for all transactions reported on Form(s) 8949 with			<del></del>		
	Box B checked		l			
	Totals for all transactions reported on Form(s) 8949 with		<del></del>		-	
	Box C checked	•	1,23	ю		1,230
4 5 6	Short-term capital gain or (loss) from Forms 4684, 6252,  Net short-term gain or (loss) from partnerships, S corpor  Short-term capital loss carryover Enter the amount, if	rations, and other	estates or trusts		5	
	Carryover Worksheet				6	( )
7	Net short-term capital gain or (loss). Combine lines 1 line 17, column (3) on the back		<u>.</u>	▶	7	1,230
Part	Long-Term Capital Gains and Losses – Ger	nerally Assets H	leld More Tha	n One Year	(see	instructions)
lines l This f	nstructions for how to figure the amounts to enter on the below.  orm may be easier to complete if you round off cents to edollars	the amounts to enter on the (d) (e) Adjustments  Proceeds Cost to gain or loss			nts s from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
,	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.					
	Totals for all transactions reported on Form(s) 8949 with					
9	Box D checked					
	Box E checked  Totals for all transactions reported on Form(s) 8949 with			-	-	
	Box F checked		250,90	57		(250,907)
11	Long-term capital gain or (loss) from Forms 2439, 4684,	6252, 6781, and			11	,,
12	Net long-term gain or (loss) from partnerships, S corpora				12	
13	Capital gain distributions				13	
14	Gain from Form 4797, Part I				14	
15	Long-term capital loss carryover. Enter the amount, in Carryover Worksheet				15	( )
16	Net long-term capital gain or (loss). Combine lines 8 line 18a. column (3) on the back				16	(250,907)

	***ALTERNATIVE INVESTI	MENTS	SILO - II	RC 512(A)(6	)***				
Schedu	ule D (Form 1041) 2019								Page 2
Part	Summary of Parts I and II Caution: Read the instructions before completing thi	s part.		(1) Benefic		(2) Estate		(3)	Total
17	Net short-term gain or (loss)		17	,			1,230		1,230
18	Net long-term gain or (loss):								
а	Total for year		18a			(25	0,907)		(250,907)
b	Unrecaptured section 1250 gain (see line 18 of the workshee	et.)	18b						
С	28% rate gain		18c						
19	Total net gain or (loss). Combine lines 17 and 18a		▶ 19	<u> </u>			9,677)		(249,677)
Note: gains, neces:	If line 19, column (3), is a net gain, enter the gain on Form 1041 go to Part V, and <b>don't</b> complete Part IV If line 19, column (3), is sary	, line 4 (d s a net lo	or Form 9 ss, comp	90-T, Part I, I lete Part IV a	line 4a). nd the <b>(</b>	If lines 18a a Capital Loss	and 19, <b>Carryo</b>	column ver Wo	(2), are ne <b>ksheet,</b> a
Part	V Capital Loss Limitation								
20	Enter here and enter as a (loss) on Form 1041, line 4 (c smaller of	or Form	990-T, I	Part I, line 4	ic, if a	trust), the			
							20		3,000
	If the loss on line 19, column (3), is more than \$3,000, or if Form			e 23 (or Form	990-T,	line 39), is a	ioss, co	mplete	he Capita
_	Carryover Worksheet in the instructions to figure your capital loss					·			
Part									<del></del>
	1041 filers. Complete this part only if both lines 18a and 19 in compore from 1041, line 2b(2), and Form 1041, line 23, is more than zero		are gain	s, or an amou	ınt is er	itered in Part	I or Pa	rt II and	there is ai
Cautio	on: Skip this part and complete the Schedule D Tax Worksheet in	the instr	ructions if						
• Eith	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 than zero								
and F	990-T trusts. Complete this part only if both lines 18a and 19 ard orm 990-T, line 39, is more than zero. Skip this part and complete 8c, col. (2) is more than zero.	re gains, the <b>Sch</b> e	or qualifie e <b>dule D T</b>	ed dividends : Fax Worksher	are incluet in the	ided in incon instructions	ne in Pa if either	art I of F Ine 18t	orm 990-T >, col (2) o
21	Enter taxable income from Form 1041, line 23 (or Form 95	90-T, lin	e 39) .	21	T				
22	Enter the smaller of line 18a or 19 in column (2) but not		,				1		
	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-			<u>26</u>	<del>                                     </del>		1		
27 28	Subtract line 26 from line 21. If zero or less, enter -0- Enter the <b>smaller</b> of the amount on line 21 or \$2,650			28	<del> </del>		1		
20 29	Enter the <b>smaller</b> of the amount on line 27 or line 28 .			29	+		1		
30	Subtract line 29 from line 28. If zero or less, enter -0 Thi	s amour	.     . nt is taxe			•	30		
31	Enter the <b>smaller</b> of line 21 or line 26			31	.	. , .			-
32				32			1		
33	Enter the smaller of line 21 or \$12,950			33			]		
34	Add lines 27 and 30			34			]		
35	0.11 11 045 1 00 15			35		-	1		

Enter the **smaller** of line 32 or line 35 . . . . .

Subtract line 39 from line 38. If zero or less, enter -0-

Figure the tax on the amount on line 27 Use the 2019 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)

Figure the tax on the amount on line 21 Use the 2019 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . .

Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, Part I, line 1a (or Form 990-T, line 41)

Schedule D (Form 1041) 2019

## \*\*\*BLACKBIRD 1846 ENERGY FUND SILO - IRC 512 (A) (6)\*\*\*

### 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

Name of estate or trust		En	nproyer identific		
SMITHSONIAN INSTITUTION	<u> </u>		53	3-0206	
Did you dispose of any investment(s) in a qualified opportunity If "Yes," attach Form 8949 and see its instructions for additional	fund during the ta al requirements foi	x year? r reporting your ga	aın or loss.	□ Y <sub>0</sub>	es 🗹 No
Note: Form 5227 filers need to complete only Parts I and II.				<del></del>	
Part I Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	I	) inst	
See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales pnce)	(e) Cost (or other basis)	Adjustmen to gain or loss Form(s) 8949, l line 2, colum	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.					
<b>1b</b> 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 Box B checked					
3 Totals for all transactions reported on Form(s) 8949 with Box C checked					
4 Short-term capital gain or (loss) from Forms 4684, 6252	2, 6781, and 8824			4	
<ul> <li>Net short-term gain or (loss) from partnerships, S corpo</li> <li>Short-term capital loss carryover. Enter the amount, Carryover Worksheet</li> </ul>	orations, and other if any, from line 9	estates or trusts of the 2018 Cap	otal Loss	5 6	( )
7 Net short-term capital gain or (loss). Combine lines Inne 17, column (3) on the back	1a through 6 in col		_	7	
Part II Long-Term Capital Gains and Losses—Ge	nerally Assets F	leld More Than	One Year	(see i	nstructions)
See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) (e) Adjustments Cost to gain or loss fr		(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.					
8b Totals for all transactions reported on Form(s) 8949 with Box D checked					
9 Totals for all transactions reported on Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on Form(s) 8949 with Box F checked.		1,136,579			(1,136,579)
	6252 6781 and			11	(1,100,017)
<ul><li>11 Long-term capital gain or (loss) from Forms 2439, 4684</li><li>12 Net long-term gain or (loss) from partnerships, S corpoi</li></ul>				12	
13 Capital gain distributions				13	
14 Gain from Form 4797, Part I				14	
Long-term capital loss carryover. Enter the amount, Carryover Worksheet	if any, from line 1	14 of the 2018 C	apital Loss	15	( )
16 Net long-term capital gain or (loss). Combine lines 8				16	(1,136,579)

Schedu	ile D (Form 1041) 2019				Page 2
	III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	(2) T-4-1
	Caution: Read the instructions before completing this part		(see instr.)	or trust's	(3) Total
17	Net short-term gain or (loss)	17			
18	Net long-term gain or (loss):				
а	Total for year	18a	]	(1,136,579)	(1,136,579)
b	Unrecaptured section 1250 gain (see line 18 of the worksheet )	18b			
C	28% rate gain	18c			
19	Total net gain or (loss). Combine lines 17 and 18a	19	_	(1,136,579)	(1,136,579)
gains, necess	<u> </u>	orm 9 comp	90-T, Part I, line 4a) lete Part IV and the	If lines 18a and 19, Capital Loss Carryo	column (2), are net over Worksheet, as
Part	Capital Loss Limitation  Enter here and enter as a (loss) on Form 1041, line 4 (or Form 99)	ο.Τ	Part Lline 4c if a	truet) the	
20	smaller of:	U-1,	ranti, iiile 40, ii a	trusty, trie	
				20	,
a	The loss on line 19, column (3) or b \$3,000  If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page	 .1 lm			omplete the Capital
	Carryover Worksheet in the instructions to figure your capital loss carryover				
Part					
	1041 filers. Complete this part only if both lines 18a and 19 in column (2) are n Form 1041, line 2b(2), and Form 1041, line 23, is more than zero.	e gaın	s, or an amount is ei	ntered in Part I or Pa	art II and there is an
Cautio	on: Skip this part and complete the Schedule D Tax Worksheet in the instruct	ions if	t		
• Eith	er line 18b, col. (2) or line 18c, col. (2) is more than zero, or				
Boti	n Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.				
and Fo	990-T trusts. Complete this part only if both lines 18a and 19 are gains, or or m 990-T, line 39, is more than zero. Skip this part and complete the Schedusc, col. (2) is more than zero.  Enter taxable income from Form 1041, line 23 (or Form 990-T, line 3)	le D T	Tax Worksheet in the	e instructions if eithe	r line 18b, col (2) or
21 22	Enter the smaller of line 18a or 19 in column (2) but not	<del>.</del> .	21		
22	less than zero				
00		_	<del></del>		
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)				
24	Add lines 22 and 23		··		
25	If the estate or trust is filing Form 4952, enter the		<del></del>		
20	amount from line 4g; otherwise, enter -0 <b>25</b>				
26	Subtract line 25 from line 24. If zero or less, enter -0-		26		
27	Subtract line 26 from line 21. If zero or less, enter -0-		. 27		
28	Enter the <b>smaller</b> of the amount on line 21 or \$2,650		. 28	-	
29	Enter the smaller of the amount on line 27 or line 28		29		
30	Subtract line 29 from line 28. If zero or less, enter -0 This amount is			▶ 30	
31	Enter the <b>smaller</b> of line 21 or line 26		1 1		
32	Subtract line 30 from line 26				
33	Enter the <b>smaller</b> of line 21 or \$12,950				
34	Add lines 27 and 30				
35	Subtract line 34 from line 33. If zero or less, enter -0				
36	Enter the <b>smaller</b> of line 32 or line 35				
37	Multiply line 36 by 15% (0.15)			▶ 37	
38	Enter the amount from line 31				
39	Add lines 30 and 36				,
40	Subtract line 39 from line 38. If zero or less, enter -0-				
41	Multiply line 40 by 20% (0.20)			▶ 41	
42	Figure the tax on the amount on line 27 Use the 2019 Tax Rate Schedule				
. –	and Trusts (see the Schedule G instructions in the instructions for Form 1				,

Figure the tax on the amount on line 21. Use the 2019 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)

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### SCHEDULE I (Form 1041)

### Alternative Minimum Tax—Estates and Trusts

OMB No 1545-0092

2019

Employer identification number

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

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

SMITHSONIAN INSTITUTION Estate's or Trust's Share of Alternative Minimum Taxable Income Adjusted total income or (loss) (from Form 1041, line 17). ESBTs, see instructions. 1 n 2 2 3 Taxes . 3 4 4 Refund of taxes . . . . . . . . 5 5 Depletion (difference between regular tax and AMT) . . . . 6 Net operating loss deduction. Enter as a positive amount . . . . . . 6 1.442.506 7 Interest from specified private activity bonds exempt from the regular tax . . . . 7 8 8 Exercise of incentive stock options (excess of AMT income over regular tax income) 9 10 Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) 10 Disposition of property (difference between AMT and regular tax gain or loss) . . . . 11 11 12 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) 12 13 Passive activities (difference between AMT and regular tax income or loss) . . . 13 14 Loss limitations (difference between AMT and regular tax income or loss) . . . . . . . 14 15 15 16 Long-term contracts (difference between AMT and regular tax income) . . . . . . . 16 17 Mining costs (difference between regular tax and AMT). 17 . . . . . . . . 18 18 Research and experimental costs (difference between regular tax and AMT) . . . 19 19 Income from certain installment sales before January 1, 1987 . . . . . . 20 21 21 22 Alternative tax net operating loss deduction (See the instructions for the limitation that applies.) 22 488,733) 23 Adjusted alternative minimum taxable income, Combine lines 1 through 22 . . . 23 953,773 Note: Complete Part II below before going to line 24. 24 Income distribution deduction from Part II, line 42 . . . . 24 25 Estate tax deduction (from Form 1041, line 19) . . . . . 25 26 26 ٥ 953,773 27 Estate's or trust's share of alternative minimum taxable income. Subtract line 26 from line 23 If line 27 is: • \$25,000 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 \$25,000, but less than \$183,500, go to line 43. • \$183,500 or more, enter the amount from line 27 on line 49 and go to line 50. • ESBTs, see instructions.

II Income Distribution Deduction on a Minimum Tax Basis		
Adjusted alternative minimum taxable income (see instructions)	28	
Adjusted tax-exempt interest (other than amounts included on line 7)	29	
Total net gain from Schedule D (Form 1041), line 19, column (1). If a loss, enter -0	30	0
Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable purposes (from Form 1041, Schedule A, line 4)	31	
Capital gains paid or permanently set aside for charitable purposes from gross income (see instructions)	32	
Capital gains computed on a minimum tax basis included on line 23	33	( )
Capital losses computed on a minimum tax basis included on line 23. Enter as a positive amount	34	
Distributable net alternative minimum taxable income (DNAMTI). Combine lines 28 through 34. If zero or less, enter -0	35	0
Income required to be distributed currently (from Form 1041, Schedule B, line 9)	36	
Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10)	37	
Total distributions. Add lines 36 and 37	38	0
Tax-exempt income included on line 38 (other than amounts included on line 7)	39	
Tentative income distribution deduction on a minimum tax basis. Subtract line 39 from line 38	40	0
	Adjusted alternative minimum taxable income (see instructions).  Adjusted tax-exempt interest (other than amounts included on line 7).  Total net gain from Schedule D (Form 1041), line 19, column (1). If a loss, enter -0  Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable purposes (from Form 1041, Schedule A, line 4).  Capital gains paid or permanently set aside for charitable purposes from gross income (see instructions).  Capital gains computed on a minimum tax basis included on line 23.  Capital losses computed on a minimum tax basis included on line 23. Enter as a positive amount.  Distributable net alternative minimum taxable income (DNAMTI). Combine lines 28 through 34. If zero or less, enter -0  Income required to be distributed currently (from Form 1041, Schedule B, line 9).  Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10).  Total distributions. Add lines 36 and 37.  Tax-exempt income included on line 38 (other than amounts included on line 7).	Adjusted alternative minimum taxable income (see instructions)

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Cat No 51517Q

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Schedule I (Form 1041) 2019

Schedule I (Form 1041) 2019 Page 2 Income Distribution Deduction on a Minimum Tax Basis (continued) Tentative income distribution deduction on a minimum tax basis. Subtract line 29 from line 35. If zero 41 Income distribution deduction on a minimum tax basis. Enter the smaller of line 40 or line 41. 42 0 Enter here and on line 24. . . Part III **Alternative Minimum Tax** Exemption amount . . . . . \$25,000 44 Enter the amount from line 27 . . . 45 Phase-out of exemption amount . . 46 46 Subtract line 45 from line 44. If zero or less, enter -0-47 47 Multiply line 46 by 25% (0.25) . . . . . . . . . . . . 48 Subtract line 47 from line 43. If zero or less, enter -0-48 953.773 49 Subtract line 48 from line 44 . . . . . . . . . . . . . 49 50 Go to Part IV of Schedule I to figure line 50 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, if necessary). Otherwise, if line 49 is: • \$194,800 or less, multiply line 49 by 26% (0.26). • Over \$194,800, multiply line 49 by 28% (0.28) and subtract \$3,896 from the result . . . . . . 263,160 50 51 Alternative minimum foreign tax credit (see instructions) . . . . . 51 Tentative minimum tax. Subtract line 51 from line 50 . . . . . 52 263 160 Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from Schedule G, line 2a) 53 Alternative minimum tax. Subtract line 53 from line 52. If zero or less, enter -0-. Enter here and on 263,160 **Line 50 Computation Using Maximum Capital Gains Rates** 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 instructions before completing this part. 55 55 953,773 Enter the amount from line 26 of Schedule D (Form 1041), 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, 56 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 57 58 If you didn't complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 56. Otherwise, add lines 56 and 57 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) 58 Enter the **smaller** of line 55 or line 58 59 59 953,773 60 Subtract line 59 from line 55 . . . . 60 61 If line 60 is \$194,800 or less, multiply line 60 by 26% (0.26). Otherwise, multiply line 60 by 28% (0.28) and subtract \$3,896 from the result . . . . . ▶ 61 263,160 62 Maximum amount subject to the 0% rate \$2,650 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 23; if zero or less, enter -0- . . . . 63 2,650 64 64 Subtract line 63 from line 62. If zero or less, enter -0- . . . . . . . . . Enter the **smaller** of line 55 or line 56 . . . . . . . . . . . . . 65 0 0 Enter the smaller of line 64 or line 65. This amount is taxed at 0%. 66 66 0 Subtract line 66 from line 65

Page 3

Scriedi	Jie I (Form 1041) 2019				Page 3
Part	IV Line 50 Computation Using Maximum Capital Gains Rates (cont.	nuec	1)		
68	Maximum amount subject to rates below 20%	68	\$12,950		_
69	Enter the amount from line 64	69	2,650		
70	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 23; if zero or less, enter -0	70			
71	Add line 69 and line 70	71	2,650		
72	Subtract line 71 from line 68. If zero or less, enter -0-	72	10,300	ł	
73	Enter the smaller of line 67 or 72	73	<del></del>		
74	Multiply line 73 by 15% (0.15)		·	74	٥
75		75		<del></del>	
,,	If lines 75 and 55 are the same, skip lines 76 through 80 and go to line 81. Other	$\overline{}$	<del></del>		
76	Subtract line 75 from line 65				
77	Multiply line 76 by 20% (0.20)			77	0
• • •	If line 57 is zero or blank, skip lines 78 through 80 and go to line 81. Otherwi				
78		78	jo		
79	Subtract line 78 from line 55		0	1	
80	Multiply line 79 by 25% (0 25)			80	o
81	Add lines 61, 74, 77, and 80			81	263,160
82	If line 55 is \$194,800 or less, multiply line 55 by 26% (0.26). Otherwise, multiply				
-	and subtract \$3,896 from the result			82	263,160
83	Enter the <b>smaller</b> of line 81 or line 82 here and on line 50			83	263,160

Schedule I (Form 1041) 2019

8949

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

2019

Department of the Treasury Internal Revenue Service

▶ Go to www.irs.gov/Form8949 for instructions and the latest information. ▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment Sequence No 12A

OMB No 1545-0074

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

Social security number or taxpayer identification number Name(s) shown on return 53-0206027 **SMITHSONIAN INSTITUTION** 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 broker and may even tell you which box to check 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) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss If you enter an amount in column (g), (h) enter a code in column (f) Gain or (loss). Cost or other basis (c) (d) (b) (a) See the separate instructions. See the Note below Subtract column (e) Date sold or Proceeds Description of property Date acquired from column (d) and disposed of (sales price) and see Column (e) (Example 100 sh XYZ Co) (Mo, day, yr) combine the result (Mo, day, yr) (see instructions) in the separate (a) Code(s) from with column (g) instructions Amount of instructions adjustment

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ▶

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.

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side

SMITHSONIAN INSTITUTION

Social security number or taxpayer identification number
53-0206027

Before you check Box D, E, or F 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 II

**Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-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 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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.

(D) Long-term transactions (E) Long-term transactions	reported on I	Form(s) 1099	-B showing bas				)
(a)	(b)	(c) Date sold or	(d)	(e) Cost or other basis See the Note below	If you enter an a	any, to gain or loss emount in column (g), ide in column (f) erate instructions.	(h) Gain or (loss). Subtract column (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)
PARTNERSHIP K-1 LONG-TERM	VARIOUS	VARIOUS		1,136,579	_		(1,136,579)
					١		
							· · ·
			)		_		
<u> </u>							
,							
2 Totals. Add the amounts in columns negative amounts) Enter each total	al here and incl	lude on your	1				

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.

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

1,136,579

(1,136,579)

8949

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

OMB No 1545-0074

2019

Department of the Treasury Internal Revenue Service

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

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

Attachment Sequence No 12A

Name(s) shown on	return
<b>SMITHSONIAN</b>	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.

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 I complete a separate Form 8949, p for one or more of the boxes, com	age 1, for ea	sch applicabl	e box. If you have	/e more short-te	rm transact	nort-term transa lons than will fit	ctions, on this page
(A) Short-term transactions						see <b>Note</b> above	<del>)</del> )
(B) Short-term transactions	reported on	Form(s) 1099	9-B showing bas	sis <b>wasn't</b> report	ed to the IF	RS	
(C) Short-term transactions	not reported	to you on F	orm 1099-B	<u> </u>			
1 (a)	(b)	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	If you enter an enter a co	any, to gain or loss amount in column (g), ode in column (f) arate instructions.	(h) Gain or (loss) Subtract column (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)
PARTNERSHIP K-1: SHORT-TERM	VARIOUS	VARIOUS	1,230				1,230
······································						-	-
							-
		-				· · · · · · · · · · · · · · · · · · ·	
						*	
	-						
<u> </u>							
						`	
2 Totals. Add the amounts in columns negative amounts) Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6	al here and inc is checked), lir	lude on your ne 2 (if Box B	1,230				1,230

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)\*\*\*

Instructions). For short-term transactions, see page 1.  Note: You may aggregate all long-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 8a; you aren't required to report these transactions on Form 8949 (see instructions).  You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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.  (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)  (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS  (F) Long-term transactions not reported to you on Form 1099-B  1  (a)  (b)  Date acquired (Mo , day, yr)  (b)  Date acquired (Mo , day, yr)  (c)  Date sold or disposed of (Mo , day, yr)  (mo , da	Form 8949 (2019)				,	<ul> <li>Attach</li> </ul>	ment Sequence No	12A Page 2
Part II  Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.  Note: You may aggregate all long-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 8a; you aren't required to report these transactions on Form 8949 (see instructions).  You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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.    (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)   (E) Long-term transactions not reported to you on Form 1099-B  1   (a)   (b)   (c)   (d)   (d	* · · · ·	axpayer identificat	tion no not requir	ed if shown on other s	Social secu	-		ation number
Instructions). For short-term transactions, see page 1.  Note: You may aggregate all long-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 8a; you aren't required to report these transactions on Form 8949 (see instructions).  You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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.  (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)  (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS  (F) Long-term transactions not reported to you on Form 1099-B  1  (a)  (b)  Date acquired (Mo, day, yr)  (b)  Date acquired (Mo, day, yr)  (c)  Date sold or disposed of (Mo, day, yr)  (mo, day,	statement will have the same informati	tion as Form 10	r you received 099-B Either	any Form(s) 1099 will show whether	-B or substitute st your basis (usuall)	atement(s) fr your cost) v	om your broker. A vas reported to th	substitute e IRS by your
to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).  You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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.  (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)  (E) Long-term transactions not reported to you on Form 1099-B  (a)  Description of property (Example 100 sh XYZ Co)  (b)  Date sold or disposed of (Mo , day, yr)  (c)  Date sold or disposed of (Mo , day, yr)  (c)  Date sold or disposed of (Mo , day, yr)  (c)  Date sold or disposed of (Mo , day, yr)  (c)  Date sold or disposed of (Mo , day, yr)  (c)  Date sold or disposed of (Mo , day, yr)  (c)  Cost or other basis See the Note below and see Column (e)  The Note below (sales price)  (f)  Code(s) from (g)  Amount of adjustment  (g)  Code(s) from instructions  (g)  Code(s) from instructions  (g)  Combine the result one instructions  (g)  Code(s) from instructions  (g)  Code(s) from instructions  (g)  Combine the result one instructions with column (g)  (g)  Code(s) from instructions  (g)					eld more than	1 year are	generally long	-term (see
a separate Form 8949, page 2, for each applicable box. If you have more long-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.    (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)   (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS   (F) Long-term transactions not reported to you on Form 1099-B  1	to the IRS and for v	vhich no ad	justments c	r codes are re	quired. Enter th	ne totals d	irectly on Sche	
☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS  ☐ (F) Long-term transactions not reported to you on Form 1099-B  1  (a) Description of property (Example 100 sh XYZ Co) Date acquired (Mo , day, yr) (Mo , day, yr) (Example 100 sh XYZ Co)  (b) Date sold or disposed of (Mo , day, yr) (Mo , day, yr) (Mo , day, yr) (Cost or other basis See the Note below and see Column (e) in the separate instructions (from column (d) and combine the result with column (g)) (f) Code(s) from instructions (Adjustment, if any, to gain or loss if you enter an amount in column (g), enter a code in column (f) See the Note below and see Column (e) in the separate instructions (f) Code(s) from instructions (Adjustment, if any, to gain or loss if you enter an amount in column (g), enter a code in column (f) See the separate instructions.  Subtract column (g) and combine the result with column (g)	a separate Form 8949, page 2, for	each applica	able box. If y	ou have more lo	ng-term transac			
1 (a) Description of property (Example 100 sh XYZ Co) Date sold or disposed of (Mo , day, yr) (Mo , day, yr)  Date sold or disposed of (Mo , day, yr)  Date sold or disposed or dispose	(E) Long-term transactions	reported on l	Form(s) 1099	-B showing bas				e)
(Example 100 sh XYZ Co)  Date acquired (Mo , day, yr)  (Mo , day, yr)  disposed of (Mo , day, yr)  (see instructions)  and see Column (e) in the separate instructions  Code(s) from instructions  (g)  Code(s) from instructions  Amount of adjustment  from column (d) and combine the result with column (g)	1 (a)	(b)	(c)	(d)	Cost or other basis	If you enter an enter a c	amount in column (g), ode in column (f)	Gain or (loss).
PARTNERSHIP K-1: SHORT-TERM VARIOUS VARIOUS 250,907 (250,907)				(sales price)	in the separate	(f) Code(s) from	Amount of	from column (d) and combine the result
	PARTNERSHIP K-1: SHORT-TERM	VARIOUS	VARIOUS		250,907			(250,907)
	······································							
							_	
								,
		,						
							·	
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ► 250,907 (250,907)	negative amounts) Enter each tota Schedule D, line 8b (if Box D above	here and incl is checked), lin	ude on your le 9 (if Box E					(250.907)

Smithsonian Institution Capital Loss Carryforward Schedule 9/30/2020

Capital Loss	Carryforward	remaining	246,677	246,677
forward	Capital Loss Utilized in	Current Year	(3,000)	(3,000)
/ (512(a)(6)) NOL Carry Capital Losses	Utilized in Prior	Years	•	•
Iternative Investments - Silo-ed Activity (512(a)(6)) NOL Carryforward Capital Losses	Capital Loss	Generated in CY	249,677	249,677
Alternative Invest			9/30/2020	

246,677
Capital Loss Carryforward Available for FY21

Capital Loss	Carryforward	remaining	(1,136,579)	(1,136,579)
	Capital Loss Utilized in	Current Year		•
L Carryforward Capital Losses	Utilized in Prior	Years	- !	•
Blackbird - Silo-ed Activity (512(a)(6)) NOL Carryforward Capital Losse	Capital Loss	Generated in CY	(1,136,579)	(1,136,579)
Blackbird - Silo-e		ı	9/30/2020	

1

Capital Loss Carryforward Available for FY21

## **Unrelated Business Taxable Income from an Unrelated Trade or Business**

OMB No 1545-0047

Department of the Treasury

For calendar year 2019 or other tax year beginning 10/01 , 2019, and ending

Internal Revenue Service Name of the organization

► 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	ISONIAN INSTITUTION				53-020	6027	
Ur	nrelated Business Activity Code (see instructions) ▶ 51						
	escribe the unrelated trade or business  THEATERS		<u> </u>				
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	0			0	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	0			0	
С	Capital loss deduction for trusts	4c	0			0	
5	Income (loss) from a partnership or an S corporation (attach						
-	statement)	5	0			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	0	0		0	
9	Investment income of a section 501(c)(7), (9), or (17)						
_	organization (Schedule G)		o  ·	0		0	
10	Exploited exempt activity income (Schedule I)	10	10,354	57,905		(47,551)	
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	10,354	57,905		(47,551)	
Part	connected with the unrelated business income.)			ns.) (Deductio			
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	Depreciation (attach Form 4562)		. 20	0	-		
21	Less depreciation claimed on Schedule A and elsewhere on re				21b	0	
22	Depletion				22	0	
23	Contributions to deferred compensation plans				23	0	
24	Employee benefit programs				24	0	
25	Excess exempt expenses (Schedule I)				25	0	
26	Excess readership costs (Schedule J)				26	0	
27	Other deductions (attach schedule)				27	0	
28	Total deductions. Add lines 14 through 27 ,				28	0	
29	Unrelated business taxable income before net operating loss of				29	(47,551)	
30	Deduction for net operating loss arising in tax years beginn instructions)	ning on	or after January 1	I, 2018 (see	30	0	
31	Unrelated business taxable income. Subtract line 30 from line				31	(47,551)	

For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income. Subtract line 30 from line 29 Cat No 71329Y

Schedule M (Form 990-T) 2019

## **Unrelated Business Taxable Income from an Unrelated Trade or Business**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

09/30 , 20 20 For calendar year 2019 or other tax year beginning 10/01 , 2019, 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).

501(e)(3) Organizations Only

Employer identification number

SMITH	HSONIAN INSTITUTION					53-020	6027	
	nrelated Business Activity Code (see instructions) ▶56	_	_					
De	escribe the unrelated trade or business TRAVEL TOURS			-		-		
Par	Unrelated Trade or Business Income		(A)	Income	(B) Expen	ses	(C) Net	
1a	Gross receipts or sales 0	Ţ					·	
b	Less returns and allowances 0 c Balance ▶	1c		0	<u> </u>			
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	ļ		. 0	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		0			0	
С	Capital loss deduction for trusts	4c		0			0	
5	Income (loss) from a partnership or an S corporation (attach					] [		
	statement)	5		0			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		0		0	0	
9	Investment income of a section 501(c)(7), (9), or (17)							
	organization (Schedule G)			0		<u> </u>	0	
10	Exploited exempt activity income (Schedule I)	10		42,086		0	42,086	
11	Advertising income (Schedule J)	11		0	<u> </u>	0	0	
12	Other income (See instructions; attach schedule)	12		0			0	
13	Total. Combine lines 3 through 12	13		42,086		0	42,086	
Part	connected with the unrelated business income.)			<u> </u>		ions m	ust be directly	, 
14	Compensation of officers, directors, and trustees (Schedule K					15	0	
15	Salaries and wages					16	0	
16	Repairs and maintenance					17	0	
17	Bad debts					18	0	_
18	Interest (attach schedule) (see instructions)					19	0	
19	Taxes and licenses			20	اه .	13		
20	Depreciation (attach Form 4562)				- 0	21b	o	
21	Less depreciation claimed on Schedule A and elsewhere on re					22		
22	Depletion					23	0	
23	Contributions to deferred compensation plans					24		
24	Employee benefit programs					25	0	
25	Excess exempt expenses (Schedule I)					26	0	
26	Excess readership costs (Schedule J)					27	0	
27	Other deductions (attach schedule)					1 41	וט	1

For Paperwork Reduction Act Notice, see instructions.

Total deductions. Add lines 14 through 27

Cat No 71329Y

Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see

. . . . . . . . . . . . . . . . . .

Unrelated business taxable income. Subtract line 30 from line 29

Schedule M (Form 990-T) 2019

O

0

42,086

42.086

28

29

30

31

28

29

# Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No 1545-0047

2019

Department of the Treasury Internal Revenue Service

For calendar year 2019 or other tax year beginning 10/01 , 2019, and ending 09/30 , 20 20

▶ 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 o	of the organization			Employer identifi	cation nu	mber	
SMITI	HSONIAN INSTITUTION			5	3-02060	27	
Ur	nrelated Business Activity Code (see instructions) ▶ 54						
De	escribe the unrelated trade or business ADVERTISING		-				
Par	Unrelated Trade or Business Income		(A) Income	(B) Expenses	•	(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	0			0	
ь	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	0			0	
С	Capital loss deduction for trusts	4c	0			0	
5	Income (loss) from a partnership or an S corporation (attach						
	statement)	5	0	1	1	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	0	' 0		0	
9	Investment income of a section 501(c)(7), (9), or (17)						
	organization (Schedule G)	$\Box \bot$	o [	0	L	0	
10	Exploited exempt activity income (Schedule I)	10	230,309	117,949		112,360	
11	Advertising income (Schedule J)	11	7,496,801	5,710,185		1,786,616	
12	Other income (See instructions; attach schedule)	12	0			0	
13	Total. Combine lines 3 through 12	13	7,727,110	5,828,134		1,898,976	
Part	connected with the unrelated business income.)						
14	Compensation of officers, directors, and trustees (Schedule K)			-	14	24,827	
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		1 1		19	0	
20	Depreciation (attach Form 4562)			0 -	241	اء	
21	Less depreciation claimed on Schedule A and elsewhere on re-				21b 22	0	
22	Depletion			· · · · ·		0	
23	Contributions to deferred compensation plans				23	0	
24	Employee benefit programs				25	15,277	
25	Excess exempt expenses (Schedule I)				$-\!\!\!\!-\!\!\!\!-$	2,313,655	
26	Excess readership costs (Schedule J)				26 27	2,313,655	
27	Other deductions (attach schedule)			· · · · · · -	28	2,353,759	
28	Total deductions. Add lines 14 through 27			<u>}</u>	29	(454,783)	
29	Unrelated business taxable income before net operating loss d			-	23	(404,703)	
30	Deduction for net operating loss arising in tax years beginninstructions)	-		I	30	0	
31	Unrelated business taxable income. Subtract line 30 from line 2			<b> </b>	31	(454,783)	

## **Unrelated Business Taxable Income from an Unrelated Trade or Business**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

For calendar year 2019 or other tax year beginning 10/01 , 2019, and ending 09/30 , 20 20

► 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) ▶ 52

				<u> </u>	
а	Gross receipts or sales0	1			
)	Less returns and allowances0	1c	0		
	Cost of goods sold (Schedule A, line 7)	2	0		
	Gross profit. Subtract line 2 from line 1c	3	0		0
3	Capital gain net income (attach Schedule D)	4a	0		0
)	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	0		0
С	Capital loss deduction for trusts	4c	(3,000)		(3,000)
	Income (loss) from a partnership or an S corporation (attach				
	statement)	5	(30,084)		(30,084)
	Rent income (Schedule C)	6	0	0	0
	Unrelated debt-financed income (Schedule E)	7	0	0	0
	Interest, annuities, royalties, and rents from a controlled				
	organization (Schedule F)	8	0	0 1	0
	Investment income of a section 501(c)(7), (9), or (17)				
	organization (Schedule G)		0	) 0	0
	Exploited exempt activity income (Schedule I)	10	0	0	0
	Advertising income (Schedule J)	11	0	0	0
	Other income (See instructions; attach schedule)	12	0		0
	Total. Combine lines 3 through 12	13	(33,084)	0	(33,084)

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	Depreciation (attach Form 4562)		
21	Less depreciation claimed on Schedule A and elsewhere on return	21b	0
22	Depletion	22	0
23	Contributions to deferred compensation plans	23	0
24	Employee benefit programs	24	0
25	Excess exempt expenses (Schedule I)	25	0
26	Excess readership costs (Schedule J)	26	0
27	Other deductions (attach schedule)	27	0
28	Total deductions. Add lines 14 through 27	28	0
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	(33,084)
30	Deduction for net operating loss arising in tax year's beginning on or after January 1, 2018 (see		
	instructions)	30	٥l
31	Unrelated business taxable income. Subtract line 30 from line 29	31	(33,084)

For Paperwork Reduction Act Notice, see instructions.

Cat No 71329Y

Schedule M (Form 990-T) 2019

## Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No 1545-0047

2019

Department of the Treasury Internal Revenue Service Name of the organization For calendar year 2019 or other tax year beginning 10/01 , 2019, and ending 09/30 , 20 20

► 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

SIVILLE	ASONIAN INSTITUTION				33-02	.08027	
Ur	nrelated Business Activity Code (see instructions) > 52		_	<del>-</del>			
De	escribe the unrelated trade or business  BLACKBIRD INVESTM	IENTS					_
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			i	
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			0	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	0	(		0	
С	Capital loss deduction for trusts	4c	0			, 0	
5	Income (loss) from a partnership or an S corporation (attach				i	]	
	statement)	5	0			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	0	0		0	
9	Investment income of a section 501(c)(7), (9), or (17)		_	_			
	organization (Schedule G)		0	0		0	
10	Exploited exempt activity income (Schedule I)	10	0	0		0	
11	Advertising income (Schedule J)	11	0	0		0	
12 13	Other income (See instructions, attach schedule)	12	0	0		0	
	Total. Combine lines 3 through 12	13	٠				
Part	Deductions Not Taken Elsewhere (See instructions fo connected with the unrelated business income.)	r limita	ations on deduct	tions.) (Deductio	ns m	ust be directly	
14	Compensation of officers, directors, and trustees (Schedule K)	ı			14	0	
15	Salaries and wages				15	ō	
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	Depreciation (attach Form 4562)			0			
21	Less depreciation claimed on Schedule A and elsewhere on re			0	21b	0	
22	Depletion				22	0	
23	Contributions to deferred compensation plans				23	0	
24	Employee benefit programs				24	0	
25	Excess exempt expenses (Schedule I)				25	0	
26	Excess readership costs (Schedule J)				26	0	
27	Other deductions (attach schedule)				27	0	
28	Total deductions. Add lines 14 through 27				28	0	
29	Unrelated business taxable income before net operating loss d	educti	on. Subtract line	28 from line 13	29	0	
30	Deduction for net operating loss arising in tax years beginn	ing or	or after Januar	y 1, 2018 (see		o	
	instructions)				30		
31	Unrelated business taxable income. Subtract line 30 from line	29 .			31	0	

## **Unrelated Business Taxable Income from an Unrelated Trade or Business**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

For calendar year 2019 or other tax year beginning 10/01 , 2019, and ending 09/30 , 20 20

▶ 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).

501(c)(3) Organizations Only

Employer identification number

53-0206027

SMITH	ISONIAN INSTITUTION				53	3-020	6027	
Ur	related Business Activity Code (see instructions) ▶ 52					,		
De	scribe the unrelated trade or business > JEN IV CO-INVESTME	NTS	_					
Part	Unrelated Trade or Business Income		(A) Income	(B) Ex	penses		(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	0				0	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	0				0	
С	Capital loss deduction for trusts	4c	0				0	
5	Income (loss) from a partnership or an S corporation (attach							
	statement)	5	47,286				47,286	
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					Ī		
-	organization (Schedule F)	8	0		0		0	
9	Investment income of a section 501(c)(7), (9), or (17)							
_	organization (Schedule G)		o		اه	ŀ	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	47,286	1	0		47,286	
Part	connected with the unrelated business income.)							
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)				٠	18	0	
19	Taxes and licenses				. ⊢	19	0	
20	Depreciation (attach Form 4562)			0				
21	Less depreciation claimed on Schedule A and elsewhere on re			. 0		21b	0	
22	Depletion				<u> </u>	22	0	
23	Contributions to deferred compensation plans				·  -	23	0	
24	Employee benefit programs				` ⊢	24	0	
25	Excess exempt expenses (Schedule I)				<b>⊢</b>	25	0	
26	Excess readership costs (Schedule J)				<u> </u>	26	0	
27	Other deductions (attach schedule)					27	0	
28	Total deductions. Add lines 14 through 27					28	0	
29	Unrelated business taxable income before net operating loss d	educt	ion. Subtract line	e 28 from line	13 📙	29	47,286	
30	Deduction for net operating loss arising in tax years beginn	ing or	n or after Janua	ary 1, 2018 (	see _	30	0	

Unrelated business taxable income. Subtract line 30 from line 29

47,286

## **Unrelated Business Taxable Income from an Unrelated Trade or Business**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

For calendar year 2019 or other tax year beginning 10/01 , 2019, and ending 09/30 , 20 20

▶ 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).

501(c)(3) Organizations Only

Employer identification number

53-0206027 **SMITHSONIAN INSTITUTION** Unrelated Business Activity Code (see instructions) ▶ Describe the unrelated trade or business ▶ DEBT-FINANCED RENTAL 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 ▶ 0 Cost of goods sold (Schedule A, line 7) . n 3 0 Gross profit, Subtract line 2 from line 1c. . . . 0 n 4a Capital gain net income (attach Schedule D) 4a **b** Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b 0 0 0 0 Income (loss) from a partnership or an S corporation (attach 0 5 ٥ statement) . . . . . . . . . . . . . . 0 0 6 Rent income (Schedule C) 1,353,134 7 1,528,169 Unrelated debt-financed income (Schedule E) . . . 2,881,303 7 Interest, annuities, royalties, and rents from a controlled 0 8 0 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) . . . . . 0 0 0 ٥ 0 Exploited exempt activity income (Schedule I) . . . 10 0 0 0 Advertising income (Schedule J) . . . . . 11 11 0 0 Other income (See instructions; attach schedule) . 12 **Total.** Combine lines 3 through 12 13 2,881,303 1,528,169 13 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.) Compensation of officers, directors, and trustees (Schedule K) . . . 14 15 ٥ 15 0 16 16 Repairs and maintenance O 17 17 n 18 18 Interest (attach schedule) (see instructions) . . . . . 19 n 19 Taxes and licenses . . . . . . . . . . . . . . . . 20 Less depreciation claimed on Schedule A and elsewhere on return 21b 0 21 22 0 23 Contributions to deferred compensation plans 23 0 24 24 Employee benefit programs . . . . . . 0 25 Excess exempt expenses (Schedule I) . . . O 26 26 Excess readership costs (Schedule J) . 27 0 Other deductions (attach schedule) . . . 27 ٥ 28 Total deductions. Add lines 14 through 27 1,353,134 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 29 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see 0 30 31 1,353,134

For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income. Subtract line 30 from line 29

Cat No 71329Y

Schedule M (Form 990-T) 2019

### Form 990T Part I, Line 5

Income (loss) from Partnership and S Corporations

Name of Partnership	EIN	UBI
ALT INVESTMENTS		
(1) ALCÓN REAL ESTATE PARTNERS TAX-EXEMPT PARALLEL FUND II, L P	26-3367751	-791
(2) BERKSHIRE FUND VIII, L P	27-5270108	1,255
(3) LS POWER FUND III FEEDER 1 LP	46-3422831	68,702
(4) LS POWER FUND IV FEEDER 1 LP	46-3422831	-13,104
(5) OATV IV, LP	47-5507113	
(6) RHINO RESOURCE PARTNERS, LP	27-2377517	2
(7) SFC ENERGY PARTNERS II, L P	45-1008148	2,283
(8) STONELAKE OPPORTUNITY PARTNERS IV, LP	47-5331725	5,288
(9) YORKTOWN ENERGY PARTNERS IX, LP	27-3125579	1,147
(10) YORKTOWN ENERGY PARTNERS X, LP	46-2445852	1,544
(11) SUSPENDED PASSIVE LOSSES UTILIZED UPON DISPOSITION		87,382
(12) BLUESCAPE ENERGY RECAPITALIZATION III LP	30-0912568	2,629
(13) BLUESCAPE ENERGY RECAP & RESTRUT FUND IV LP (NEW)	82-5485973	-12,980
(14) MID-CON ENÈRGY PARTNERS L P (PTP)	45-2842469	8
(15) ORBIMED ROYALTY OPPORTUNITIES II, LP	32-0457118	485
(16) PEARL ENERGY INVESTMENTS, LP	47-3899327	170
(17) PEARL ENERGY INVESTMENTS II, LP	82-1705067	440
(18) PROJECT PATIO BRAZIL III JV LP	99-999999	1,605
(19) STONELAKE OPPORTUNITY PARTNERS V, LP	82-3442125	-1,221
	Total	-30,084
JEN IV CO-INVEST 2, LP		
(1) JEN IV CO-INVEST 2, LP		47,286
	Total	47,286

Form 990T Part III, Line 36

ELECTION TO FORGO THE NET OPERATING LOSS CARRYBACK PERIOD

TAXPAYER INCURRED A NET OPERATING LOSS IN THE TAX YEAR COVERED BY THIS FILING, AND IS ENTITLED TO A FIVE-YEAR CARRYBACK OF SUCH LOSS UNDER IRC SEC 172(B)(1)(D) PURSUANT TO IRC SEC 172(B)(3), TAXPAYER HEREBY ELECTS TO RELINQUISH THE CARRYBACK PERIOD WITH RESPECT TO ANY REGULAR TAX AND AMT NET OPERATING LOSSES

Form 990T Part III. Line 36	Deduction for net operating loss arising in tax years beginning before January 1, 2018
	bedeelen ter net operating toos anothing in tan yours segment a series of

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		1,263,044	289,954	0	9302032
9302013	2,188,675			1,152,552	1,036,123	9302033
9302014	2,008,036				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	9302040
9302020		11,239	1		11,239	
Totals	8.306,294	19,767	1,815,889	1,442,506	5,067,666	

Smithsonian Institution Silo-ed Net Operation Loss Carryforward Schedule For Tax Year Ended September 30, 2020 53-0206027

### Theaters - Silo-ed Activity (512(a)(6)) NOL Carryforward

	Amount			
Year	Generated	Utilized in PY	Utilized in CY	Remaining
9/30/2019	83,415	<u></u>		83,415
9/30/2020	47,551	-	<u>-</u>	47,551
				130,966

### Advertising - Silo-ed Activity (512(a)(6)) NOL Carryforward

		Amount			
	Year	Generated	Utilized in PY	Utilized in CY	Remaining
_	9/30/2019	1,199,713			1,199,713
	9/30/2020	454,783	' -	-	454,783
		•			1.654.496

### Alternative Investments - Silo-ed Activity (512(a)(6)) NOL Carryforward

	Amount '			
Year	Generated	Utilized in PY	Utilized in CY	Remaining
9/30/2019	572,803			572,803
9/30/2020	33,084	-	-	33,084
				605,887

## Retail Shop - Silo-ed Activity (512(a)(6)) NOL Carryforward

		Amount			
	Year	Generated	Utilized in PY	Utilized in CY	Remaining
_	9/30/2020	220,024	-	-	220,024

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining	AMT NOL Expire
2012	1,393,194		1,393,194		0	2031
2013	1,783,670		1,783,670		0	2032
2014	993,845		505,112	488,733	0	2033
2017					0	
2018					0	
	i					l

3,681,976

0

0 0 0

488,733

Totals

4,170,709

Schedule E. Line 3(a)

Straight Line Depreciation

DEBT-FINANCED RENTAL INCOME		
(1) CAPITAL GALLERY	Description	Amount
	SL DEPRECIATION	778,327
Total for Schedule C, Line 3(a), Deductions directly connected with the income in columns		778,327

Schedule E, Line 3(b)	Other Deductions			
		ſ		
DEBT-FINANCED RENTAL INCOME			<u> </u>	
0.051.01.150			Description	. Amount
(1) CAPITAL GALLERY		OTHER		749,84
Total for Schedule E. Lie	no 3(b) Other Deductions			749 8

	Schedule J, Part II	e 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	3,075,144	444,162	2,630,982		2,313,655	2,313,655
(5	) SMITHSONIAN CHANNEL CONTENT AND ADVERTISING	100,000	147	99,853			0

Smithsonian Institution Schedule I - AMT Adjustments 9/30/2020

	Activity #1	Activity #2	Activity #2 Activity #3 Activity #4	Activity #4	Activity #5	Activity #6	Activity #7	Activity #8	Total
	RETAIL SHOPS	TRAVEL THEATERS TOURS	TRAVEL	ADVERTISING	ALTERNATIVE INVESTMENTS	BLACKBIRD 1846 JEN IV.CO- ENERGY FUND, LP INVEST 2, LP		DEBT. FINANCED RENTAL INCOME	Schedule I
Regular Taxable Income (pre-NOL) AMT adjustments	(220,024)	(47,551)	42,086	(454,783)	(33,084)		47,286	1,353,134	1,442,506
Line 13 - Disposition of property (difference between AMT and regular tax gain/loss)					(15,872)				
Line 14 - Depreciation on assets palced in service after 1986 (difference between regular tax and AMT) Line 22 - Intangible Drilling Costs Preference					, 12,146				
Total Alternative Minimum Taxable Income (pre-NOL)	(220,024)	(47,551)	42,086	(454,783)	(36,810)	,	47,286	1,353,134	1,442,506
	AMTI from this activi AMTI from this silo-ed activity silo-ed under IRC under IRC 512(a)(6)	AMTI from this activity silo-ed under IRC ) 512(a)(6)		AMTI from this activity silo-ed under IRC 512(a)(6)	AMTI from this activity silo-ed under iRC 5.12(a)(6)				