

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

- ▶ Do not enter Social Security numbers on this form as it may be made public.
- ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2018

Open to Public Inspection

A For the 2018 calendar year, or tax year beginning 07/01, 2018, and ending 06/30, 2019

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <u>CARNEGIE INSTITUTION OF WASHINGTON</u>		D Employer identification number <u>53-0196523</u>
	Doing Business As <u>CARNEGIE SCIENCE</u>		E Telephone number <u>(202) 387-6400</u>
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite <u>1530 P ST NW</u>		G Gross receipts \$ <u>388,052,532.</u>
	City or town, state or province, country, and ZIP or foreign postal code <u>WASHINGTON, DC 20005-1910</u>		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
F Name and address of principal officer: <u>ERIC ISAACS</u> <u>SAME AS C ABOVE</u>		H(c) Group exemption number ▶	
I Tax-exempt status:	<input checked="" type="checkbox"/> 501(c)(3)	<input type="checkbox"/> 501(c) () ◀ (insert no.)	<input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527
J Website: ▶ <u>WWW.CARNEGIESCIENCE.EDU</u>		L Year of formation: <u>1904</u> M State of legal domicile: <u>DC</u>	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>THE CONDUCT OF SCIENTIFIC DISCOVERY, RESEARCH AND EDUCATION IN THE FIELDS OF PLANT BIOLOGY, DEVELOPMENTAL BIOLOGY, EARTH AND PLANETARY SCIENCES, ASTRONOMY, AND GLOBAL ECOLOGY</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	<u>20.</u>
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	<u>20.</u>
	5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	<u>509.</u>
	6 Total number of volunteers (estimate if necessary)	6	<u>27.</u>
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	<u>-310,958.</u>
b Net unrelated business taxable income from Form 990-T, line 34	7b	<u>0.</u>	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	<u>29,281,249.</u>	<u>23,406,867.</u>
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>6,714,446.</u>	<u>6,072,640.</u>
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>52,798,376.</u>	<u>103,948,497.</u>
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>1,411,434.</u>	<u>4,413,466.</u>
		<u>90,205,505.</u>	<u>137,841,470.</u>
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u>3,972,978.</u>	<u>3,059,013.</u>
	14 Benefits paid to or for members (Part IX, column (A), line 4)	<u>0.</u>	<u>0.</u>
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u>53,131,553.</u>	<u>51,698,184.</u>
	16a Professional fundraising fees (Part IX, column (A), line 11e)	<u>0.</u>	<u>0.</u>
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>3,109,997.</u>		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u>40,833,020.</u>	<u>41,362,844.</u>
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<u>97,937,551.</u>	<u>96,120,041.</u>	
19 Revenue less expenses. Subtract line 18 from line 12	<u>-7,732,046.</u>	<u>41,721,429.</u>	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	<u>1,239,346,085.</u>	<u>1,206,419,667.</u>
	22 Net assets or fund balances. Subtract line 21 from line 20	<u>180,522,890.</u>	<u>181,651,197.</u>
	<u>1,058,823,195.</u>	<u>1,024,768,470.</u>	

COPY FOR PUBLIC INSPECTION

Part II Signature Block

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

Sign Here	Signature of officer	Date			
	<u>TIMOTHY DOYLE</u> Type or print name and title	<u>07/07/2020</u> Date			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	<u>MARY TORRETTA</u>				<u>P00847851</u>
	Firm's name ▶ <u>GRANT THORNTON LLP</u>	Firm's EIN ▶ <u>36-605558</u>	Firm's address ▶ <u>1000 WILSON BLVD, SUITE 1400 ARLINGTON, VA 22209</u>	Phone no. <u>703-847-7500</u>	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2018)

Application for Automatic Extension of Time To File an Exempt Organization Return

► **File a separate application for each return.**
► **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

		Enter filer's identifying number, see instructions
Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. CARNEGIE INSTITUTION OF WASHINGTON	Employer identification number (EIN) or 53-0196523
	Number, street, and room or suite no. If a P.O. box, see instructions. 1530 P ST NW	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20005-1910	

Enter the Return Code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

TIMOTHY DOYLE

• The books are in the care of ► 1530 P ST NW WASHINGTON DC 20005-1910

Telephone No. ► 202 387-6400 Fax No. ►

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until 05/15, 2020, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► calendar year 20__ or
► tax year beginning 07/01, 2018, and ending 06/30, 2019.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a \$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b \$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c \$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III Yes No

1 Briefly describe the organization's mission:

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

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

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

If "Yes," describe these changes on Schedule O.

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

4a (Code: _____) (Expenses \$ 65,362,263. including grants of \$ _____) (Revenue \$ 6,072,640.)

SEE SCHEDULE O

4b (Code: _____) (Expenses \$ 9,514,919. including grants of \$ 3,059,013.) (Revenue \$ _____)

SEE SCHEDULE O

4c (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4d Other program services (Describe in Schedule O.)

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses **▶** 74,877,182.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>	X	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>	X	
b Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>	X	
c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	X	
14a Did the organization maintain an office, employees, or agents outside of the United States?.	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV.</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions).		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>		X

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Question text, and Yes/No response columns. Rows 22-38 cover various IRS requirements.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V. []

Table with 3 columns: Question number, Question text, and Yes/No response columns. Rows 1a-1c cover Form 1096 and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 2a 509		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	X	
b	If "Yes," enter the name of the foreign country: CHILE See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12 10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders 11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b		
c	Enter the amount of reserves on hand 13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		X

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (voting members), 1b (independent members), 2-9 (governance and documentation questions).

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

Table with 3 columns: Question, Yes, No. Rows include 10a-16b (policies on chapters, conflict of interest, whistleblower, compensation, and investments).

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA, DC, MD,
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CRAIG R. BARRETT TRUSTEE/CHAIRMAN	6.00 0.	X		X				0.	0.	0.
(2) DAVID THOMPSON TRUSTEE/VICE CHAIRMAN	6.00 0.	X		X				0.	0.	0.
(3) CHARLES F. BOLDEN, JR. TRUSTEE	2.00 0.	X						0.	0.	0.
(4) JOHN F. CRAWFORD TRUSTEE	2.00 0.	X						0.	0.	0.
(5) MICHAEL A. DUFFY TRUSTEE	4.00 0.	X						0.	0.	0.
(6) SANDRA M. FABER TRUSTEE	2.00 0.	X						0.	0.	0.
(7) BRUCE W. FERGUSON TRUSTEE	2.00 0.	X						0.	0.	0.
(8) STEPHEN P. A. FODER TRUSTEE	2.00 0.	X						0.	0.	0.
(9) WILLIAM K. GAYDEN TRUSTEE, END MAY 2019	2.00 0.	X						0.	0.	0.
(10) RUSH D. HOLT, JR. TRUSTEE	2.00 0.	X						0.	0.	0.
(11) WALTER ISAACSON TRUSTEE, END MAY 2019	2.00 0.	X						0.	0.	0.
(12) SUSANNE NORA JOHNSON TRUSTEE	2.00 0.	X						0.	0.	0.
(13) MARY C. KING TRUSTEE, END NOVEMBER 2019	2.00 0.	X						0.	0.	0.
(14) KATHERINE LAPP TRUSTEE	4.00 0.	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) MICHAEL LONG TRUSTEE	4.00 0.	X					0.	0.	0.	
(16) MARY E. MAXON TRUSTEE	2.00 0.	X					0.	0.	0.	
(17) CHRISTINE M. MCCARTHY TRUSTEE	2.00 0.	X					0.	0.	0.	
(18) RICHARD MESERVE TRUSTEE, END MAY 2019	2.00 0.	X					0.	0.	0.	
(19) RAY ROTHROCK TRUSTEE	2.00 0.	X					0.	0.	0.	
(20) CRISTIAN SAMPER TRUSTEE	4.00 0.	X					0.	0.	0.	
(21) CHRISTOPHER T.S. STONE TRUSTEE	4.00 0.	X					0.	0.	0.	
(22) MARSHALL WAIS TRUSTEE	4.00 0.	X					0.	0.	0.	
(23) MICHAEL WILSON TRUSTEE	2.00 0.	X					0.	0.	0.	
(24) ERIC D. ISAACS PRESIDENT	40.00 0.			X			441,297.	0.	74,471.	
(25) TIMOTHY P. DOYLE CHIEF OPERATING OFFICER	40.00 0.			X			410,161.	0.	76,564.	
1b Sub-total							0.	0.	0.	
c Total from continuation sheets to Part VII, Section A							5,001,372.	0.	944,912.	
d Total (add lines 1b and 1c)							5,001,372.	0.	944,912.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶ 130**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 1		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶ 28**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(26) BENJAMIN ADERSON GENERAL COUNSEL	40.00 0.			X			262,952.	0.	40,865.	
(27) JOHN S. MULCHAEY DIVISION DIRECTOR	40.00 0.				X		345,664.	0.	53,514.	
(28) YIXIAN ZHENG DEPARTMENT DIRECTOR	40.00 0.				X		345,529.	0.	46,117.	
(29) RICHARD W. CARLSON DIVISION DIRECTOR	40.00 0.				X		270,276.	0.	63,620.	
(30) ZHIYONG WANG ACTING DIRECTOR & SNR STF SCI	40.00 0.				X		224,136.	0.	46,944.	
(31) MICHAEL WALTER DIVISION DIRECTOR	40.00 0.				X		189,503.	0.	40,853.	
(32) ANN MCELWAIN CHIEF DEVELOPMENT OFFICER	40.00 0.					X	287,186.	0.	66,193.	
(33) PATRICK MCCARTHY GMTO DIRECTOR	40.00 0.					X	295,595.	0.	66,305.	
(34) NICHOLAS KONIDARIS SCIENTIFIC STAFF MEMBER	40.00 0.					X	289,822.	0.	45,810.	
(35) MICHAEL STAMBAUGH CHIEF INVESTMENT OFFICER	40.00 0.					X	710,790.	0.	70,040.	
(36) KENNETH G. CALDEIRA SENIOR STAFF SCIENTIST	40.00 0.					X	243,939.	0.	70,116.	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 130

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VIII Statement of Revenue

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

Table with columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512-514. Rows include Contributions, Gifts, Grants and Other Similar Amounts; Program Service Revenue; and Other Revenue.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0.			
2 Grants and other assistance to domestic individuals. See Part IV, line 22	3,059,013.	3,059,013.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	3,758,370.	844,818.	2,318,141.	595,411.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	31,859,039.	27,704,082.	3,050,062.	1,104,895.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	6,878,627.	5,896,366.	670,771.	311,490.
9 Other employee benefits	6,794,064.	5,781,142.	697,616.	315,306.
10 Payroll taxes	2,408,084.	1,934,166.	341,606.	132,312.
11 Fees for services (non-employees):				
a Management	0.			
b Legal	396,542.		396,542.	
c Accounting	306,666.		306,666.	
d Lobbying	0.			
e Professional fundraising services. See Part IV, line 17.	0.			
f Investment management fees	3,923,472.		3,923,472.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,471,953.	259,542.	1,190,516.	21,895.
12 Advertising and promotion	0.			
13 Office expenses	1,449,134.	862,829.	458,326.	127,979.
14 Information technology.	1,476,118.	954,622.	521,496.	
15 Royalties.	0.			
16 Occupancy	3,330,244.	3,002,050.	305,231.	22,963.
17 Travel	2,503,553.	1,922,807.	398,417.	182,329.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	883,494.	501,039.	248,293.	134,162.
20 Interest	4,740,755.	3,075,727.	1,665,028.	
21 Payments to affiliates.	0.			
22 Depreciation, depletion, and amortization	9,971,195.	9,338,172.	613,220.	19,803.
23 Insurance	582,038.	226,069.	354,372.	1,597.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a RESEARCH EDUCATION EXPENSE	5,525,676.	5,471,049.	50,589.	4,038.
b CONTRACT AND SUBAWARDS	3,371,848.	3,235,747.	41,143.	94,958.
c BOND ADMIN	67,042.		67,042.	
d OTHER REPAIR AND MAINTENANCE	107,091.	100,479.	6,612.	
e All other expenses _____	1,256,023.	707,463.	507,701.	40,859.
25 Total functional expenses. Add lines 1 through 24e	96,120,041.	74,877,182.	18,132,862.	3,109,997.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0.			

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	857.	1	692.
	2 Savings and temporary cash investments	40,059,456.	2	54,711,099.
	3 Pledges and grants receivable, net	7,895,075.	3	6,042,579.
	4 Accounts receivable, net	598,493.	4	486,886.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	468,058.	5	381,616.
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0.	6	0.
	7 Notes and loans receivable, net	991,327.	7	970,261.
	8 Inventories for sale or use	0.	8	0.
	9 Prepaid expenses and deferred charges	61,986,571.	9	65,424,306.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 279,061,173.		
	b Less: accumulated depreciation	10b 152,419,676.		
	11 Investments - publicly traded securities	558,199,593.	11	533,645,364.
	12 Investments - other securities. See Part IV, line 11	436,837,893.	12	418,115,367.
	13 Investments - program-related. See Part IV, line 11	0.	13	0.
	14 Intangible assets	0.	14	0.
	15 Other assets. See Part IV, line 11	0.	15	0.
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,239,346,085.	16	1,206,419,667.	
Liabilities	17 Accounts payable and accrued expenses	10,057,260.	17	9,725,247.
	18 Grants payable	0.	18	0.
	19 Deferred revenue	27,503,640.	19	26,827,591.
	20 Tax-exempt bond liabilities	65,105,000.	20	65,105,000.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0.
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0.	22	0.
	23 Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties	3,575,557.	24	2,272,798.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	74,281,433.	25	77,720,561.
	26 Total liabilities. Add lines 17 through 25	180,522,890.	26	181,651,197.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	322,559,060.	27	311,622,735.
	28 Temporarily restricted net assets	680,887,440.	28	657,039,383.
	29 Permanently restricted net assets	55,376,695.	29	56,106,352.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	1,058,823,195.	33	1,024,768,470.
	34 Total liabilities and net assets/fund balances	1,239,346,085.	34	1,206,419,667.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	137,841,470.
2	Total expenses (must equal Part IX, column (A), line 25)	2	96,120,041.
3	Revenue less expenses. Subtract line 2 from line 1	3	41,721,429.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,058,823,195.
5	Net unrealized gains (losses) on investments	5	-69,011,923.
6	Donated services and use of facilities	6	0.
7	Investment expenses	7	0.
8	Prior period adjustments	8	0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-6,764,231.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,024,768,470.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

CARNEGIE INSTITUTION OF WASHINGTON

Employer identification number

53-0196523

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

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

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

Schedule A (Form 990 or 990-EZ) 2018

JSA
8E1210 1.000

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	42,588,136.	37,111,828.	33,826,174.	29,281,249.	23,406,867.	166,214,254.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 Total. Add lines 1 through 3.	42,588,136.	37,111,828.	33,826,174.	29,281,249.	23,406,867.	166,214,254.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						3,172,640.
6 Public support. Subtract line 5 from line 4						163,041,614.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4.	42,588,136.	37,111,828.	33,826,174.	29,281,249.	23,406,867.	166,214,254.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	6,473,664.	7,905,000.	13,209,139.	12,766,124.	14,746,075.	55,100,002.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . ATCH. 1	10,935,413.	481,569.	-256,253.	-189,696.	865,464.	11,836,497.
11 Total support. Add lines 7 through 10						233,150,753.
12 Gross receipts from related activities, etc. (see instructions)					12	36,249,831.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)).	14	69.93%
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization. ▶ <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.
 If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)),	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .

b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>	1	

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	2a		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>	2b		
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	3b		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		

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

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

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

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2014	2015	2016	2017	2018	TOTAL
MOUNTAIN PRESENCE INCOME	2,518,268.	823,961.	-931,805.	81,952.	65,605.	2,557,981.
REALIZED FX GAIN/LOSS	-361,536.	-164,891.	-1,468,280.	58,873.	-93,104.	-2,028,938.
SECURITY LITIGATION INCOME	8,519,628.	-379,199.	1,808,930.	43,879.	10,724.	10,003,962.
OTHER	259,053.	201,698.	334,902.	-374,400.	882,239.	1,303,492.
TOTALS	<u>10,935,413.</u>	<u>481,569.</u>	<u>-256,253.</u>	<u>-189,696.</u>	<u>865,464.</u>	<u>11,836,497.</u>

Schedule of Contributors

2018

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**
 ▶ **Go to www.irs.gov/Form990 for the latest information.**

Name of the organization CARNEGIE INSTITUTION OF WASHINGTON	Employer identification number 53-0196523
--	--

Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ 501(c)(3) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization
- Form 990-PF 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization **CARNEGIE INSTITUTION OF WASHINGTON**

Employer identification number
53-0196523

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 468,750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 3,750,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 550,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 800,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 792,840.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization **CARNEGIE INSTITUTION OF WASHINGTON**

Employer identification number

53-0196523

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization **CARNEGIE INSTITUTION OF WASHINGTON**

Employer identification number
53-0196523

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

2018

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

Employer identification number

CARNEGIE INSTITUTION OF WASHINGTON

53-0196523

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

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

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. (Sub-rows 2a-2d), 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1. b Assets included in Form 990, Part X.

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

Schedule D (Form 990) 2018

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other _____
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	830,826,623.	797,500,206.	744,153,617.	819,540,019.	809,951,370.
b Contributions	817,971.	211,703.	16,599.	130,750.	148,221.
c Net investment earnings, gains, and losses	26,582,367.	82,643,613.	103,067,040.	-29,062,673.	50,809,234.
d Grants or scholarships	1,500,019.	2,291,722.	3,168,223.	3,026,553.	2,429,969.
e Other expenditures for facilities and programs	45,057,727.	44,963,820.	42,901,696.	41,059,613.	34,184,148.
f Administrative expenses	1,992,764.	2,273,357.	3,667,131.	2,368,313.	4,754,689.
g End of year balance	809,676,451.	830,826,623.	797,500,206.	744,153,617.	819,540,019.

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ 16.3403 %
 - b** Permanent endowment ▶ 6.6688 %
 - c** Temporarily restricted endowment ▶ 76.9909 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.

- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----|
| (i) unrelated organizations | X | |
| (ii) related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		817,117.		817,117.
b Buildings		96,347,592.		96,347,592.
c Leasehold improvements				
d Equipment		179,768,367.	152,419,676.	27,348,691.
e Other		2,128,097.		2,128,097.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				126,641,497.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests	413,696.	ATTACHMENT 1
(3) Other		
(A) ALTERNATIVE INVESTMENTS	223,967,045.	FMV
(B) REAL ASSET/NATURAL RESOURCES	193,734,626.	FMV
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	418,115,367.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) TAXABLE BOND PAYABLE	50,000,000.
(3) ACCRUED POSTRETIREMENT BENEFIT COST	27,720,561.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	77,720,561.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

1	Total revenue, gains, and other support per audited financial statements	1	59,493,710.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-69,011,923.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-6,765,292.
e	Add lines 2a through 2d	2e	-75,777,215.
3	Subtract line 2e from line 1	3	135,270,925.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	3,923,472.
b	Other (Describe in Part XIII.)	4b	-1,352,927.
c	Add lines 4a and 4b	4c	2,570,545.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	137,841,470.

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

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

1	Total expenses and losses per audited financial statements	1	93,548,435.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	-1,061.
e	Add lines 2a through 2d	2e	-1,061.
3	Subtract line 2e from line 1	3	93,549,496.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	3,923,472.
b	Other (Describe in Part XIII.)	4b	-1,352,927.
c	Add lines 4a and 4b	4c	2,570,545.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	96,120,041.

Part XIII Supplemental Information.

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

SEE PAGE 5

Part XIII Supplemental Information (continued)

ORGANIZATION'S COLLECTIONS

SCHEDULE D, PART III, LINE 4

THE COLLECTION OF THE CARNEGIE INSTITUTION OF WASHINGTON IS PREDOMINANTLY COMPOSED OF HISTORICAL ARTIFACTS RELATED TO ITS WORK IN SCIENTIFIC RESEARCH. THIS INCLUDES SCIENTIFIC SAMPLES, MATERIALS, DEVICES AND INSTRUMENTATION, AND PRINTED PUBLICATIONS. THE COLLECTION IS USED FOR SCHOLARLY REFERENCE AND STUDY OF THE INSTITUTION'S PAST SCIENTIFIC DISCOVERIES AS WELL AS FOR EDUCATION OF THE GENERAL PUBLIC.

INTENDED USE OF ENDOWMENT FUNDS

SCHEDULE D, PART V, LINE 4

THE ORGANIZATION'S ENDOWMENT FUNDS ARE INTENDED TO SUPPORT ITS OVERALL MISSION OF SUPPORTING SCIENTIFIC DISCOVERY "IN THE BROADEST AND MOST LIBERAL MANNER."

FIN 48 FOOTNOTE

SCHEDULE D, PART X, LINE 2

THE CARNEGIE INSTITUTION OF WASHINGTON (CARNEGIE) HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE) EXCEPT FOR AMOUNTS FROM UNRELATED BUSINESS INCOME. CARNEGIE IS ALSO AN EDUCATIONAL INSTITUTION WITHIN THE MEANING OF SECTION 170(B)(1)(A)(II) OF THE CODE. THE INTERNAL REVENUE SERVICE HAS CLASSIFIED CARNEGIE AS OTHER THAN A PRIVATE FOUNDATION, AS DEFINED IN SECTION 509(A) OF THE CODE.

CARNEGIE HAS ANALYZED THE TAX POSITIONS TAKEN AND HAS CONCLUDED THAT AS OF JUNE 30, 2019 AND 2018, THERE ARE NO UNCERTAIN TAX POSITIONS TAKEN OR

Part XIII Supplemental Information (continued)

EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF DISCLOSURE IN THE
FINANCIAL STATEMENTS.

RECONCILIATION OF REVENUE BETWEEN AFS & FORM 990

SCHEDULE D, PART XI, LINE 2D

UNREALIZED SWAP GAIN/(LOSS)	\$1,033,807
PENSION-RELATED CHANGES	(\$2,611,408)
GRANT MODIFICATION	(\$5,187,691)

TOTAL	(\$6,765,292)

SCHEDULE D, PART XI, LINE 4B

RENTAL EXPENSES	(\$1,352,927)

TOTAL	(\$1,352,927)

RECONCILIATION OF EXPENSES BETWEEN AFS & FORM 990

SCHEDULE D, PART XII, LINE 2D

UNREALIZED FX (GAIN)/LOSS	(\$1,061)

TOTAL	(\$1,061)

SCHEDULE D, PART XII, LINE 4B

RENTAL EXPENSES	(\$1,352,927)

TOTAL	(\$1,352,927)

Part XIII Supplemental Information (continued)

ATTACHMENT 1

SCHEDULE D, PART VII - INVESTMENTS - CLOSELY HELD EQUITY INTERESTS

DESCRIPTION	BOOK VALUE	COST OR FMV
CLOSELY-HELD EQUITY INTERESTS	413,696.	COST
TOTALS	413,696.	

**SCHEDULE E
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Schools

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.**
▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization
CARNEGIE INSTITUTION OF WASHINGTON

Employer identification number
53-0196523

Part I

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	X	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	X	
3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	X	
<u>SEE SUPPLEMENTAL PAGE</u>		
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
d Copies of all material used by the organization or on its behalf to solicit contributions?	X	
If you answered "No" to any of the above, please explain. If you need more space, use Part II.		
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		X
b Admissions policies?		X
c Employment of faculty or administrative staff?		X
d Scholarships or other financial assistance?		X
e Educational policies?		X
f Use of facilities?		X
g Athletic programs?		X
h Other extracurricular activities?		X
If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.		
6a Does the organization receive any financial aid or assistance from a governmental agency?	X	
b Has the organization's right to such aid ever been revoked or suspended?		X
If you answered "Yes" on either line 6a or line 6b, explain on Part II.		
7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	X	

Part II **Supplemental Information.** Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information (see instructions).

NONDISCRIMINATORY POLICY

SCHEDULE E, PART I, LINE 3

OUR NON-DISCRIMINATION POLICY IS AVAILABLE ON OUR WEBSITE,
WWW.CARNEGIESCIENCE.EDU, UNDER ANTI-DISCRIMINATION POLICY.

EXPLANATION OF GOVERNMENT FINANCIAL AID

SCHEDULE E, PART I, LINE 6A

WE RECEIVE GRANTS AND PASS THROUGH FUNDS FROM SEVERAL FEDERAL AGENCIES INCLUDING THE NATIONAL SCIENCE FOUNDATION (NSF), THE UNITED STATES DEPARTMENT OF ENERGY (DOE), THE UNITED STATES DEPARTMENT OF HOMELAND SECURITY (DHS), THE NATIONAL AERONAUTICS AND SPACE ADMINISTRATION (NASA), THE UNITED STATES DEPARTMENT OF AGRICULTURE (USDA), THE OFFICE OF NAVAL RESEARCH (ONR), THE NATIONAL INSTITUTE OF STANDARDS AND TECHNOLOGY (NIST), AND OTHERS. THESE MONIES SUPPORT OUR SCIENTIFIC RESEARCH AND EDUCATION.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

CARNEGIE INSTITUTION OF WASHINGTON

Employer identification number

53-0196523

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

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) EUROPE	0.	0.	FUNDRAISING		31,836.
(2) SOUTH AMERICA	0.	0.	FUNDRAISING		59,739.
(3) NORTH AMERICA	0.	0.	PROGRAM SERVICES	MEETINGS/CONFERENCES	9,658.
(4) EAST ASIA AND THE PACIFIC	0.	0.	PROGRAM SERVICES	MEETINGS/CONFERENCES	66,731.
(5) EUROPE	0.	0.	PROGRAM SERVICES	MEETINGS/CONFERENCES	140,121.
(6) SOUTH AMERICA	0.	0.	PROGRAM SERVICES	MEETINGS/CONFERENCES	25,066.
(7) EAST ASIA AND THE PACIFIC	0.	0.	PROGRAM SERVICES	COLLABORATIVE WORK	5,005.
(8) NORTH AMERICA	0.	0.	PROGRAM SERVICES	CONSTRUCTION	7,134.
(9) EAST ASIA AND THE PACIFIC	0.	0.	PROGRAM SERVICES	CORAL FIELD SURVEY	45,746.
(10) CENTRAL AMERICA/CARIBBEAN	0.	0.	PROGRAM SERVICES	FIELD WORK	3,180.
(11) EAST ASIA AND THE PACIFIC	0.	0.	PROGRAM SERVICES	FIELD WORK	21,916.
(12) EAST ASIA AND THE PACIFIC	0.	0.	PROGRAM SERVICES	LIZARD ISLAND RESEARCH	25,398.
(13) EAST ASIA AND THE PACIFIC	0.	0.	PROGRAM SERVICES	POSTDOC: RELOCATION	313.
(14) EAST ASIA AND THE PACIFIC	0.	0.	PROGRAM SERVICES	REEFSCAPE FIELD WORK	29,967.
(15) EAST ASIA AND THE PACIFIC	0.	0.	PROGRAM SERVICES	REEFSCAPE FIELD WORK	23,255.
(16) EAST ASIA AND THE PACIFIC	0.	0.	PROGRAM SERVICES	VANNUTU AND PNG FLDWK	39,362.
(17) EUROPE	0.	0.	PROGRAM SERVICES	POSTDOC: RELOCATION	982.
3a Subtotal					535,409.
b Total from continuation sheets to Part I					372,290,420.
c Totals (add lines 3a and 3b)					372,825,829.

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

Schedule F (Form 990) 2018

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

CARNEGIE INSTITUTION OF WASHINGTON

Employer identification number

53-0196523

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

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) SOUTH AMERICA	0.	0.	PROGRAM SERVICES	LCO FIELD WORK	23,360.
(2) SOUTH AMERICA	0.	0.	PROGRAM SERVICES	P JONES - RELOCATION	2,460.
(3) SOUTH AMERICA	0.	0.	PROGRAM SERVICES	RESEARCH/GRANTS	56,730.
(4) SOUTH AMERICA	0.	0.	PROGRAM SERVICES	SCIENTIFIC OBS. CHILE	227,305.
(5) SOUTH AMERICA	0.	0.	PROGRAM SERVICES	TELESCOPE ENG./MAINT.	26,034.
(6) SOUTH AMERICA	0.	0.	PROGRAM SERVICES	TELESCOPE OPERATIONS	7,388,148.
(7) SOUTH ASIA	0.	0.	PROGRAM SERVICES	POSTDOC: RELOCATION	1,889.
(8) NORTH AMERICA	0.	0.	INVESTMENTS		12,393,604.
(9) CENTRAL AMERICA/CARIBBEAN	0.	0.	INVESTMENTS		345,601,560.
(10) SOUTH AMERICA	0.	0.	INVESTMENTS		4,484,654.
(11) EUROPE	0.	0.	INVESTMENTS		2,084,676.
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal					
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					

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

Schedule F (Form 990) 2018

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

3 Enter total number of other organizations or entities ▶ _____

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
 Part III can be duplicated if additional space is needed.

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

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* **Yes** **No**
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* **Yes** **No**
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)* **Yes** **No**
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* **Yes** **No**
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* **Yes** **No**
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* **Yes** **No**

Part V Supplemental Information

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

PROCEDURES FOR MONITORING THE USE OF GRANTS AND OTHER ASSISTANCE

SCHEDULE F, PART I, LINE 2

AS A RESEARCH INSTITUTION, CARNEGIE PROVIDES FELLOWS WITH THE OPPORTUNITY TO PURSUE INDEPENDENT RESEARCH AND THE TRAINING TO ACQUIRE THE ADDITIONAL SKILLS AND EXPERTISE NEEDED TO BECOME A SUCCESSFUL SCIENTIST. CARNEGIE MONITORS THE FELLOWSHIP EXPERIENCE TO ACHIEVE BOTH OBJECTIVES. FELLOWS PURSUE THEIR RESEARCH PROGRAM RELATIVELY INDEPENDENTLY BUT HAVE FULL ACCESS TO CARNEGIE FACILITIES AND STAFF MEMBERS AND TYPICALLY PERFORM THEIR EXPERIMENTS AND SCIENTIFIC WORK ON-SITE AND IN COLLABORATION WITH OTHER CARNEGIE FELLOWS. THIS COLLABORATION SERVES AS A VEHICLE FOR MONITORING AND SUPPORTING THE WORK OF THE FELLOW. CARNEGIE'S VARIOUS ADMINISTRATIVE AND RESEARCH POLICIES APPLY TO FELLOWS. IN CARNEGIE'S STRUCTURE, DEPARTMENT DIRECTORS ARE RESPONSIBLE FOR ASSURING THAT FELLOWS FOLLOW THESE PROCEDURES AND CARRY OUT THE RESEARCH SUPPORTED THROUGH EXTERNALLY OR INTERNALLY-FUNDED FELLOWSHIPS.

TO ENSURE SPONSORED PROGRAM DOLLARS ARE APPROPRIATELY USED, AND IN ACCORDANCE WITH APPLICABLE REGULATIONS, THE INSTITUTION APPLIES RIGOROUS FINANCIAL AND PROGRAMMATIC MONITORING. CARNEGIE CONDUCTS REGULAR ACCOUNT RECONCILIATIONS, SUBRECIPIENT MONITORING; WHEREIN SUBRECIPIENT ORGANIZATIONS ARE REQUIRED TO SUBMIT FINANCIAL AND TECHNICAL REPORTS. REPORTS AND INVOICES ARE REVIEWED FOR ACCURACY, AND COMPLIANCE WITH APPLICABLE TERMS AND CONDITIONS INCLUDING OMB 2 CFR 200 ADMINISTRATIVE REQUIREMENTS, COST PRINCIPLES, AND AUDIT REQUIREMENTS FOR FEDERAL AWARDS.

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

CARNEGIE INSTITUTION OF WASHINGTON

Employer identification number

53-0196523

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

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

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

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

Schedule I (Form 990) (2018)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 FELLOWSHIP	58.	3,059,013.			
2					
3					
4					
5					
6					
7					

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

PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS & OTHER ASSISTANCE IN US

SCHEDULE I, PART I, LINE 2

AS A RESEARCH INSTITUTION, CARNEGIE PROVIDES FELLOWS WITH THE OPPORTUNITY TO PURSUE INDEPENDENT RESEARCH AND THE TRAINING TO ACQUIRE THE ADDITIONAL SKILLS AND EXPERTISE NEEDED TO BECOME A SUCCESSFUL SCIENTIST. CARNEGIE MONITORS THE FELLOWSHIP EXPERIENCE TO ACHIEVE BOTH OBJECTIVES. FELLOWS PURSUE THEIR RESEARCH PROGRAM RELATIVELY INDEPENDENTLY BUT HAVE FULL ACCESS TO CARNEGIE FACILITIES AND STAFF MEMBERS AND TYPICALLY PERFORM THEIR EXPERIMENTS AND SCIENTIFIC WORK ON-SITE AND IN COLLABORATION WITH OTHER CARNEGIE SCIENTISTS. FELLOWS IN THE BIOLOGICAL SCIENCES APPLY TO

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

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

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

CARNEGIE MAINLY TO LEARN THE RESEARCH TECHNIQUES AND RESEARCH AREAS OF A PARTICULAR CARNEGIE STAFF SCIENTIST, THAT IS, TO WORK IN THAT PRINCIPAL INVESTIGATOR'S (PI) LAB. LABS ROUTINELY ENGAGE A NUMBER OF DIFFERENT PEOPLE, INCLUDING A PI, TECHNICIANS, POSTDOCTORAL SCIENTISTS, AND RESEARCHERS. THE PI MONITORS THE WORK OF THE FELLOW ON AN ONGOING BASIS, CRITIQUES THE FELLOWS' RESEARCH, MAKES SUGGESTIONS FOR AVENUES TO EXPLORE, AND PROVIDES ONGOING MENTORING. FELLOWS IN THE PHYSICAL SCIENCES TYPICALLY COLLABORATE WITH A SENIOR STAFF MEMBER ON RESEARCH PROJECTS. THIS PROVIDES AN ONGOING VEHICLE FOR MONITORING AND SUPPORTING THE WORK OF THE FELLOW. FELLOWS ARE ASKED TO PRESENT AND DEFEND THEIR RESEARCH TO

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

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

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

OTHER SCIENTISTS BOTH AT CARNEGIE AND AT OTHER INSTITUTIONS. THIS PROCESS

HELPS TO MONITOR A FELLOWS' SCIENTIFIC PROGRESS AND PERMITS ADJUSTMENTS

AS NECESSARY. CARNEGIE'S VARIOUS ADMINISTRATIVE AND RESEARCH POLICIES

APPLY TO FELLOWS. IN CARNEGIE'S STRUCTURE, DEPARTMENT DIRECTORS ARE

RESPONSIBLE FOR ASSURING THAT FELLOWS FOLLOW THESE PROCEDURES AND CARRY

OUT THE RESEARCH SUPPORTED THROUGH EXTERNALLY OR INTERNALLY-FUNDED

FELLOWSHIPS.

TO ENSURE SPONSORED PROGRAM DOLLARS ARE APPROPRIATELY USED, AND IN

ACCORDANCE WITH APPLICABLE REGULATIONS, THE INSTITUTION APPLIES RIGOROUS

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

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

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

FINANCIAL AND PROGRAMMATIC MONITORING. CARNEGIE CONDUCTS REGULAR ACCOUNT RECONCILIATIONS, SUBRECIPIENT MONITORING; WHEREIN SUBRECIPIENT ORGANIZATIONS ARE REQUIRED TO SUBMIT FINANCIAL AND TECHNICAL REPORTS. REPORTS AND INVOICES ARE REVIEWED FOR ACCURACY, AND COMPLIANCE WITH APPLICABLE TERMS AND CONDITIONS INCLUDING OMB 2 CFR 200 ADMINISTRATIVE REQUIREMENTS, COST PRINCIPLES, AND AUDIT REQUIREMENTS FOR FEDERAL AWARDS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

CARNEGIE INSTITUTION OF WASHINGTON

Compensation Information

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

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Employer identification number

53-0196523

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|---|
| <input checked="" type="checkbox"/> First-class or charter travel | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
 - b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
 - c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
 - b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
 - b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a	X	
2	X	
4a		X
4b		X
4c		X
5a	X	
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2018

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation					
1	ERIC D. ISAACS PRESIDENT	(i)	379,333.	50,000.	11,964.	63,460.	11,011.	515,768.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
2	TIMOTHY P. DOYLE CHIEF OPERATING OFFICER	(i)	363,146.	25,000.	22,015.	47,541.	29,023.	486,725.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
3	BENJAMIN ADERSON GENERAL COUNSEL	(i)	221,898.	22,500.	18,554.	32,863.	8,002.	303,817.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
4	JOHN S. MULCHAEY DIVISION DIRECTOR	(i)	334,968.	10,000.	696.	44,364.	9,150.	399,178.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
5	YIXIAN ZHENG DEPARTMENT DIRECTOR	(i)	317,750.	10,000.	17,779.	46,117.	0.	391,646.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
6	RICHARD W. CARLSON DIVISION DIRECTOR	(i)	269,880.	0.	396.	54,036.	9,584.	333,896.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
7	ZHIYONG WANG ACTING DIRECTOR & SNR STF SCI	(i)	199,830.	0.	24,306.	38,348.	8,596.	271,080.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
8	MICHAEL WALTER DIVISION DIRECTOR	(i)	189,310.	0.	193.	33,934.	6,919.	230,356.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
9	ANN MCELWAIN CHIEF DEVELOPMENT OFFICER	(i)	272,954.	14,094.	138.	44,257.	21,936.	353,379.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
10	PATRICK MCCARTHY GMTO DIRECTOR	(i)	295,595.	0.	0.	48,944.	17,361.	361,900.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
11	NICHOLAS KONIDARIS SCIENTIFIC STAFF MEMBER	(i)	155,419.	0.	134,403.	23,842.	21,968.	335,632.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
12	MICHAEL STAMBAUGH CHIEF INVESTMENT OFFICER	(i)	410,646.	300,000.	144.	43,617.	26,423.	780,830.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
13	KENNETH G. CALDEIRA SENIOR STAFF SCIENTIST	(i)	241,860.	0.	2,079.	47,190.	22,926.	314,055.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
14	SEUNG YON RHEE DEPARTMENT DIRECTOR	(i)	229,884.	0.	7,590.	38,656.	10,596.	286,726.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
15	GEORGE CODY DEPARTMENT DIRECTOR	(i)	224,611.	0.	258.	43,427.	27,252.	295,548.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
16	JOSEPH BERRY DEPARTMENT DIRECTOR	(i)	220,943.	0.	1,236.	45,218.	18,351.	285,748.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.

Part III Supplemental Information

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

FIRST-CLASS TRAVEL

SCHEDULE J, PART I, LINE 1A

FIRST CLASS TRAVEL WAS ALLOWED PURSUANT TO POLICY AND PAID FOR MR.

ISAACS, MR. DOYLE, AND MR. MULCHAEY. THESE BENEFITS ARE INCLUDED WITHIN

SCHEDULE J, PART II, COLUMN B(III).

HOUSING ALLOWANCE

SCHEDULE J, PART I, LINE 1A

CARNEGIE'S POLICIES INCLUDE A PROVISION FOR HOUSING SUBSIDIES IN

HIGH-COST AREAS FOR QUALIFYING STAFF MEMBERS. SIX STAFF MEMBERS QUALIFY

FOR THE HOUSING ALLOWANCE. THESE BENEFITS ARE TREATED AS TAXABLE

COMPENSATION AND INCLUDED ON THE STAFF MEMBER'S FORM W-2.

TRAVEL FOR COMPANIONS

SCHEDULE J, PART I, LINE 1A

TRAVEL FOR COMPANIONS WAS ALLOWED PURSUANT TO POLICY AND PAID FOR MR.

ISAACS' SPOUSE. THIS BENEFIT IS INCLUDED WITHIN SCHEDULE J, PART II,

COLUMN B(III).

Part III Supplemental Information

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

CONTINGENT COMPENSATION

SCHEDULE J, PART I, LINE 5A

CARNEGIE PAID COMPENSATION UPON AND DETERMINED IN PART BY THE REVENUES OF

THE ORGANIZATION TO MICHAEL STAMBAUGH AND ANN MCELWAIN. CONTINGENT

COMPENSATION IS REPORTED IN COLUMN B(II) OF SCHEDULE J, PART II.

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

CARNEGIE

Supplemental Information on Tax-Exempt Bonds

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

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Name of the organization

CARNEGIE INSTITUTION OF WASHINGTON

Employer identification number

53-0196523

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
A CALIFORNIA EDUCATIONAL FACILITIES AUTHORITY	52-1705592	130178VS2	03/24/2010	34,525,000.	REFUND PRIOR BONDS TO FINANCE		X		X		X
B MARYLAND HEALTH & HIGHER EDUCATIONAL FACILITIES	52-0936091	574217JB2	02/04/2010	30,580,000.	REFUND PRIOR BONDS TO CONSTRUCT/EQ		X		X		X
C											
D											

Part II Proceeds

	A		B		C		D	
1 Amount of bonds retired								
2 Amount of bonds legally defeased								
3 Total proceeds of issue	36,365,183.		30,505,440.					
4 Gross proceeds in reserve funds								
5 Capitalized interest from proceeds								
6 Proceeds in refunding escrows								
7 Issuance costs from proceeds	565,183.		553,594.					
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds								
10 Capital expenditures from proceeds	35,800,000.		30,000,000.					
11 Other spent proceeds								
12 Other unspent proceeds								
13 Year of substantial completion	2003		2005					
	Yes	No	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?	X		X					
15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X		X				
16 Has the final allocation of proceeds been made?	X		X					
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

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

Schedule K (Form 990) 2018

JSA

8E1295 1.000

Part III Private Business Use		CARNEGIE							
		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X				
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X				
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X		X				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		%		%		%		%
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶		%		%		%		%
6	Total of lines 4 and 5		%		%		%		%
7	Does the bond issue meet the private security or payment test?	X		X					
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X					

Part IV Arbitrage									
		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X				
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X		X				
b	Exception to rebate?	X		X					
c	No rebate due?		X		X				
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X		X				

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

SCHEDULE K, PART II, LINE 3, BONDS A AND B

THE DIFFERENCE BETWEEN THE ISSUE PRICE LISTED IN PART I, COLUMN (E) AND THE TOTAL PROCEEDS OF ISSUE IN PART II, LINE 3 FOR BOND A AND BOND B REPRESENT PREMIUMS OR DISCOUNTS.

SCHEDULE K, PART II, LINE 7

03/24/2010 - 34,525,000 CALIFORNIA EDUCATIONAL FACILITIES AUTHORITY (CEFA) - THIS ISSUE WAS USED TO REFUND \$17.5 MILLION OF 1993 SERIES B CALIFORNIA EDUCATIONAL FACILITIES AUTHORITY REVENUE TAX EXEMPT BONDS AND \$18.3 MILLION OF 2006 SERIES A CEFA REFUNDING REVENUE TAX-EXEMPT BONDS WHICH REFUNDED ALL OUTSTANDING 1993 SERIES A CALIFORNIA EDUCATIONAL FACILITIES AUTHORITY REVENUE TAX EXEMPT BONDS. 1993 SERIES A & B BONDS WERE USED TO FINANCE THE MAGELLAN TELESCOPE PROJECT AND THE RENOVATION OF THE FACILITIES OF THE OBSERVATORIES AT PASADENA. THE TELESCOPE PROJECT WAS COMPLETED IN 2003. THE 2010 SERIES WAS ISSUED AT A PREMIUM OF \$1,840,183 AND AMOUNTS IN EXCESS OF \$35.8 MILLION WERE USED TO COVER ISSUANCE COSTS.

SCHEDULE K, PART II, LINE 7

02/04/2010 - 30,580,000 MARYLAND HEALTH & HIGHER EDUCATIONAL FACILITIES (MHHEFA) - THIS ISSUE WAS USED TO REFUND PRIOR MHHEFA BONDS OF \$30

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

MILLION ISSUED IN OCTOBER, 2002, THE PROCEEDS OF WHICH WERE USED TO
CONSTRUCT AND EQUIP A NEW FACILITY FOR CARNEGIE'S DEPARTMENT OF
EMBRYOLOGY ON THE JOHNS HOPKINS HOMEWOOD CAMPUS IN BALTIMORE, MARYLAND.
CONSTRUCTION BEGAN IN APRIL 2003 AND THE FACILITY WAS OCCUPIED IN
SEPTEMBER 2005. THE 2010 SERIES WAS ISSUED AT A DISCOUNT OF \$74,561 AND
AMOUNTS BORROWED IN EXCESS OF \$30 MILLION WERE USED TO COVER ISSUANCE
COSTS.

SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

2018

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**

▶ **Attach to Form 990 or Form 990-EZ.**

▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Name of the organization
CARNEGIE INSTITUTION OF WASHINGTON

Employer identification number
53-0196523

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization, ▶ \$ _____

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
			(1) SEUNG YON RHEE	DEPT. DIR.			MORTGAGE		X	468,058.	381,616.	
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total						\$ 381,616.						

Part III Grants or Assistance Benefiting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) WILLIAM GAYDEN	TRUSTEE	6,043,545.	SEE PART V		X
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

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

SCHEDULE L, PART IV, COLUMN (D)

MR. GAYDEN IS FOUNDER, CHAIRMAN, AND CHIEF EXECUTIVE OFFICER OF MERIT ENERGY COMPANY, A PRIVATE FIRM SPECIALIZING IN DIRECT INVESTMENTS IN MATURE, HIGH QUALITY OIL AND GAS ASSETS.

MERIT ACQUIRES, OPERATES, AND DEVELOPS PRODUCING OIL AND GAS PROPERTIES ON BEHALF OF INSTITUTIONAL LIMITED PARTNERS THROUGH THE MERIT ENERGY PARTNERSHIP FUNDS.

CARNEGIE MADE THIS CONTRIBUTION TO FUND CAPITAL CALLS FROM ITS EXISTING COMMITMENTS TO MERIT'S ENERGY FUNDS.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

CARNEGIE INSTITUTION OF WASHINGTON

Employer identification number

53-0196523

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures	X	1 .	93,415 .	APPRAISAL
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	12 .	357,293 .	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (EQUIPMENT)	X	4 .	74,638 .	
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2018

JSA

8E1298 1.000

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

NUMBER OF CONTRIBUTIONS

SCHEDULE M, PART I, COLUMN (B)

THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS IN COLUMN (B).

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Name of the organization

CARNEGIE INSTITUTION OF WASHINGTON

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Employer identification number

53-0196523

ORGANIZATION'S MISSION

FORM 990, PART III, LINE 1

THE MISSION OF THE CARNEGIE INSTITUTION OF WASHINGTON, AS SET FORTH IN ITS ARTICLES OF INCORPORATION UNDER AN ACT OF CONGRESS IN 1904, IS "TO ENCOURAGE, IN THE BROADEST AND MOST LIBERAL MANNER, INVESTIGATION, RESEARCH, AND DISCOVERY, AND THE APPLICATION OF KNOWLEDGE TO THE IMPROVEMENT OF MANKIND."

PROGRAM SERVICE ACTIVITY #1

FORM 990, PART III, LINE 4A

CARNEGIE IS A WORLD-RENOWNED CENTER FOR PETROLOGY-THE STUDY OF ROCKS. IT IS ALSO A GLOBAL LEADER IN HIGH-PRESSURE AND HIGH-TEMPERATURE PHYSICS, WHICH ENABLES OUR SCIENTISTS TO MAKE SIGNIFICANT CONTRIBUTIONS TO EARTH, PLANETARY AND MATERIAL SCIENCES. CARNEGIE IS LEADING AN INTERNATIONAL, MULTI-INSTITUTION, CROSS-DISCIPLINARY INITIATIVE DEDICATED TO ACHIEVING A TRANSFORMATIONAL UNDERSTANDING OF EARTH'S DEEP CARBON CYCLE, INCLUDING ITS POORLY CONSTRAINED RESERVOIRS AND FLUXES; THE UNKNOWN ROLE OF DEEP BIOLOGY; AND THE UNEXPLORED INFLUENCES OF THE DEEP CARBON CYCLE ON CRITICAL SOCIETAL CONCERNS RELATED TO ENERGY, THE ENVIRONMENT, AND CLIMATE. CARNEGIE RESEARCHERS ARE CONTRIBUTING TO INTERDISCIPLINARY EFFORTS INVESTIGATING HOW LIFE EVOLVED ON THIS PLANET AND DETERMINING ITS POTENTIAL FOR EXISTING ELSEWHERE. CARNEGIE OBSERVATIONAL AND THEORETICAL ASTRONOMERS COLLABORATE TO TRACE THE EVOLUTION OF THE UNIVERSE FROM THE SPARK OF THE BIG BANG THROUGH STAR AND GALAXY FORMATION; EXPLORE THE

Name of the organization

CARNEGIE INSTITUTION OF WASHINGTON

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STRUCTURE OF THE UNIVERSE; AND PROBE THE MYSTERIES OF DARK MATTER, DARK ENERGY, AND THE EVER-ACCELERATING RATE AT WHICH THE UNIVERSE IS EXPANDING. UNLIKE MOST IN THEIR FIELD, CARNEGIE OBSERVATIONAL ASTRONOMERS DESIGN AND BUILD THEIR OWN INSTRUMENTS TO CAPTURE THE SECRETS OF SPACE. CARNEGIE OPERATES TELESCOPES IN LAS CAMPANAS, CHILE, AT WHICH MUCH OF OUR ASTRONOMICAL RESEARCH IS CONDUCTED. WE ARE FOUNDING PARTNERS IN A CONSORTIUM THAT IS WORKING TO DESIGN, CONSTRUCT, AND OPERATE THE GIANT MAGELLAN TELESCOPE, ONE OF THE NEW CLASS OF EXTREMELY LARGE TELESCOPES, WHICH WILL BE AMONG THE WORLD'S LARGEST GROUND-BASED OPTICAL/INFRARED FACILITIES ONCE IT IS COMPLETED. CARNEGIE ALSO INCLUDES INTERDISCIPLINARY TEAMS OF ASTRONOMERS AND ASTROPHYSICISTS, GEOPHYSICISTS AND GEOCHEMISTS, COSMOCHEMISTS AND PLANETARY SCIENTISTS. THESE GROUPS ARE DISCOVERING PLANETS ORBITING DISTANT STARS; PROBING THE FORMATION AND EVOLUTION OF EARTH, THE MOON, AND OUR SOLAR SYSTEM; AND STUDYING THE CAUSES OF EARTHQUAKES, VOLCANOES, AND OTHER GEOLOGIC PHENOMENA. USING INNOVATIVE APPROACHES TO ECOLOGICAL RESEARCH, CARNEGIE SCIENTISTS ARE UNTANGLING THE COMPLICATED INTERACTIONS BETWEEN EARTH'S LAND, ATMOSPHERE, AND OCEANS TO UNDERSTAND HOW GLOBAL SYSTEMS OPERATE. DEPLOYING A WIDE RANGE OF POWERFUL TOOLS-FROM SATELLITES TO MOLECULAR BIOLOGY TECHNIQUES-THESE SCIENTISTS EXPLORE ISSUES SUCH AS THE GLOBAL CARBON CYCLE, THE ROLE OF LAND AND OCEANIC ECOSYSTEMS, AND OCEAN ACIDIFICATION. OUR ECOLOGISTS ALSO PLAY AN ACTIVE ROLE IN THE PUBLIC ARENA, FROM SERVING ON NATIONAL PANELS AND COMMITTEES THAT INVESTIGATE CLIMATE CHANGE TO IDENTIFYING ENVIRONMENTAL HOT SPOTS FOR CONSERVATION EFFORTS. CARNEGIE BIOLOGISTS REVEAL CRUCIAL BIOCHEMICAL PATHWAYS AND THE GENES THAT ENCODE THEIR FUNCTIONS IN

Name of the organization CARNEGIE INSTITUTION OF WASHINGTON	Employer identification number 53-0196523
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MICROBES, PLANTS, AND ANIMALS. TOGETHER WITH OUR LONGSTANDING EXPERTISE IN MODEL SYSTEM DEVELOPMENT, THIS WORK PROVIDES A FOUNDATION FOR EXPLORING NEW RESEARCH AVENUES THAT DEPLOY CELLULAR AND MOLECULAR APPROACHES TO UNDERSTAND ECOSYSTEM-WIDE AND GLOBAL PHENOMENA RELATED TO CLIMATE CHANGE, INCLUDING CORAL BLEACHING. THEY ALSO STUDY INTERACTIONS BETWEEN THE SPECIES THAT MAKE UP BACTERIAL COMMUNITY ECOSYSTEMS. OUR RESEARCHERS ARE DEMONSTRATING THAT THE INTERSPECIES RELATIONSHIPS IN THE GUT MICROBIOME AFFECT OUR HEALTH, FERTILITY, AND LONGEVITY. SIMILAR DYNAMICS ALLOW MICROBIAL MATS TO THRIVE IN HOT SPRINGS; UNDERSTANDING THEM IMPROVES OUR KNOWLEDGE OF HOW LIFE ADAPTS TO EXTREME CONDITIONS.

PROGRAM SERVICE ACTIVITY #2

FORM 990, PART III, LINE 4B

EDUCATION - CARNEGIE, A NON-DEGREE GRANTING ENTITY, IS AN ADVANCED STUDY ORGANIZATION AT WHICH HIGHLY QUALIFIED GRADUATE SCIENTISTS ARE OFFERED POSTGRADUATE AND POSTDOCTORAL TRAINING FOR CAREERS IN EDUCATION AND RESEARCH. CARNEGIE'S POSTDOCTORAL SCIENTIFIC EDUCATION IS PRIMARILY CONDUCTED IN THE LABORATORY OR IN THE FIELD. THE POSTDOCTORAL CURRICULUM IS HEAVILY WEIGHTED TOWARD TRAINING CANDIDATES TO BE CAPABLE RESEARCHERS AND TEACHERS OF RESEARCH. THE FACULTY CONSISTS OF THE PROFESSIONAL STAFF OF CARNEGIE, ALL OF WHOM PURSUE THEIR OWN RESEARCH. CARNEGIE ALSO OFFERS CERTAIN TRAINING OPPORTUNITIES FOR PREDOCTORAL STUDENTS WHO MAY GO ON TO PURSUE ADVANCED DEGREES AT DEGREE-GRANTING INSTITUTIONS, AS WELL AS INTERNSHIP OPPORTUNITIES, BOTH THROUGH FORMAL PROGRAMS AND ON AN INDIVIDUAL, CASE-BY-CASE BASIS. THE FORMAL PROGRAMS, IN PARTICULAR, MAKE

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AN EFFORT TO PROVIDE RESEARCH OPPORTUNITIES AND ENCOURAGEMENT FOR CONSIDERING STEM CAREERS TO GROUPS WHO ARE TRADITIONALLY UNDERREPRESENTED IN MATHEMATICS AND THE PHYSICAL SCIENCES. CARNEGIE PROGRAMS ALSO TRAIN PUBLIC ELEMENTARY SCHOOL TEACHERS ON HOW TO INCORPORATE INTERACTIVE SCIENCE INSTRUCTION INTO ALL ASPECTS OF THE CURRICULUM; HELPS IMPROVE THE INSTRUCTION OF MATHEMATICS EDUCATION OF PUBLIC SCHOOL CHILDREN BY TRAINING INDIVIDUALS WITH MATHEMATICS OR RELATED DEGREES TO BECOME CLASSROOM INSTRUCTORS; INTRODUCES AND TRAINS HIGH SCHOOL STUDENTS TO CAREER EDUCATION PATHWAYS IN THE FIELD OF BIOTECHNOLOGY; AND MAKES INFORMATION AVAILABLE CONCERNING CARNEGIE'S SCIENTIFIC RESEARCH FINDINGS TO STUDENTS AND THE GENERAL PUBLIC.

FORM 990 REVIEW PROCESS

FORM 990, PART VI, SECTION B, LINE 11B

CARNEGIE'S FINANCE DEPARTMENT, SENIOR STAFF AND ITS INDEPENDENT PAID PREPARER, GRANT THORNTON, WORK TOGETHER TO PREPARE AND REVIEW THE FORM 990. THE DRAFT FORM 990 IS THEN DISTRIBUTED TO MEMBERS OF THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES FOR REVIEW AND COMMENT. AFTER THE AUDIT COMMITTEE HAS REVIEWED THE RETURN AND ITS FEEDBACK HAS BEEN INCORPORATED, THE RETURN IS DISTRIBUTED TO ALL MEMBERS OF THE BOARD OF TRUSTEES FOR REVIEW AND COMMENT BEFORE IT IS FILED WITH THE IRS. TRUSTEES ARE ENCOURAGED TO CONTACT THE CHIEF OPERATING OFFICER OR DIRECTOR OF FINANCE WITH ANY QUESTIONS.

CONFLICT OF INTEREST POLICY

FORM 990, PART VI, SECTION B, LINE 12C

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CARNEGIE HAS ADOPTED CONFLICT OF INTEREST POLICIES THAT APPLY TO THE INSTITUTION'S TRUSTEES, CORPORATE OFFICERS, AND EMPLOYEES. THESE POLICIES REQUIRE EACH TRUSTEE TO COMPLETE ANNUALLY A FORM TO DISCLOSE ANY POTENTIAL CONFLICTS OF INTEREST. THE FORMS ARE COLLECTED BY THE CORPORATE SECRETARY, AND ANY DISCLOSURES ARE SUBSEQUENTLY PROVIDED TO THE BOARD OF TRUSTEES OR RELEVANT COMMITTEE OF THE BOARD FOR REVIEW AND APPROVAL. SIMILARLY, ALL EMPLOYEES OF CARNEGIE (INCLUDING CORPORATE OFFICERS) ARE REQUIRED, UPON HIRING AND ANNUALLY THEREAFTER, TO REPORT THEIR POTENTIAL CONFLICTS OF INTEREST. DEPARTMENT DIRECTORS REVIEW ALL POTENTIAL CONFLICTS IN THEIR DEPARTMENTS. THE PRESIDENT REVIEWS ALL POTENTIAL CONFLICTS FOR DEPARTMENT DIRECTORS. THE BOARD OF TRUSTEES REVIEWS ALL POTENTIAL CONFLICTS FOR THE CORPORATE OFFICERS. THROUGHOUT THE YEAR, EACH INDIVIDUAL SUBJECT TO THE CONFLICT OF INTEREST POLICIES IS REQUIRED TO UPDATE HIS/HER DISCLOSURE STATEMENT TO INCLUDE ANY INFORMATION REQUIRED TO BE DISCLOSED. THE SIGNED EMPLOYEE DISCLOSURE FORMS ARE KEPT IN THE EMPLOYEE'S PERSONNEL FILE.

PROCESS FOR DETERMINING EXECUTIVE COMPENSATION

FORM 990, PART VI, SECTION B, LINE 15A

CARNEGIE ENGAGES AN INDEPENDENT COMPENSATION CONSULTING FIRM TO CONDUCT A COMPENSATION STUDY TO EVALUATE THE REASONABLENESS OF THE TOTAL PROPOSED COMPENSATION FOR THE ORGANIZATION'S "DISQUALIFIED PERSONS" UNDER TREAS. REG. 53.4958-3 WITHOUT REGARD TO WHETHER THE PERSON HAS BEEN ELECTED AN OFFICER. THE INDEPENDENT COMPENSATION STUDY FOCUSES ON THE COMPENSATION PAID TO FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY-SITUATED ORGANIZATIONS AND ALSO CONSIDERS INDUSTRY COMPENSATION SURVEYS. THE

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COMPENSATION STUDY IS PROVIDED TO THE ORGANIZATION'S HUMAN RESOURCES AND COMPENSATION COMMITTEE, TOGETHER WITH A REASONED WRITTEN OPINION FROM THE COMPENSATION CONSULTANT THAT THE PROPOSED COMPENSATION ARRANGEMENTS FOR THE DISQUALIFIED PERSONS ARE "REASONABLE" WITHIN THE MEANING OF TREAS. REG. 53.4958-4(B)(1)(II)(A). THE HUMAN RESOURCES AND COMPENSATION COMMITTEE SETS COMPENSATION FOR EACH DISQUALIFIED PERSON AND MAKES A RECOMMENDATION TO THE FULL BOARD OF TRUSTEES WITH RESPECT TO COMPENSATION FOR THE PRESIDENT. THE FULL BOARD THEN REVIEWS THE COMPENSATION STUDY AND OPINION FOR THE PRESIDENT TOGETHER WITH THE RECOMMENDATION OF THE HUMAN RESOURCES AND COMPENSATION COMMITTEE AND MAKES A DECISION WITH RESPECT TO THE PRESIDENT'S COMPENSATION. THE HUMAN RESOURCES AND COMPENSATION COMMITTEE AND BOARD RELY ON THE COMPENSATION CONSULTANT'S OPINION AND COMPENSATION STUDY TO GUIDE ITS REVIEW, DELIBERATION, AND APPROVAL OF THE PROPOSED COMPENSATION ARRANGEMENTS, AND ITS DECISIONS REGARDING COMPENSATION (INCLUDING THE BASES FOR THESE DECISIONS) ARE DOCUMENTED IN THE MEETING MINUTES. THE HUMAN RESOURCES AND COMPENSATION COMMITTEE AND TRUSTEES WHO VOTE ON COMPENSATION FOR DISQUALIFIED PERSONS AND THE PRESIDENT DO NOT HAVE A CONFLICT OF INTEREST WITH REGARD TO THESE COMPENSATION ARRANGEMENTS.

MAKING ORGANIZATIONAL DOCUMENTS AVAILABLE TO THE PUBLIC
FORM 990, PART VI, SECTION C, LINE 19
IN ACCORDANCE WITH TREAS. REG. 301.6104(D)-1(A)(1) AND IRS NOTICE 2007-45, COPIES OF CARNEGIE'S THREE MOST RECENT FORMS 990 ARE MADE AVAILABLE FOR INSPECTION BY THE PUBLIC DURING REGULAR BUSINESS HOURS AT CARNEGIE'S OFFICE IN WASHINGTON, DC. CARNEGIE'S MOST RECENT FORM 990 IS

Name of the organization CARNEGIE INSTITUTION OF WASHINGTON	Employer identification number 53-0196523
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ALSO MADE AVAILABLE TO THE PUBLIC ON THE INSTITUTION'S WEBSITE. THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AVAILABLE TO THE EXTENT REQUIRED BY LAW. THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS AND STAFF CONFLICT OF INTEREST POLICY ARE ALSO MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

OTHER CHANGES IN NET ASSETS

FORM 990, PART XI, LINE 9

PENSION-RELATED CHANGES OTHER THAN NET

PERIODIC POSTRETIREMENT BENEFIT COST	(\$2,611,408)
UNREALIZED SWAP GAIN/(LOSS)	\$1,033,807
UNREALIZED FX GAIN/(LOSS)	\$1,061
GRANT MODIFICATIONS	(\$5,187,691)

TOTAL	(\$6,764,231)

ATTACHMENT 1990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
CAMECA INSTRUMENTS INC. 5500 NOBEL DRIVE, SUITE 100 MADISON, WI 53711	LAB EQUIP SERVICING	490,784.
FEI COMPANY 5350 N.E. DAWSON CREEK DRIVE HILLSBORO, OR 97124	LAB EQUIP SERVICING	400,396.
EDLUND DECOSSE INTERNATIONAL INC. UNIT D2 46114 AIRPORT ROAD CHILLIWACK BC CANADA V2P1A5	FLIGHT FEES	397,047.
GILLUM STRATEGY PARTNERS 455 N CITYFRONT PLAZA DRIVE SUITE 3100	PLANNING CONSULTANTS	312,800.

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ATTACHMENT 1 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
CHICAGO, IL 60611		
SHORENSTEIN 850 THIRD AVENUE, 17TH FLOOR NEW YORK, NY 10022	INVESTMENT MGMT	308,267.