

**990**  
 Form 990  
 (Rev. January 2020)  
 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.  
 ► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**  
 Open to Public  
 Inspection

**A For the 2019 calendar year, or tax year beginning JUL 1, 2019 and ending JUN 30, 2020**

<b>B</b> Check if applicable:	<b>C</b> Name of organization  THE BROOKINGS INSTITUTION  Doing business as		<b>D</b> Employer identification number  53-0196577
<input type="checkbox"/> Address change	Number and street (or P.O. box if mail is not delivered to street address) 1775 MASSACHUSETTS AVE., NW	Room/suite	<b>E</b> Telephone number 202-797-6000
<input type="checkbox"/> Name change	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20036		<b>G</b> Gross receipts \$ 181,901,423.
<input type="checkbox"/> Initial return			<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Final return/terminated			<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Amended return			If "No," attach a list. (see instructions)
<input type="checkbox"/> Application pending	<b>F</b> Name and address of principal officer: JOHN R. ALLEN SAME AS C ABOVE		<b>H(c)</b> Group exemption number ►
<b>I</b> 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			
<b>J</b> Website: ► <a href="http://WWW.BROOKINGS.EDU">WWW.BROOKINGS.EDU</a>			
<b>K</b> Form of organization: <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►		<b>L</b> Year of formation: 1939 <b>M</b> State of legal domicile: DC	

**Part I** **Summary**

<b>Activities &amp; Governance</b>	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O		
	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 44	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 44	
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5 573	
	6 Total number of volunteers (estimate if necessary)	6 44	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a -8,238.	
b Net unrelated business taxable income from Form 990-T, line 39	7b 0.		
<b>Revenue</b>	8 Contributions and grants (Part VIII, line 1h)	Prior Year 78,330,045.	Current Year 63,041,977.
	9 Program service revenue (Part VIII, line 2g)	469,961.	1,124,071.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	20,873,559.	12,315,777.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,178,773.	2,913,830.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	103,852,338.	79,395,655.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,051,112.	815,987.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
<b>Expenses</b>	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	60,093,598.	60,960,118.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	51,600.
	b Total fundraising expenses (Part IX, column (D), line 25) ► 3,094,566.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	33,768,776.	33,115,761.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	94,913,486.	94,943,466.
	19 Revenue less expenses. Subtract line 18 from line 12	8,938,852.	-15,547,811.
	20 Total assets (Part X, line 16)	Beginning of Current Year 529,123,659.	End of Year 492,547,778.
21 Total liabilities (Part X, line 26)	57,774,287.	56,583,614.	
22 Net assets or fund balances. Subtract line 21 from line 20	471,349,372.	435,964,164.	

**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.

<b>Sign Here</b>	► Signature of officer  IRENA BARISIC, VP, CFO, ASST TREASURER  Type or print name and title	Date			
<b>Paid</b>	Print/Type preparer's name WILLIAM E TURCO, CPA	Preparer's signature 	Date 05/13/21	Check <input type="checkbox"/> if self-employed	PTIN P00369217
<b>Preparer</b>	Firm's name ► RSM US LLP	Firm's EIN ► 42-0714325			
<b>Use Only</b>	Firm's address ► 9801 WASHINGTONIAN BLVD, STE 500 GAIITHERSBURG, MD 20878	Phone no. 301-296-3600			

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

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ..... 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 \$ 16,631,477. including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)  
ECONOMIC STUDIES:

THE ECONOMIC STUDIES PROGRAM ANALYZES CURRENT AND EMERGING ECONOMIC POLICY ISSUES. ITS RESEARCH AIMS TO INCREASE THE PUBLIC'S UNDERSTANDING OF HOW THE ECONOMY WORKS AND WHAT CAN BE DONE TO MAKE IT WORK BETTER. IN THE PAST YEAR, ECONOMIC STUDIES EXPERTS EXAMINED THE STATE OF THE U.S. ECONOMY, INCLUDING THE IMPACT OF THE COVID-19 PANDEMIC ON THE LABOR MARKET, HEALTH CARE SYSTEM, SOCIAL INEQUALITY, RETIREMENT, EDUCATION, AND THE NATIONAL DEBT AND HOW FISCAL AND MONETARY POLICY SHOULD RESPOND IN A LOW INFLATION AND LOW INTEREST-RATE ENVIRONMENT. ECONOMIC STUDIES ALSO PRODUCES THE BROOKINGS PAPERS ON ECONOMIC ACTIVITY, THE LEADING SOURCE OF POLICY-ORIENTED, EMPIRICAL RESEARCH ON MACROECONOMICS. IN ADDITION TO PUBLISHING NUMEROUS WORKS OF

4b (Code: \_\_\_\_\_) (Expenses \$ 14,852,339. including grants of \$ 257,600.) (Revenue \$ 795,014.)  
FOREIGN POLICY STUDIES:

OVER THE COURSE OF A TUMULTUOUS YEAR FOR THE UNITED STATES AND THE WORLD, SCHOLARS IN THE BROOKINGS FOREIGN POLICY PROGRAM, UNDER THE LEADERSHIP OF VICE PRESIDENT AND DIRECTOR SUZANNE MALONEY, CONTINUED TO SHAPE DEBATES AND HELP INFORM POLICY DECISIONS ON THE MOST PRESSING GEOPOLITICAL ISSUES FACING WASHINGTON AND THE WORLD. AMID UNPRECEDENTED UNCERTAINTY AND RISING GLOBAL CHALLENGES, THE EXPERTISE OF BROOKINGS FOREIGN POLICY SCHOLARS HAS NEVER BEEN IN HIGHER DEMAND. FP SCHOLARS FROM ACROSS OUR FIVE RESEARCH CENTERS ARE SOUGHT AFTER FOR THEIR INSIGHT, ANALYSIS AND NONPARTISAN PERSPECTIVE. IN THE PAST YEAR FP SCHOLARS HAVE PROVIDED EXPERT TESTIMONY BEFORE CONGRESS ON MATTERS RANGING FROM THE IMPACT OF THE PANDEMIC ON NATIONAL SECURITY AND

4c (Code: \_\_\_\_\_) (Expenses \$ 11,540,127. including grants of \$ 42,800.) (Revenue \$ 102,655.)  
GLOBAL ECONOMY AND DEVELOPMENT:

THE GLOBAL ECONOMY AND DEVELOPMENT PROGRAM EXAMINES THE OPPORTUNITIES AND CHALLENGES PRESENTED BY GLOBALIZATION, WHICH CONTINUES TO BE A CENTRAL CONCERN FOR INTERNATIONAL POLICYMAKERS, BUSINESS LEADERS, THE MEDIA AND CIVIL SOCIETY. GLOBAL ECONOMY AND DEVELOPMENT EXPERTS AIM TO SHAPE THE POLICY DEBATE ON HOW TO IMPROVE GLOBAL ECONOMIC COOPERATION AND FIGHT GLOBAL POVERTY AND SOURCES OF SOCIAL STRESS. IN THE PAST YEAR, GLOBAL EXPERTS HAVE PROVIDED ANALYSIS AND RECOMMENDATIONS TO FOSTER GLOBAL ECONOMIC COOPERATION, IMPROVE PATHWAYS OUT OF POVERTY, AND HELP DEAL WITH THE TECHNOLOGICAL TRANSFORMATION OF THE WORLD ECONOMY, WITH A SPECIAL FOCUS ON PRODUCTIVITY, EDUCATION, NEW SKILLS, INCLUSIVENESS, AND SUSTAINABILITY. IN ADDITION TO PUBLISHING NUMEROUS

4d Other program services (Describe on Schedule O.)(Expenses \$ 27,307,900. including grants of \$ 515,587.) (Revenue \$ 1,717,599.)4e Total program service expenses ► 70,331,843.

Form 990 (2019)

**Part IV Checklist of Required Schedules**

	<b>Yes</b>	<b>No</b>
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> .....	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? .....	2 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> .....	3 X	
4 <b>Section 501(c)(3) organizations.</b> 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> .....	4 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> .....	5 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> .....	6 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> .....	7 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> .....	8 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> .....	9 X	
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> .....	10 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. <ul style="list-style-type: none"> <li>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> .....</li> <li>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> .....</li> <li>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> .....</li> <li>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> .....</li> <li>e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....</li> <li>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> .....</li> </ul>	11a X	
11b X	11b X	
11c X	11c X	
11d X	11d X	
11e X	11e X	
11f X	11f 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> .....	12a X	
12b 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> .....	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....	13 X	
14a Did the organization maintain an office, employees, or agents outside of the United States? <ul style="list-style-type: none"> <li>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> .....</li> </ul>	14a X	
14b X	14b X	
15 X	15 X	
16 X	16 X	
17 X	17 X	
18 X	18 X	
19 X	19 X	
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....	20a X	
20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	21 X	

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

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

**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 

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .....	1a	399
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .....	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	1c	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 on Schedule O. See instructions.
Check if Schedule O contains a response or note to any line in this Part VI **Section A. Governing Body and Management**

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year .....	1a	44	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent .....	1b	44	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? .....			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .....			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .....			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .....			X
6	Did the organization have members or stockholders? .....			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? .....			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? .....			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body? .....	8a	X	
b	Each committee with authority to act on behalf of the governing body? .....	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O .....			X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates? .....	10a	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? .....		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .....	11a	X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 .....	12a	X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? .....	12b	X
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done .....	12c	X
13	Did the organization have a written whistleblower policy? .....	13	X
14	Did the organization have a written document retention and destruction policy? .....	14	X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official .....	15a	X
b	Other officers or key employees of the organization .....	15b	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? .....	16a	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? .....	16b	

**Section C. Disclosure**

17 List the states with which a copy of this Form 990 is required to be filed ► **SEE SCHEDULE O**

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.

Own website  Another's website  Upon request  Other (explain on Schedule O)

19 Describe on 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 ►

IRENA BARISIC & ELIZABETH GROSS - 202-797-6000

1775 MASSACHUSETTS AVE., NW, WASHINGTON, DC 20036

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

 Check if Schedule O contains a response or note to any line in this Part VII 
**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter 0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

 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 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			
(1) JOHN ALLEN PRESIDENT	40.00	X					1,043,188.	0.	75,890.
(2) TED GAYER EXECUTIVE VICE PRESIDENT	40.00	X					480,468.	0.	52,100.
(3) WILLIAM G. GALE SR FELLOW & DIR, TAX POLICY EFF 6/1/	40.00		X				452,960.	0.	55,085.
(4) DARRELL M. WEST VP & DIR OF GOVERNANCE STUDIES	40.00		X				363,981.	0.	65,755.
(5) CATHERINE A. PIEZ CHIEF INVESTMENT OFFICER	40.00		X				343,293.	0.	57,271.
(6) AMY LIU WITMER VP & DIR, METROPOLITAN POLICY	40.00		X				351,650.	0.	40,275.
(7) IRENA BARISIC VP, CFO, ASST TREASURER	40.00	X					339,285.	0.	39,950.
(8) STEPHANIE R. AARONSON VP & DIR OF ECONOMIC STUDIES	40.00		X				327,097.	0.	38,820.
(9) N. STROBE TALBOTT FORMER PRESIDENT, DIST. FELLOW THRU	40.00		X				304,625.	0.	57,390.
(10) DAVID WESSEL SR FELLOW & DIR, HUTCHINS EFF 2/1/20	40.00		X				302,839.	0.	58,749.
(11) HOMI J. KHARAS INTERIM VP GLOBAL THRU 5/31/2020	40.00		X				315,934.	0.	33,600.
(12) BRUCE JONES VP & DIR, FOREIGN POLICY THRU 1/31/2	40.00		X				296,183.	0.	37,766.
(13) MARTIN BAILY SENIOR FELLOW	40.00		X				266,321.	0.	54,126.
(14) KEMAL DERVIS SENIOR FELLOW	40.00		X				282,359.	0.	33,600.
(15) JACQUELINE BASILE VP & CHIEF HUMAN RESOURCES OFFICER	40.00		X				283,253.	0.	31,513.
(16) MICHAEL CAVADEL VP, GEN COUNSEL, ASST SECRETARY	40.00	X					237,377.	0.	52,243.
(17) BRAHIMA COULIBALY VP & DIRECTOR, GLOBAL EFFECTIVE 6/1/	40.00	X					232,924.	0.	45,180.

## 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 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			
(18) SUZANNE MALONEY INTERIM VP & DIR. FP EFF 2/1/2020	40.00			X			209,539.	0.	52,586.
(19) JENNIFER BERLIN VP, STRATEGY AND OPERATIONS	40.00			X			227,691.	0.	17,044.
(20) DAVID PORTER FORMER, ASST. TREASURER	40.00					X	203,480.	0.	5,279.
(21) GLENN H. HUTCHINS CO-CHAIR OF THE BOARD	4.00	X	X				0.	0.	0.
(22) SUZANNE NORA JOHNSON CO-CHAIR OF THE BOARD	4.00	X	X				0.	0.	0.
(23) ARTHUR R. COLLINS VICE CHAIR OF BOARD	3.00	X	X				0.	0.	0.
(24) LEONARD D. SCHAEFFER VICE CHAIR OF BOARD	3.00	X	X				0.	0.	0.
(25) CHERYL COHEN EFFRON VC, NOMINATIONS & GOV, TREASURER	3.00	X	X				0.	0.	0.
(26) TRACY R. WOLSTENCROFT SECRETARY OF THE BOARD	3.00	X	X				0.	0.	0.
<b>1b Subtotal</b>						►	6,864,447.	0.	904,222.
<b>c Total from continuation sheets to Part VII, Section A</b>						►	0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>						►	6,864,447.	0.	904,222.

**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 ►

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

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual .....

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

	Yes	No
3	X	
4	X	
5		X

## Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
SODEXO, INC & AFFILIATES PO BOX 536922, ATLANTA, GA 30353-6922	FOOD SERVICES & CAFETERIA & FACILITIES M	1,129,776.
RESULTS FOR DEVELOPMENT INSTITUTE, INC., 1875 CONNECTICUT AVE., NW, WASHINGTON, DC	FACILITIES MANAGEMENT - NON-PROFIT	893,815.
DONOHUE CONSTRUCTION COMPANY 7101 WISCONSIN AVENUE, BETHESDA, MD 20814	REAL ESTATE, CONSTRUCTION	857,760.
ACCENTURE, LLP PO BOX 70629, CHICAGO, IL 60673	GLOBAL MGMT, CONSULTING & TECHNOLOGY SVC	831,017.
CITY SECURITY CONSULTANTS, INC., 2010 KENDALL STREET, NE, WASHINGTON, DC 20002	SECURITY & SAFETY TRAINING	705,368.
<b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►	35	

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2019)

## 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 line)	(C) Position (check all that apply)					(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			
(27) ROBERT J. ABERNETHY	3.00								
VC OF DEVELOPMENT COMMITTEE		X					0.	0.	0.
(28) PAUL M. ACHLEITNER	2.00								
TRUSTEE		X					0.	0.	0.
(29) PETER BARRIS	2.00								
TRUSTEE		X					0.	0.	0.
(30) ROBERT M. BASS	2.00								
TRUSTEE		X					0.	0.	0.
(31) DAVID C. BOHNETT	2.00								
TRUSTEE		X					0.	0.	0.
(32) HANZADE DOGAN BOYNER	2.00								
TRUSTEE THRU 6/5/20		X					0.	0.	0.
(33) PAUL L. CEJAS	2.00								
TRUSTEE THRU 6/5/20		X					0.	0.	0.
(34) W. EDMUND CLARK	2.00								
TRUSTEE		X					0.	0.	0.
(35) ABBY JOSEPH COHEN	3.00								
TRUSTEE; CHAIR OF INVESTMENT COMMITTEE		X					0.	0.	0.
(36) BETSY Z. COHEN	2.00								
TRUSTEE		X					0.	0.	0.
(37) SUSAN CROWN	2.00								
TRUSTEE		X					0.	0.	0.
(38) JASON CUMMINS	2.00								
TRUSTEE		X					0.	0.	0.
(39) ALAN M. DACHS	2.00								
NON-FIDUCIARY SENIOR TRUSTEE AS OF N		X					0.	0.	0.
(40) FENG DENG	2.00								
TRUSTEE THRU 11/8/2019		X					0.	0.	0.
(41) PAUL DESMARAIS JR.	2.00								
TRUSTEE		X					0.	0.	0.
(42) ALFONSO FANJUL	2.00								
TRUSTEE		X					0.	0.	0.
(43) BART FRIEDMAN	3.00								
TRUSTEE; CHAIR OF THE AUDIT COMMITTEE		X					0.	0.	0.
(44) ELLEN V. FUTTER	3.00								
TRUSTEE; CHAIR OF NOMINATIONS & GOV.		X					0.	0.	0.
(45) HELENE GAYLE	2.00								
TRUSTEE		X					0.	0.	0.
(46) DAVID J. GRAIN	2.00								
TRUSTEE		X					0.	0.	0.

Total to Part VII, Section A, line 1c .....

## 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 line)	(C) Position (check all that apply)					(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			
(47) BRIAN L. GREENSPUN TRUSTEE THRU 6/5/2020	2.00	X					0.	0.	0.
(48) PETE HIGGINS TRUSTEE; CHAIR OF DEVELOPMENT COMMIT	3.00	X					0.	0.	0.
(49) VICTOR L. HYMES TRUSTEE; VC OF BUDGET & FINANCE COMM	3.00	X					0.	0.	0.
(50) BENJAMIN R. JACOBS TRUSTEE	2.00	X					0.	0.	0.
(51) KENNETH M. JACOBS TRUSTEE	2.00	X					0.	0.	0.
(52) TOM KAPLAN TRUSTEE	2.00	X					0.	0.	0.
(53) HOSEIN KHAJEH-HOSSEINY TRUSTEE	2.00	X					0.	0.	0.
(54) PHILIP M. KNIGHT TRUSTEE	2.00	X					0.	0.	0.
(55) SARA GROOTWASSINK LEWIS TRUSTEE; VC OF THE AUDIT COMMITTEE	3.00	X					0.	0.	0.
(56) CATHY MINEHAN TRUSTEE; CHAIR OF COMPENSATION COMM	3.00	X					0.	0.	0.
(57) ADITYA MITTAL TRUSTEE	2.00	X					0.	0.	0.
(58) LAXMAN NARASIMHAN TRUSTEE	2.00	X					0.	0.	0.
(59) BRIAN ROGERS TRUSTEE; VC OF INVESTMENT COMMITTEE	3.00	X					0.	0.	0.
(60) NICOLE PULLEN ROSS TRUSTEE	2.00	X					0.	0.	0.
(61) NEIL SHEN TRUSTEE THRU 11/8/2019	2.00	X					0.	0.	0.
(62) ARNE M. SORENSEN TRUSTEE; CHAIR OF BUDGET & FINANCE C	3.00	X					0.	0.	0.
(63) JOE STRAUSS III TRUSTEE	2.00	X					0.	0.	0.
(64) LEE J. STYSLINGER III TRUSTEE	2.00	X					0.	0.	0.
(65) KRISHEN SUD TRUSTEE	2.00	X					0.	0.	0.
(66) ANDREW TISCH TRUSTEE	2.00	X					0.	0.	0.

Total to Part VII, Section A, line 1c .....

## Part VII

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

Total to Part VII, Section A, line 1c .....

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>			
	<b>b</b> Membership dues .....	<b>1b</b>			
	<b>c</b> Fundraising events .....	<b>1c</b>			
	<b>d</b> Related organizations .....	<b>1d</b>			
	<b>e</b> Government grants (contributions) .....	<b>1e</b> 859,544.			
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b> 62,182,433.			
	<b>g</b> Noncash contributions included in lines 1a-1f .....	<b>1g</b> \$ 1,791,863.			
	<b>h Total.</b> Add lines 1a-1f .....		<b>63,041,977.</b>		
<b>Program Service Revenue</b>	<b>2 a</b> RESEARCH .....	<b>Business Code</b> 900099	1,124,071.	1,124,071.	
	<b>b</b>				
	<b>c</b>				
	<b>d</b>				
	<b>e</b>				
	<b>f</b> All other program service revenue .....				
	<b>g Total.</b> Add lines 2a-2f .....		<b>1,124,071.</b>		
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		<b>4,204,899.</b>		4,204,899.
	<b>4</b> Income from investment of tax-exempt bond proceeds .....				
	<b>5</b> Royalties .....				
		(i) Real (ii) Personal			
	<b>6a</b>	41,782.			
	<b>6b</b>	60,036.			
	<b>6c</b>	-18,254.			
	<b>d</b> Net rental income or (loss) .....		<b>-18,254.</b>		-18,254.
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	(i) Securities (ii) Other			
	<b>7a</b> 110,098,409.				
	<b>b</b> Less: cost or other basis and sales expenses .....	101,984,621.	2,910.		
	<b>c</b> Gain or (loss) .....	<b>7c</b> 8,113,788.	-2,910.		
	<b>d</b> Net gain or (loss) .....		<b>8,110,878.</b>		8,110,878.
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....				
	<b>8a</b>				
	<b>b</b> Less: direct expenses .....	<b>8b</b>			
	<b>c</b> Net income or (loss) from fundraising events .....				
	<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....				
	<b>9a</b>				
	<b>b</b> Less: direct expenses .....	<b>9b</b>			
	<b>c</b> Net income or (loss) from gaming activities .....				
	<b>10 a</b> Gross sales of inventory, less returns and allowances .....				
	<b>10a</b> 1,491,197.				
	<b>b</b> Less: cost of goods sold .....	<b>10b</b> 458,201.			
	<b>c</b> Net income or (loss) from sales of inventory .....		<b>1,032,996.</b>	<b>1,041,234.</b>	-8,238.
<b>Miscellaneous Revenue</b>	<b>11 a</b> CAFETERIA INCOME .....	<b>Business Code</b> 900099	1,621,213.		1,621,213.
	<b>b</b> OTHER INCOME .....	900099	277,875.		277,875.
	<b>c</b>				
	<b>d</b> All other revenue .....				
	<b>e Total.</b> Add lines 11a-11d .....		<b>1,899,088.</b>		
	<b>12 Total revenue.</b> See instructions .....		<b>79,395,655.</b>	<b>2,165,305.</b>	-8,238.
					14,196,611.

**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  X

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 .....				
2 Grants and other assistance to domestic individuals. See Part IV, line 22 .....	396,235.	396,235.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....	419,752.	419,752.		
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....	6,106,063.	2,937,695.	2,840,915.	327,453.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
7 Other salaries and wages .....	35,803,179.	27,884,269.	6,824,932.	1,093,978.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) .....	4,696,765.		4,696,765.	
9 Other employee benefits .....	11,198,230.	15,176,099.	-4,692,869.	715,000.
10 Payroll taxes .....	3,155,881.		3,155,881.	
11 Fees for services (nonemployees):				
a Management .....				
b Legal .....	236,775.	33,302.	203,473.	
c Accounting .....	200,644.	47,031.	153,428.	185.
d Lobbying .....				
e Professional fundraising services. See Part IV, line 17 .....	51,600.			51,600.
f Investment management fees .....	1,623,030.		1,623,030.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	12,562,274.	10,302,494.	2,143,048.	116,732.
12 Advertising and promotion .....	170,448.	150,484.	495.	19,469.
13 Office expenses .....	1,406,448.	676,409.	631,632.	98,407.
14 Information technology .....	2,494,533.	999,092.	1,476,275.	19,166.
15 Royalties .....				
16 Occupancy .....	2,432,074.	6,432,058.	-4,360,540.	360,556.
17 Travel .....	1,791,153.	1,532,193.	165,013.	93,947.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .....	27,232.	27,232.		
19 Conferences, conventions, and meetings .....	1,882,762.	1,697,157.	24,408.	161,197.
20 Interest .....	1,087,650.		1,087,650.	
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....	3,080,628.	379,189.	2,701,439.	
23 Insurance .....	384,074.	20,795.	363,279.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a OTHER DIRECT COSTS	2,301,894.	458,823.	1,822,034.	21,037.
b PUBLISHING	508,581.	489,761.	2,981.	15,839.
c REPAIR/MAINTENANCE	497,834.	22,080.	475,754.	
d BAD DEBT	400,295.	249,693.	150,602.	
e All other expenses	27,432.		27,432.	
<b>25 Total functional expenses.</b> Add lines 1 through 24e	94,943,466.	70,331,843.	21,517,057.	3,094,566.
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ►  if following SOP 98-2 (ASC 958-720)

## 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 .....	28,931,511.	1	24,872,409.
	2 Savings and temporary cash investments .....	13,296,059.	2	74,697,770.
	3 Pledges and grants receivable, net .....	76,662,789.	3	63,308,682.
	4 Accounts receivable, net .....	327,492.	4	156,342.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		6	
	7 Notes and loans receivable, net .....		7	
	8 Inventories for sale or use .....	114,665.	8	102,401.
	9 Prepaid expenses and deferred charges .....	1,549,715.	9	1,160,402.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	81,070,624.		
	b Less: accumulated depreciation .....	10b 53,350,431.	29,718,515.	10c 27,720,193.
	11 Investments - publicly traded securities .....	152,878,319.	11	185,572,781.
	12 Investments - other securities. See Part IV, line 11 .....	224,090,137.	12	113,957,384.
	13 Investments - program-related. See Part IV, line 11 .....		13	
	14 Intangible assets .....		14	
	15 Other assets. See Part IV, line 11 .....	1,554,457.	15	999,414.
	16 Total assets. Add lines 1 through 15 (must equal line 33) .....	529,123,659.	16	492,547,778.
Liabilities	17 Accounts payable and accrued expenses .....	8,702,975.	17	7,754,671.
	18 Grants payable .....		18	
	19 Deferred revenue .....	1,146,892.	19	1,299,419.
	20 Tax-exempt bond liabilities .....	45,049,972.	20	44,623,945.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D .....		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		22	
	23 Secured mortgages and notes payable to unrelated third parties .....		23	
	24 Unsecured notes and loans payable to unrelated third parties .....		24	
	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 .....	2,874,448.	25	2,905,579.
	26 Total liabilities. Add lines 17 through 25 .....	57,774,287.	26	56,583,614.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here ► <input checked="" type="checkbox"/>			
	and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions .....	225,150,653.	27	207,949,947.
	28 Net assets with donor restrictions .....	246,198,719.	28	228,014,217.
	Organizations that do not follow FASB ASC 958, check here ► <input type="checkbox"/>			
	and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds .....		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund .....		30	
	31 Retained earnings, endowment, accumulated income, or other funds .....		31	
	32 Total net assets or fund balances .....	471,349,372.	32	435,964,164.
	33 Total liabilities and net assets/fund balances .....	529,123,659.	33	492,547,778.

**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	79,395,655.
2 Total expenses (must equal Part IX, column (A), line 25) .....	2	94,943,466.
3 Revenue less expenses. Subtract line 2 from line 1 .....	3	-15,547,811.
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) .....	4	471,349,372.
5 Net unrealized gains (losses) on investments .....	5	-19,456,169.
6 Donated services and use of facilities .....	6	
7 Investment expenses .....	7	
8 Prior period adjustments .....	8	
9 Other changes in net assets or fund balances (explain on Schedule O) .....	9	-381,228.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) .....	10	435,964,164.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII 

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other .....		
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? .....	2a	x
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:		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
2b Were the organization's financial statements audited by an independent accountant? .....	2b	x
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:		
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
2c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....	2c	x
If the organization changed either its oversight process or selection process during the tax year, explain on 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? .....	3a	x
3b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .....	3b	

Form 990 (2019)

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**

Open to Public  
Inspection

Name of the organization

THE BROOKINGS INSTITUTION

Employer identification number

53-0196577

**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		
<b>Total</b>						

**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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	90,539,102.	96,843,646.	65,378,153.	78,430,045.	63,041,977.	394,232,923.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
3 The value of services or facilities furnished by a governmental unit to the organization without charge .....						
4 <b>Total.</b> Add lines 1 through 3 .....	90,539,102.	96,843,646.	65,378,153.	78,430,045.	63,041,977.	394,232,923.
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) .....						30,942,166.
<b>6 Public support.</b> Subtract line 5 from line 4.						363,290,757.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4 .....	90,539,102.	96,843,646.	65,378,153.	78,430,045.	63,041,977.	394,232,923.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...	3,589,797.	4,282,665.	4,379,193.	5,024,382.	4,246,681.	21,522,718.
9 Net income from unrelated business activities, whether or not the business is regularly carried on .....						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	2,499,517.	2,277,314.	2,618,673.	2,599,707.	1,899,088.	11,894,299.
<b>11 Total support.</b> Add lines 7 through 10						427,649,940.
<b>12 Gross receipts from related activities, etc. (see instructions)</b> .....					<b>12</b>	10,531,087.

**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** ►

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	84.95	%
15 Public support percentage from 2018 Schedule A, Part II, line 14 .....	<b>15</b>	81.63	%
<b>16a 33 1/3% support test - 2019.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization .....			
► <input checked="" type="checkbox"/>			
<b>b 33 1/3% support test - 2018.</b> 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 <b>stop here</b> . The organization qualifies as a publicly supported organization .....			
► <input type="checkbox"/>			
<b>17a 10% -facts-and-circumstances test - 2019.</b> 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 <b>stop here</b> . 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>b 10% -facts-and-circumstances test - 2018.</b> 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 <b>stop here</b> . 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>18 Private foundation.</b> 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						
<b>14 First five years.</b> 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 <b>stop here</b> .....						

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f)) .....	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15 .....	16	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f)) .....	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17 .....	18	%

**19a 33 1/3% support tests - 2019.** 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 - 2018.** 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? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .		
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? If "Yes," complete <b>Part I</b> of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete <b>Part I</b> of Schedule L (Form 990 or 990-EZ).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		
10b		

**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?	11a	
b A family member of a person described in (a) above?	11b	
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>	11c	

**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).	Yes	No
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.		
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		
<b>8 Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	<b>8</b>		
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 <b>Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>		
e <b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
<b>8 Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>		
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 <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 <input type="checkbox"/> 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 <b>Part VI</b> ). See instructions.	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
<b>10</b> Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
<b>1</b> Distributable amount for 2019 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f <b>Total</b> of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b> Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>6</b> Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2020.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

**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.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:CAFETERIA2015 AMOUNT: \$ 2,332,134.2016 AMOUNT: \$ 2,167,186.2017 AMOUNT: \$ 2,350,662.2018 AMOUNT: \$ 2,358,488.2019 AMOUNT: \$ 1,621,213.OTHER INCOME2015 AMOUNT: \$ 167,383.2016 AMOUNT: \$ 110,128.2017 AMOUNT: \$ 268,011.2018 AMOUNT: \$ 241,219.2019 AMOUNT: \$ 277,875.

**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

- Attach to Form 990, Form 990-EZ, or Form 990-PF.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

Name of the organization

THE BROOKINGS INSTITUTION

Employer identification number

53-0196577

Organization type (check one):

**Filers of:**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 organizationForm 990-PF  501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck 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, 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

THE BROOKINGS INSTITUTION

Employer identification number

53-0196577

**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		\$ 5,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 3,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 2,844,202.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 2,500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 2,107,000.	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

THE BROOKINGS INSTITUTION

Employer identification number

53-0196577

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

Name of organization

THE BROOKINGS INSTITUTION

Employer identification number

53-0196577

**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 info. once.) ► \$ \_\_\_\_\_  
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
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

**SCHEDULE D**  
(Form 990)Department of the Treasury  
Internal Revenue Service**Supplemental Financial Statements**

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

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**Open to Public  
Inspection**Name of the organization**

THE BROOKINGS INSTITUTION

**Employer identification number**

53-0196577

**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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
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? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (for example, recreation or education)  Preservation of a historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space

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.

	Held at the End of the Tax Year
2a	
2b	
2c	
2d	

a Total number of conservation easements .....

b Total acreage restricted by conservation easements .....

c Number of conservation easements on a certified historic structure included in (a) .....

d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .....

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? .....

 Yes  No

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)? .....

 Yes  No

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.

1a If the organization elected, as permitted under FASB 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 FASB 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 .....

► \$ \_\_\_\_\_  
► \$ 268,418.

(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 FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 .....

► \$ \_\_\_\_\_

b Assets included in Form 990, Part X .....

► \$ \_\_\_\_\_

**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 make significant use of its collection items (check all that apply):

a <input checked="" type="checkbox"/> Public exhibition	d <input type="checkbox"/> Loan or exchange program
b <input type="checkbox"/> Scholarly research	e <input type="checkbox"/> Other _____
c <input type="checkbox"/> Preservation for future generations	

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
1c	
1d	
1e	
1f	

c Beginning balance .....

d Additions during the year .....

e Distributions during the year .....

f Ending balance .....

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 .....	471,042,888.	476,093,348.	468,522,658.	417,895,359.	425,725,267.
b Contributions .....	61,154,047.	6,715,783.	62,516,766.	18,324,115.	7,474,568.
c Net investment earnings, gains, and losses .....	-8,233,684.	7,360,966.	35,621,240.	48,993,345.	961,390.
d Grants or scholarships .....					
e Other expenditures for facilities and programs .....	88,918,479.	17,596,458.	89,209,102.	15,341,592.	15,098,080.
f Administrative expenses .....	1,496,742.	1,530,751.	1,358,214.	1,348,569.	1,167,786.
g End of year balance .....	433,548,030.	471,042,888.	476,093,348.	468,522,658.	417,895,359.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ► 47.41 %

b Permanent endowment ► 22.90 %

c Term endowment ► 29.69 %

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:

(i) Unrelated organizations .....

(ii) Related organizations .....

	Yes	No
3a(i)		X
3a(ii)		X
3b		

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 .....		4,155,620.		4,155,620.
b Buildings .....		53,214,925.	32,366,524.	20,848,401.
c Leasehold improvements .....				
d Equipment .....		19,108,942.	17,161,012.	1,947,930.
e Other .....		4,591,137.	3,822,895.	768,242.

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ► 27,720,193.

**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 .....	113,957,384.	END-OF-YEAR MARKET VALUE
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►</b>	<b>113,957,384.</b>	

**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)		
<b>Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►</b>		

**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)	
<b>Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►</b>	

**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) ACCRUED POST-RETIREMENT BENEFIT OBLIGATION	1,304,000.
(3) DEFERRED RENT EXPENSE PAYABLE	710,468.
(4) DEFERRED COMPENSATION	891,111.
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►</b>	<b>2,905,579.</b>

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 FASB 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	58,351,176.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-19,456,169.
b	Donated services and use of facilities	2b	6,250.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-17,347.
e	Add lines 2a through 2d	2e	-19,467,266.
3	Subtract line 2e from line 1	3	77,818,442.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	2,035,414.
b	Other (Describe in Part XIII.)	4b	-458,201.
c	Add lines 4a and 4b	4c	1,577,213.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	79,395,655.

**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	93,372,503.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	6,250.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	458,201.
e	Add lines 2a through 2d	2e	464,451.
3	Subtract line 2e from line 1	3	92,908,052.
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	2,035,414.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	2,035,414.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	94,943,466.

**Part XIII Supplemental Information.**

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

**PART III, LINE 4:**

BROOKINGS PHOTOGRAPHY COLLECTION WAS DONATED TO ENHANCE THE FACILITIES

WHERE BROOKINGS SCHOLARS MEET WITH OTHER KEY PEOPLE IN THE PUBLIC POLICY

WORLD. THIS CONTRIBUTES TO AN ATMOSPHERE THAT PROMOTES CONVERSATION AND

INTERACTION.

**PART V, LINE 4:**

BROOKINGS CAREFULLY BALANCES ITS FUNDING TO RESPOND TO CURRENT POLICY

ISSUES AS WELL AS UNDERTAKE LONG-TERM RESEARCH PROJECTS. AS NEW

CHALLENGES EMERGE, THE ENDOWMENT IS USED TO MAKE NEW RESEARCH PROJECTS

POSSIBLE, SUPPORTING CORE ADMINISTRATIVE COSTS, AS WELL AS, SCHOLAR-DRIVEN

RESEARCH.

**Part XIII** **Supplemental Information** *(continued)*

PART X, LINE 2:

BROOKINGS IS EXEMPT FROM FEDERAL INCOME TAXES ON ITS EXEMPT ACTIVITIES

UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE) AND HAS

BEEN DESIGNATED BY THE IRS AS A PUBLICLY SUPPORTED ORGANIZATION UNDER

SECTION 509(A)(1) OF THE CODE. BROOKINGS ENGAGES IN CERTAIN ACTIVITIES

THAT PRODUCE UNRELATED BUSINESS INCOME, AS DEFINED BY FEDERAL INCOME TAX

REGULATIONS.

WHEN TAX RETURNS ARE FILED, IT IS HIGHLY CERTAIN THAT SOME POSITIONS TAKEN

WOULD BE SUSTAINED UPON EXAMINATION BY THE TAXING AUTHORITIES, WHILE

OTHERS ARE SUBJECT TO UNCERTAINTY ABOUT THE MERITS OF THE POSITION TAKEN

OR THE AMOUNT OF THE POSITION THAT WOULD BE ULTIMATELY SUSTAINED. THE

BENEFIT OF A TAX POSITION IS RECOGNIZED IN THE CONSOLIDATED FINANCIAL

STATEMENTS IN THE PERIOD DURING WHICH, BASED ON ALL AVAILABLE EVIDENCE,

MANAGEMENT BELIEVES IT IS MORE LIKELY THAN NOT THAT THE POSITION WILL BE

SUSTAINED UPON EXAMINATION, INCLUDING THE RESOLUTION OF APPEALS OR

LITIGATION PROCESSES, IF ANY. TAX POSITIONS TAKEN ARE NOT OFFSET OR

AGGREGATED WITH OTHER POSITIONS. TAX POSITIONS THAT MEET THE MORE LIKELY

THAN NOT RECOGNITION THRESHOLD ARE MEASURED AS THE LARGEST AMOUNT OF TAX

BENEFIT THAT IS MORE THAN 50% LIKELY OF BEING REALIZED UPON SETTLEMENT

WITH THE APPLICABLE TAXING AUTHORITY. THE PORTION OF THE BENEFITS

ASSOCIATED WITH TAX POSITIONS TAKEN THAT EXCEEDS THE AMOUNT MEASURED AS

DESCRIBED ABOVE IS REFLECTED AS A LIABILITY FOR UNRECOGNIZED TAX BENEFITS

IN THE ACCOMPANYING CONSOLIDATED STATEMENT OF FINANCIAL POSITION, ALONG

WITH ANY ASSOCIATED INTEREST AND PENALTIES THAT WOULD BE PAYABLE TO THE

TAXING AUTHORITIES UPON EXAMINATION.

**Part XIII** **Supplemental Information** *(continued)*

BROOKINGS FILES INCOME TAX RETURNS IN THE U.S. FEDERAL JURISDICTION. AS OF

JUNE 30, 2020, AND FOR THE YEAR THEN ENDED, THERE WERE NO MATERIAL

UNRECOGNIZED/DERECOGNIZED TAX BENEFITS OR TAX PENALTIES OR INTEREST.

GENERALLY, BROOKINGS IS NO LONGER SUBJECT TO U.S. FEDERAL INCOME TAX

EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE FISCAL YEAR 2017.

**PART XI, LINE 2D - OTHER ADJUSTMENTS:**

GAIN/(LOSS) ON FOREIGN CURRENCY EXCHANGE -17,347.

**PART XI, LINE 4B - OTHER ADJUSTMENTS:**

COST OF GOODS SOLD REPORTED ON PART VIII, LINE 10B -458,201.

**PART XII, LINE 2D - OTHER ADJUSTMENTS:**

COST OF GOODS SOLD REPORTED ON PART VIII, LINE 10B 458,201.

**SCHEDULE F**  
(Form 990)**Statement of Activities Outside the United States**

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

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue Service

Name of the organization

THE BROOKINGS INSTITUTION

Employer identification number

53-0196577

**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
EAST ASIA AND THE PACIFIC	1	1	PROGRAM SERVICES, FUNDRAISING ACTIVITIES, MAINTAINING OFFICES	PUBLIC POLICY RESEARCH	6,141.
MIDDLE EAST AND NORTH AFRICA	1	14	PROGRAM SERVICES, FUNDRAISING ACTIVITIES, MAINTAINING OFFICES	PUBLIC POLICY RESEARCH	4,405,630.
SOUTH ASIA	1	26	PROGRAM SERVICES, FUNDRAISING ACTIVITIES, MAINTAINING OFFICES	PUBLIC POLICY RESEARCH	1,206,742.
EAST ASIA AND THE PACIFIC	0	0	GRANT TO RECIPIENTS LOCATED IN REGION		55,726.
MIDDLE EAST AND NORTH AFRICA	0	0	GRANT TO RECIPIENTS LOCATED IN REGION		364,027.
<b>3 a Subtotal</b> .....	3	41			6,038,266.
<b>b Total from continuation sheets to Part I</b> .....	0	0			0.
<b>c Totals</b> (add lines 3a and 3b) .....	3	41			6,038,266.

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

Schedule F (Form 990) 2019

**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)
		EAST ASIA AND THE PACIFIC	PROGRAM SERVICES	55,726.	WIRE TRANSFER	0.		

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 ..... ► 1

3 Enter total number of other organizations or entities ..... ► 1

**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)
PROGRAM ASSISTANCE	MIDDLE EAST AND NORTH AFRICA	11	194,799.	CHECK OR WIRE	169,228.	HOUSING ALLOWANCE	BOOK

**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.

PART I, LINE 2:

THE BROOKINGS INSTITUTION MAINTAINS RECORDS OF HOW GRANT FUNDS ARE USED

AND VERIFIES THROUGH REGULAR REPORTS AND COMMUNICATIONS THAT GRANTS ARE

USED IN A WAY CONSISTENT WITH THEIR ORIGINAL PURPOSE.

## SCHEDULE G

(Form 990 or 990-EZ)

## **Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

2019

## Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

---

Name of the organization

THE BROOKINGS INSTITUTION

**Employer identification number**

53-0196577

**Part I** **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a**  Mail solicitations
- b**  Internet and email solicitations
- c**  Phone solicitations
- d**  In-person solicitations
- e**  Solicitation of non-government grants
- f**  Solicitation of government grants
- g**  Special fundraising events

**2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

**b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
JENNY CHIANG EDUCATION					0.	51,600.
CONSULTANTS, LLC - 1404 ROMEO	FUNDRAISING CONSULTANT		X			-51,600.
<b>Total</b>					51,600.	-51,600.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND

OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
1	Gross receipts .....				
2	Less: Contributions .....				
3	Gross income (line 1 minus line 2) .....				
4	Cash prizes .....				
5	Noncash prizes .....				
6	Rent/facility costs .....				
7	Food and beverages .....				
8	Entertainment .....				
9	Other direct expenses .....				
10	Direct expense summary. Add lines 4 through 9 in column (d) .....	►			
11	Net income summary. Subtract line 10 from line 3, column (d) .....	►			

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
1	Gross revenue .....				
2	Cash prizes .....				
3	Noncash prizes .....				
4	Rent/facility costs .....				
5	Other direct expenses .....				
6	Volunteer labor .....	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7	Direct expense summary. Add lines 2 through 5 in column (d) .....	►			
8	Net gaming income summary. Subtract line 7 from line 1, column (d) .....	►			

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states? \_\_\_\_\_  Yes  No  
b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? \_\_\_\_\_  Yes  No

b If "Yes," explain: \_\_\_\_\_

11 Does the organization conduct gaming activities with nonmembers? .....  Yes  No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? .....  Yes  No

13 Indicate the percentage of gaming activity conducted in:

13a	%
13b	%

a The organization's facility .....  
 b An outside facility .....

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? .....  Yes  No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ► \$ \_\_\_\_\_

c If "Yes," enter name and address of the third party:

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

16 Gaming manager information:

Name ► \_\_\_\_\_

Gaming manager compensation ► \$ \_\_\_\_\_

Description of services provided ► \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Director/officer  Employee  Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? .....  Yes  No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: JENNY CHIANG EDUCATION CONSULTANTS, LLC

(I) ADDRESS OF FUNDRAISER: 1404 ROMEO COURT, MCLEAN, VA 22102

**Part IV** **Supplemental Information** *(continued)*

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

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

2019

Open to Public  
Inspection

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

THE BROOKINGS INSTITUTION

Employer identification number  
53-0196577

## Part I General Information on Grants and Assistance

1 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? .....

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

 Yes  No

## 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

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 .....

► \_\_\_\_\_  
► \_\_\_\_\_

**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 noncash assistance
FELLOWSHIP STIPENDS	11	396,235.	0.		

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

PART I, LINE 2:

BROOKINGS DOES NOT ISSUE GRANTS TO OTHER ORGANIZATIONS. BROOKINGS DOES

ISSUE FELLOWSHIP STIPENDS TO INDIVIDUALS. THESE DISBURSEMENTS ARE

MONITORED AS THE INDIVIDUALS ARE GENERALLY RESIDENTS AT BROOKINGS AND THEIR

WORK IS SUPERVISED BY THEIR BROOKINGS ADVISOR.

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

Department of the Treasury  
Internal Revenue Service

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**

Open to Public  
Inspection

Name of the organization

THE BROOKINGS INSTITUTION

Employer identification number

53-0196577

**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 type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input 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 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 checked="" type="checkbox"/> Compensation survey or study
<input checked="" 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)? .....

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

Schedule J (Form 990) 2019

**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) JOHN ALLEN PRESIDENT	(i) 809,355.	164,800.	69,033.	52,100.	24,872.	1,120,160.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
(2) TED GAYER EXECUTIVE VICE PRESIDENT	(i) 428,724.	31,000.	20,744.	52,100.	3,746.	536,314.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
(3) WILLIAM G. GALE SR FELLOW & DIR, TAX POLICY EFF 6/1/	(i) 413,996.	20,850.	18,114.	33,600.	22,350.	508,910.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
(4) DARRELL M. WEST VP & DIR OF GOVERNANCE STUDIES	(i) 333,867.	20,000.	10,114.	41,965.	24,656.	430,602.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
(5) CATHERINE A. PIEZ CHIEF INVESTMENT OFFICER	(i) 327,928.	8,000.	7,365.	33,600.	25,257.	402,150.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
(6) AMY LIU WITMER VP & DIR, METROPOLITAN POLICY	(i) 328,950.	15,800.	6,900.	40,275.	866.	392,791.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
(7) IRENA BARISIC VP, CFO, ASST TREASURER	(i) 314,032.	20,000.	5,253.	38,718.	6,017.	384,020.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
(8) STEPHANIE R. AARONSON VP & DIR OF ECONOMIC STUDIES	(i) 306,232.	15,800.	5,065.	38,320.	11,057.	376,474.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
(9) N. STROBE TALBOTT FORMER PRESIDENT, DIST. FELLOW THRU	(i) 300,358.	0.	4,267.	33,600.	24,656.	362,881.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
(10) DAVID WESSEL SR FELLOW & DIR, HUTCHINS EFF 2/1/20	(i) 293,848.	5,000.	3,991.	33,600.	26,675.	363,114.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
(11) HOMI J. KHARAS INTERIM VP GLOBAL THRU 5/31/2020	(i) 301,493.	10,000.	4,441.	33,600.	3,746.	353,280.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
(12) BRUCE JONES VP & DIR, FOREIGN POLICY THRU 1/31/2	(i) 291,623.	0.	4,560.	36,000.	7,848.	340,031.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
(13) MARTIN BAILY SENIOR FELLOW	(i) 254,944.	10,450.	927.	31,744.	26,128.	324,193.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
(14) KEMAL DERVIS SENIOR FELLOW	(i) 280,870.	0.	1,489.	33,600.	3,746.	319,705.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
(15) JACQUELINE BASILE VP & CHIEF HUMAN RESOURCES OFFICER	(i) 262,608.	20,000.	645.	31,513.	866.	315,632.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
(16) MICHAEL CAVADEL VP, GEN COUNSEL, ASST SECRETARY	(i) 221,725.	10,800.	4,852.	28,275.	27,714.	293,366.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.

**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.

**Part III Supplemental Information**

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

PART I, LINE 4A:

DAVID PORTER RECEIVED SEVERANCE PAYMENT IN THE AMOUNT OF \$125,000 AND THE

AMOUNT IS REPORTED IN SCHEDULE J, PART II, COLUMN B(III).

PART I, LINE 7:

BONUSES ARE DISCRETIONARY AND ARE BASED ON INSTITUTIONAL AFFORDABILITY, AS

DETERMINED ANNUALLY BY THE PRESIDENT.

**SCHEDULE K**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information on Tax-Exempt Bonds**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.  
► Attach to Form 990. ► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**

Open to Public  
Inspection

Name of the organization

THE BROOKINGS INSTITUTION

Employer identification number  
53-0196577

**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
DISTRICT OF COLUMBIA, VARIABLE RATE A REVENUE BONDS SERIES 2020	53-6001131	NONE	05/21/20	44,952,570.	MODIFICATION OF 2015 SERIES BOND		X		X		X
B											
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 .....	44,952,570.			
4 Gross proceeds in reserve funds .....				
5 Capitalized interest from proceeds .....				
6 Proceeds in refunding escrows .....				
7 Issuance costs from proceeds .....	330,000.			
8 Credit enhancement from proceeds .....				
9 Working capital expenditures from proceeds .....				
10 Capital expenditures from proceeds .....				
11 Other spent proceeds .....	44,622,570.			
12 Other unspent proceeds .....				
13 Year of substantial completion .....				
	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		
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			
16 Has the final allocation of proceeds been made? .....	X			
17 Does the organization maintain adequate books and records to support the final allocation of proceeds? .....	X			

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

Schedule K (Form 990) 2019

**Part III Private Business Use**

	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						
2 Are there any lease arrangements that may result in private business use of bond-financed property? .....	X							
3a Are there any management or service contracts that may result in private business use of bond-financed property? .....	X							
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? .....	X							
c Are there any research agreements that may result in private business use of bond-financed property? .....		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 .....		.90	%					%
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 .....		.00	%					%
6 Total of lines 4 and 5 .....		.90	%					%
7 Does the bond issue meet the private security or payment test? .....		X						
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued? .....		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							

**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						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet? .....	X							
b Exception to rebate? .....		X						
c No rebate due? .....		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							

## Part IV Arbitrage (continued)

4a	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
		X						
b Name of provider .....								
c Term of hedge .....								
d Was the hedge superintegrated? .....								
e Was the hedge terminated? .....								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)? .....		X						
b Name of provider .....								
c Term of GIC .....								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? .....								
6 Were any gross proceeds invested beyond an available temporary period? .....		X						
7 Has the organization established written procedures to monitor the requirements of section 148? .....	X							

## Part V Procedures To Undertake Corrective Action

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable regulations?	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
	X							

**Part VI** **Supplemental Information.** Provide additional information for responses to questions on Schedule K. See instructions

**SCHEDULE M**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

OMB No. 1545-0047

**2019**

**Open to Public  
Inspection**

Name of the organization

THE BROOKINGS INSTITUTION

Employer identification number

53-0196577

**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 .....				
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	14	1,791,863	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 ► ( _____ )				
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	

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? .....

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? .....

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? .....

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.

	Yes	No
30a		X
31	X	
32a		X

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

Schedule M (Form 990) 2019

## 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.

SCHEDULE M, PART I, COLUMN (B):

#### USING A COMBINATION OF THE TWO METHODS ABOVE

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

Department of the Treasury  
Internal Revenue Service

**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.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

Open to Public  
Inspection

Name of the organization

THE BROOKINGS INSTITUTION

Employer identification number

53-0196577

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

TO CONDUCT IN-DEPTH, INDEPENDENT RESEARCH THAT LEADS TO NEW IDEAS FOR

IMPROVING, GOVERNANCE AND SOLVING PROBLEMS FACING SOCIETY AT THE LOCAL,

NATIONAL AND GLOBAL LEVEL.

FORM 990, PAGE 2, PART III, MISSION STATEMENT

THE BROOKINGS INSTITUTION (BROOKINGS) IS A NONPROFIT PUBLIC POLICY

ORGANIZATION THAT CONDUCTS IN-DEPTH, INDEPENDENT RESEARCH WITH THE GOAL

OF IMPROVING GOVERNANCE AND SOLVING PROBLEMS FACING SOCIETY AT THE

LOCAL, NATIONAL AND GLOBAL LEVEL. BROOKINGS ACHIEVES IMPACT BY

PROVIDING POLICY ANALYSIS AND RECOMMENDATIONS ON PRESSING POLICY

CHALLENGES, WHICH ARE DISSEMINATED THROUGH REPORTS, BOOKS, MEDIA

APPEARANCES, OP-EDS, BLOG POSTS, CONGRESSIONAL TESTIMONY, PUBLIC AND

PRIVATE EVENTS, AND OPINION PIECES POSTED ON BROOKINGS'S WEBSITE, AS

WELL AS BRIEFINGS FOR POLICYMAKERS AND THEIR STAFFS. BROOKINGS HAS

OVERSEAS CENTERS IN QATAR AND CHINA. ON APRIL 2, 2020, BROOKINGS

ANNOUNCED ITS DECISION TO TRANSITION ITS RELATIONSHIP WITH THE

BROOKINGS INSTITUTION INDIA CENTER (BIIC), AN INDEPENDENT RESEARCH

ENTITY IN NEW DELHI, INDIA. THE FINANCIAL SEPARATION WAS EFFECTIVE AS

OF MARCH 31, 2020, WHILE ALL OTHER CHANGES WILL NEED TO BE IMPLEMENTED

BY SEPTEMBER 11, 2020, WHEN BIIC WILL CEASE TO EXIST AND THE NEW

INDEPENDENT CENTER WILL BE CALLED THE CENTER FOR SOCIAL AND ECONOMIC

PROGRESS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

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

Schedule O (Form 990 or 990-EZ) (2019)

Name of the organization

THE BROOKINGS INSTITUTION

Employer identification number

53-0196577

SCHOLARSHIP IN FY2020, ECONOMIC STUDIES HELD OVER 98 EVENTS BOTH PUBLIC

AND PRIVATE, AND SCHOLARS ALSO SPOKE AT 55 EXTERNAL EVENTS, WROTE 271

OP-EDS AND BLOGS, PRODUCED 168 REPORTS AND RESEARCH PAPERS, PUBLISHED 3

BOOKS, TESTIFIED ON CAPITOL HILL 4 TIMES, AND WERE CITED OR INTERVIEWED

IN 2,830 MEDIA STORIES WHICH WERE SYNDICATED 10,157 TIMES.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

INTELLIGENCE, ENERGY SECURITY, AND ARMS CONTROL, TO CHINA AND SAUDI

ARABIA. THEY HAVE ALSO WRITTEN OR CONTRIBUTED TO ARTICLES IN EVERY

MAJOR NEWS OUTLET IN THE UNITED STATES AND AT LEAST 20 OTHER COUNTRIES,

INCLUDING THE NEW YORK TIMES, WALL STREET JOURNAL, WASHINGTON POST, USA

TODAY, POLITICO, LA TIMES, HUFFINGTON POST, TIME, FOREIGN AFFAIRS, VOX,

NATIONAL INTEREST, FINANCIAL TIMES, THE NEW YORKER, AND THE ECONOMIST.

FOREIGN POLICY SCHOLARS HAVE ALSO OFFERED ANALYSIS FOR NEWS OUTLETS

FROM ACROSS THE POLITICAL SPECTRUM, INCLUDING FOX NEWS, MSNBC, CNN,

BBC, AL JAZEERA, CNBC, NPR, PBS NEWSHOUR, AND A RANGE OF INTERNATIONAL

OUTLETS. IN ADDITION TO THESE PUBLIC APPEARANCES, SINCE JANUARY OUR

SCHOLARS HAVE PROVIDED DOZENS OF POLICY BRIEFINGS TO KEY STAKEHOLDERS

IN THE UNITED STATES AND ALLIED CAPITALS AROUND THE WORLD. FOREIGN

POLICY'S EVENT PROGRAMMING HAS INVOLVED CONVERSATIONS WITH U.S. CABINET

OFFICIALS, TOP DECISION MAKERS FROM OVERSEAS, MEMBERS OF CONGRESS, AND

MILITARY LEADERS; AUDIENCES ONLINE OFTEN NUMBER IN THE THOUSANDS AND

INCLUDE MEMBERS OF THE MEDIA. FINALLY, FOREIGN POLICY SCHOLARS HAVE

RECENTLY PUBLISHED WIDELY ACCLAIMED BOOKS, INCLUDING ON NORTH KOREAN

LEADER KIM JONG-UN AND ON THE DIPLOMATIC HISTORY OF INDIA-U.S.-CHINA

RELATIONS.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

Name of the organization THE BROOKINGS INSTITUTION	Employer identification number 53-0196577
---	--

WORKS OF SCHOLARSHIP IN FY 2020, GLOBAL ECONOMY AND DEVELOPMENT HELD

NUMEROUS EVENTS OPEN TO THE GENERAL PUBLIC BOTH IN-PERSON AND

VIRTUALLY.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

GOVERNANCE STUDIES:

THE GOVERNANCE STUDIES PROGRAM BRINGS TOGETHER PEOPLE INTERESTED IN

IMPROVING THE PERFORMANCE OF GOVERNING INSTITUTIONS AND BETTERING THE

ECONOMIC SECURITY, SOCIAL WELFARE, AND OPPORTUNITY AVAILABLE TO ALL

AMERICANS. GOVERNANCE STUDIES SCHOLARS GENERATE IDEAS THAT WILL

STRENGTHEN DEMOCRACY, INCREASE INSTITUTIONAL CAPACITY, SUSTAIN THE RULE

OF LAW, AND ADDRESS MAJOR DOMESTIC POLICY ISSUES FROM EDUCATION AND

HEALTHCARE TO DIGITAL TECHNOLOGY. IN FISCAL YEAR 2020, GOVERNANCE

STUDIES EXPERTS FOCUSED ON RESEARCH ABOUT CAMPAIGNS AND ELECTIONS AND

EXAMINED THE IMPACTS OF VOTER SUPPRESSION, THE ROLE OF NATIONAL

SECURITY AND LAW ENFORCEMENT, AND THE IMPORTANCE OF BIPARTISAN

GOVERNMENT OVERSIGHT, ALONG WITH COMMENTING ON THE NUANCES OF FEDERAL

FUNCTIONS AND PROCEDURAL RULEMAKING. THROUGH OUR RACE, PROSPERITY, AND

INCLUSION INITIATIVE, EXPERTS SURFACED COMMENTARY ON ISSUES RELATED TO

RACIAL JUSTICE INCLUDING POLICING, RACIAL AND ECONOMIC EQUITY, BIAS IN

TECHNOLOGY AND THE DIGITAL DIVIDE. THEY ALSO COMMENTED ON AND BROUGHT

TOGETHER EXPERTS TO DISCUSS THE IMPLICATIONS OF VARIOUS TECHNOLOGICAL

AND PRIVACY ISSUES, SUCH AS FEDERAL PRIVACY LEGISLATION, BROADBAND

ACCESS, AND EMERGING TECHNOLOGIES SUCH AS FACIAL RECOGNITION AND SMART

TRANSPORTATION. IN ADDITION TO PUBLISHING NUMEROUS WORKS OF WRITTEN

SCHOLARSHIP IN FY 2020, GOVERNANCE STUDIES HELD OVER 45 EVENTS OPEN TO

THE GENERAL PUBLIC ON THESE, AND OTHER, TIMELY TOPICS.

EXPENSES \$ 9,721,121. INCLUDING GRANTS OF \$ 70,835. REVENUE \$ 32,510.

Name of the organization

THE BROOKINGS INSTITUTION

Employer identification number

53-0196577

---

METROPOLITAN POLICY:

---

THE BROOKINGS METROPOLITAN POLICY PROGRAM'S (BROOKINGS METRO) MISSION

---

IS TO DELIVER RESEARCH AND SOLUTIONS THAT HELP METROPOLITAN LEADERS

---

BUILD AN ADVANCED ECONOMY THAT WORKS FOR ALL. DURING FY20, UNITED

---

STATES POLITICAL LEADERS CONFRONTED THREE UNPRECEDENTED CRISES ROILING

---

THE NATION: THE GLOBAL COVID-19 PANDEMIC, A RECESSION THAT HAS LEFT 30

---

MILLION AMERICANS UNEMPLOYED, AND A SERIES OF KILLINGS THAT HAVE

---

FOCUSED THE NATION ON LONG-STANDING ISSUES OF RACIAL INJUSTICE.

---

BROOKINGS METRO HAS STOOD AT THE VANGUARD OF ADDRESSING THESE PROBLEMS,

---

WORKING CLOSELY WITH LOCAL POLICYMAKERS IN SEVERAL CITIES AND

---

METROPOLITAN AREAS AND IN OVER A DOZEN STATES. BROOKINGS METRO

---

STRENGTHENED ITS RESEARCH AND ANALYSIS, LISTENED TO UNDERREPRESENTED

---

VOICES, AND MOBILIZED NETWORKS TO TRANSLATE EVIDENCE AND IDEAS INTO

---

TANGIBLE SOLUTIONS THAT ADDRESS THE GREATEST CHALLENGES OF OUR TIME.

---

IN FY20, BROOKINGS METRO PUBLISHED MORE RESEARCH AND THOUGHT LEADERSHIP

---

CONTENT THAN EVER BEFORE, INCLUDING 159 BLOG POSTS AND 89 MAJOR

---

REPORTS, RESEARCH BRIEFS, AND INTERACTIVE DATA VISUALIZATIONS. NOTABLY,

---

BROOKINGS METRO LAUNCHED THE PROGRAM'S COMPREHENSIVE THOUGHT LEADERSHIP

---

PORTAL THE COVID-19 METRO RECOVERY WATCH FOCUSED ON PROVIDING ECONOMIC

---

PERFORMANCE DATA AND RECOVERY CASE STUDIES FOR STATE AND LOCAL LEADERS

---

ACROSS THE COUNTRY. BROOKINGS METRO PROMOTED ITS SCHOLARSHIP WIDELY

---

ACROSS SOCIAL MEDIA, NEWSLETTERS, PODCASTS, AND VIDEOS, AND SAW ITS

---

READERSHIP SKYROCKET DURING FY20. BROOKINGS METRO ALSO WORKED WITH

---

STRATEGIC PARTNERS TO HOST 19 PUBLIC EVENTS (IN PERSON PRIOR TO THE

---

PANDEMIC AND VIRTUALLY SINCE) IN WASHINGTON, D.C. AND IN CITIES ACROSS

---

THE COUNTRY, AND PARTICIPATED IN ROUNDTABLES, MEETINGS, PUBLIC FORUMS,

---

Name of the organization

THE BROOKINGS INSTITUTION

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AND CONFERENCES HELD BY OTHER ORGANIZATIONS TO DISCUSS OUR RESEARCH AND  
POLICY RECOMMENDATIONS.

BROOKINGS METRO'S RESEARCH AND ANALYSIS RECEIVED TRACTION WITH  
IMPORTANT POLICY AUDIENCES, BOTH FEDERAL AND LOCAL. TWO SENATE BILLS  
HAVE BEEN DRAFTED THAT DRAW HEAVILY ON BROOKINGS METRO RESEARCH. THE  
METRO RECOVERY INDEX AN INTERACTIVE DATA TOOL WITHIN THE COVID-19 METRO  
RECOVERY WATCH THAT CONGREGATES ECONOMIC PERFORMANCE INDICATORS FOR THE  
NATION'S LARGEST METRO AREAS TO MEASURE THE PANDEMIC'S EFFECTS RECEIVED  
COVERAGE BOTH IN NATIONAL AND LOCAL NEWS OUTLETS. BROOKINGS METRO'S  
ONGOING DEMOGRAPHIC ANALYSES GENERATED SUBSTANTIAL DISCOURSE IN OUTLETS  
SUCH AS THE WASHINGTON POST AND THE ATLANTIC ON THE PANDEMIC'S  
EVER-CHANGING POLITICAL RAMIFICATIONS DURING ELECTION SEASON. AGAINST  
THE BACKDROP OF A PANDEMIC, GEORGE FLOYD'S DEATH AT THE HANDS OF POLICE  
AND THE WIDESPREAD UNREST THAT ENSUED PLACED BROOKINGS METRO'S RESEARCH  
AND ANALYSIS ON INCLUSIVE ECONOMIC GROWTH AND RACIAL EQUITY IN THE  
NATIONAL NEWS.

EXPENSES \$ 8,408,118. INCLUDING GRANTS OF \$ 0. REVENUE \$ 193,892.

INSTITUTIONAL INITIATIVES:

INCLUDES RESEARCH INITIATIVES UNDERTAKEN OR SUPERVISED BY THE EXECUTIVE  
OFFICE, AND CROSS-PROGRAM RESEARCH EFFORTS, INCLUDING THE ARTIFICIAL  
INTELLIGENCE AND EMERGING TECHNOLOGIES INITIATIVE, DAVID M. RUBENSTEIN  
FELLOWSHIP PROGRAM, THREE OVERSEAS CENTERS, AND THE BROOKINGS MOUNTAIN  
WEST INITIATIVE.

THE ARTIFICIAL INTELLIGENCE AND EMERGING TECHNOLOGY (AIET) INITIATIVE  
LOOKS TO ADVANCE GOOD GOVERNANCE OF TRANSFORMATIVE TECHNOLOGIES AT THE

Name of the organization

THE BROOKINGS INSTITUTION

Employer identification number

53-0196577

GLOBAL, NATIONAL, AND LOCAL LEVELS SO THAT MULTIPLE SECTORS OF SOCIETY

CAN RESPONSIBLY SCALE AND MANAGE ITS FULL EFFECTS. THIS YEAR BROOKINGS

LAUNCHED SEVERAL WORKSTREAMS EACH DESIGNED TO TRACK AND INFORM PRESSING

QUESTIONS AT THE INTERSECTION OF TECHNOLOGY AND POLICY IN NEAR

REAL-TIME. THESE INCLUDE AI GOVERNANCE, AI AND BIAS, AND AI AND

NATIONAL SECURITY.

THE RUBENSTEIN FELLOWSHIP IS A TWO-YEAR FELLOWSHIP THAT BRINGS A

DIVERSE GROUP OF RISING STARS TO THE BROOKINGS COMMUNITY, STRENGTHENING

THE BREADTH OF OUR RESEARCH AND PERSPECTIVES IN KEY AREAS OF POLICY.

THIS YEAR BROOKINGS BROUGHT ON ITS SECOND COHORT OF FELLOWS.

BROOKINGS'S OVERSEAS OFFICES IN BEIJING, DOHA, AND DELHI PROVIDE

INSTITUTIONAL PLATFORMS FOR ENGAGEMENT INCLUDING POLICY RESEARCH ON

ECONOMIC, POLITICAL AND SOCIAL ISSUES. ON APRIL 2, 2020, BROOKINGS

ANNOUNCED ITS DECISION TO TRANSITION ITS RELATIONSHIP WITH THE

BROOKINGS INSTITUTION INDIA CENTER (BIIC), AN INDEPENDENT RESEARCH

ENTITY IN NEW DELHI. BIIC WAS ESTABLISHED IN 2013, IN ACCORDANCE WITH

INDIAN LAW, AS AN INDEPENDENT ENTITY AFFILIATED WITH BROOKINGS.

BROOKINGS IS PROUD OF THE TREMENDOUS IMPACT THAT BIIC SCHOLARS HAVE

WITHIN INDIA AND AROUND THE WORLD. INDIA REMAINS A CRUCIAL AREA OF

RESEARCH AND INTEREST FOR BROOKINGS, AND OUR SCHOLARS AND AFFILIATES

WILL CONTINUE TO ADVANCE THEIR IMPORTANT WORK ON INDIA POLICY ACROSS A

RANGE OF SECTORS. THE FINANCIAL SEPARATION WAS EFFECTIVE AS OF MARCH

31, 2020, WHILE ALL OTHER CHANGES WILL NEED TO BE IMPLEMENTED BY

SEPTEMBER 11, 2020, WHEN BIIC WILL CEASE TO EXIST AND THE NEW

INDEPENDENT CENTER WILL BE CALLED THE CENTER FOR SOCIAL AND ECONOMIC

PROGRESS.

Name of the organization THE BROOKINGS INSTITUTION	Employer identification number 53-0196577
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THE BROOKINGS MOUNTAIN WEST INITIATIVE IS A PARTNERSHIP BETWEEN

BROOKINGS AND THE UNIVERSITY OF NEVADA, LAS VEGAS (UNLV), IN WHICH

BROOKINGS SCHOLARS FROM ALL FIVE RESEARCH PROGRAMS ENGAGE WITH STUDENTS

AND FACULTY TO WORK ON INNOVATIVE POLICY SOLUTIONS FOR THE CITY,

REGION, NATION, AND BEYOND. THROUGH THE BROOKINGS CURRICULUM AT

UNIVERSITY OF NEVADA, LAS VEGAS AND THE BROOKINGS MINOR, STUDENTS

RECEIVE DETAILED INSTRUCTION ON HOW THE PUBLIC POLICY AGENDA IS SET,

HOW MAJOR PUBLIC DEBATES ARE SHAPED, AND HOW POLICY DETAILS ARE

DESIGNED AND IMPLEMENTED. THIS YEAR, NINE BROOKINGS SCHOLARS VISITED

UNLV TO TEACH COURSES AND ENGAGE WITH THE UNLV COMMUNITY.

EXPENSES \$ 6,031,973. INCLUDING GRANTS OF \$ 444,752. REVENUE \$ 0.

BROOKINGS PRESS:

THE BROOKINGS PRESS PUBLISHES PUBLIC POLICY RESEARCH FROM BROOKINGS'

OWN SCHOLARS AS WELL AS OTHER AUTHORS. THESE PUBLICATIONS PROVIDE

EXTENSIVE BACKGROUND AND INSIGHT ON IMPORTANT PUBLIC POLICY ISSUES IN

BUSINESS, ECONOMICS, GOVERNMENT AND INTERNATIONAL AFFAIRS.

EXPENSES \$ 1,470,020. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,491,197.

COMMUNICATIONS AND WEB:

THE COMMUNICATIONS DEPARTMENT DISSEMINATES INFORMATION ABOUT BROOKINGS,

ITS SCHOLARS AND RESEARCH, AND THE ARRAY OF RESOURCES THAT BROOKINGS

OFFERS. COMMUNICATIONS OVERSEES THE COMMENTARY AND ANALYSIS THAT APPEAR

ON THE BROOKINGS' WEBSITE (WWW.BROOKINGS.EDU) AND THAT ARE DISTRIBUTED

THROUGH BROOKINGS'S SOCIAL MEDIA CHANNELS AND OTHER DIGITAL COMPONENTS

OF OUTREACH AND EDUCATION. THE DEPARTMENT SUPPORTS THE RESEARCH

PROGRAMS BY PROVIDING VIDEO, GRAPHIC DESIGN AND OTHER MULTIMEDIA

Name of the organization THE BROOKINGS INSTITUTION	Employer identification number 53-0196577
---	--

SERVICES, AND INTERACTS WITH MEDIA FOR THE PURPOSES OF ARRANGING

INTERVIEWS AND REPUBLISHING CONTENT. IT ALSO HOUSES THE ORGANIZATION'S

PUBLISHING HOUSE, BROOKINGS INSTITUTION PRESS.

EXPENSES \$ 1,676,668. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES HAS APPOINTED THE AUDIT

COMMITTEE OF THE BOARD AS THE RESPONSIBLE BOARD PARTY FOR REVIEWING THE

FORM 990 AND 990T EACH YEAR STARTING WITH THE FISCAL YEAR ENDED JUNE 30,

2009.

ONCE THE FORM HAS BEEN COMPLETED IT IS REVIEWED INTERNALLY BY THE

PRESIDENT, THE CHIEF FINANCIAL OFFICER, THE GENERAL COUNSEL, AND OTHER

MEMBERS OF THE SENIOR STAFF, ALONG WITH THE AUDIT COMMITTEE.

ONCE THOSE REVIEWS ARE COMPLETED AND THE DOCUMENT HAS BEEN APPROVED, IT IS

SENT TO ALL VOTING MEMBERS OF THE BOARD OF TRUSTEES BEFORE IT IS FILED WITH

THE INTERNAL REVENUE SERVICE.

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

EACH YEAR, BROOKINGS PERSONNEL ARE REQUIRED TO COMPLETE A DISCLOSURE AND

ACKNOWLEDGMENT FORM RELATED TO THE INSTITUTION'S CONFLICT OF INTEREST

POLICY. SPECIFICALLY, ALL EMPLOYEES AND RESIDENT AFFILIATES ARE REQUIRED

TO:

- ACKNOWLEDGE THAT THEY HAVE READ, UNDERSTOOD, AND ARE COMMITTED TO ABIDING

BY THE INSTITUTION'S CONFLICT OF INTEREST POLICY AS WELL AS CERTAIN OTHER

INSTITUTIONAL POLICIES; AND

- MAKE CERTAIN DISCLOSURES ABOUT THEIR OUTSIDE ACTIVITIES AND FINANCES TO

Name of the organization

THE BROOKINGS INSTITUTION

Employer identification number

53-0196577

HELP IDENTIFY CONFLICTS OF INTEREST.

ALL FORMS ARE SUBMITTED TO THE OFFICE OF THE GENERAL COUNSEL, WHICH REVIEWS

THEM AND HAS DISCRETION TO MAKE RECOMMENDATIONS OR RAISE CONCERNs WITH

RELEVANT INDIVIDUALS AS APPROPRIATE.

THE BOARD OF TRUSTEES IS REQUIRED TO COMPLETE AN ANNUAL QUESTIONNAIRE AND

CONFLICT OF INTEREST AFFIRMATION THAT:

- CONFIRMS THEIR RECEIPT, UNDERSTANDING, AND COMPLIANCE WITH THE

INSTITUTION'S POLICY STATEMENT ON TRUSTEE AND NON-TRUSTEE COMMITTEE MEMBER

CONFLICT OF INTEREST AND THE INVESTMENT CONFLICT OF INTEREST POLICY, AMONG

OTHER INSTITUTIONAL POLICIES; AND

- DISCLOSES RELEVANT INFORMATION ABOUT THEIR FAMILY AND BUSINESS

RELATIONSHIPS, TRANSACTIONS AND LOANS, AND OTHER RELEVANT RELATIONSHIPS

WITH BROOKINGS.

ISSUES INVOLVING CONFLICTS OF INTEREST ARE RESOLVED BY THE GENERAL COUNSEL,

IN CONSULTATION WITH OTHER MEMBERS OF SENIOR MANAGEMENT, AS APPROPRIATE.

THE GENERAL COUNSEL REGULARLY CONFERS WITH THE CHAIR OF THE AUDIT COMMITTEE

REGARDING THE INSTITUTION'S CONFLICT OF INTEREST POLICY AND OTHER CONFLICT

OF INTEREST ISSUES. CONFLICT OF INTEREST ISSUES INVOLVING TRUSTEES MAY BE

REFERRED TO THE AUDIT COMMITTEE CHAIR, THE FULL AUDIT COMMITTEE, AND/OR THE

BOARD CO-CHAIRS, AS APPROPRIATE.

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

THE INSTITUTION'S BYLAWS PROVIDE FOR A COMPENSATION COMMITTEE CONSISTING OF

NOT FEWER THAN FIVE TRUSTEES, INCLUDING THE CHAIR (OR CO-CHAIRS) OF THE

BOARD OF TRUSTEES, AND AT LEAST THREE OTHER TRUSTEES WHO SHALL BE

Name of the organization THE BROOKINGS INSTITUTION	Employer identification number 53-0196577
---	--

NOMINATED BY THE CHAIR (OR CO-CHAIRS) OF THE BOARD AND DETERMINED BY THE  
BOARD TO BE FREE OF ANY CONTRACTUAL OR OTHER RELATIONSHIPS THAT WOULD PUT  
INTO QUESTION THE EXERCISE OF HIS OR HER INDEPENDENT JUDGMENT.

THE COMPENSATION COMMITTEE HAS THE AUTHORITY TO SET THE SALARY OF THE  
PRESIDENT AND SUCH OTHER OFFICERS, MANAGERS, OR EMPLOYEES AS THE EXECUTIVE  
COMMITTEE OR AUDIT COMMITTEE RECOMMENDS BE SET BY THE COMPENSATION  
COMMITTEE AND IN ACCORDANCE WITH ANY BOARD-ADOPTED COMPENSATION POLICY. IN  
SETTING SUCH SALARIES, THE COMPENSATION COMMITTEE ASKS THE VICE PRESIDENT,  
CHIEF HUMAN RESOURCES OFFICER TO GATHER RELEVANT SALARY COMPARABILITY DATA  
AND RECORD COMMITTEE MINUTES WHICH CLEARLY DOCUMENT THE COMMITTEE'S  
DECISIONS AND THE RATIONALE UNDERLYING SUCH DECISIONS. THE COMMITTEE USES  
AN OUTSIDE CONSULTANT TO ESTABLISH SALARY COMPARABLES AND TO DETERMINE THE  
REASONABLENESS OF THE COMPENSATION RECEIVED BY ALL DISQUALIFIED PERSONNEL.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AR, CA, FL, GA, HI, IL, KS, KY, MA, MD, MI, MS, MN, NC, NJ, NH, NM, NY, OR, PA, RI, SC, TN, UT  
VA, WI, WV, ND

FORM 990, PART VI, SECTION C, LINE 19:

BROOKINGS MAKES THE RELEVANT DOCUMENTS AVAILABLE TO THE PUBLIC AS FOLLOWS:  
- BROOKINGS'S CONFLICT OF INTEREST POLICY, AS WELL AS SUMMARIES OF OTHER  
KEY POLICIES ARE AVAILABLE ON ITS WEBSITE;  
- BROOKINGS'S AUDITED FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON ITS  
WEBSITE; AND  
- BROOKINGS'S WEBSITE PROVIDES A LINK TO GUIDESTAR.ORG TO PROVIDE THE FORM  
990.

Name of the organization THE BROOKINGS INSTITUTION	Employer identification number 53-0196577
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## FORM 990, PART IX, LINE 11G, OTHER FEES:

## CONTACTS/PROFESSIONAL SERVICES:

PROGRAM SERVICE EXPENSES	7,353,325.
MANAGEMENT AND GENERAL EXPENSES	1,685,748.
FUNDRAISING EXPENSES	53,313.
<b>TOTAL EXPENSES</b>	<b>9,092,386.</b>

## QUALIFIED SUBCONTACTS:

PROGRAM SERVICE EXPENSES	2,353,222.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
<b>TOTAL EXPENSES</b>	<b>2,353,222.</b>

## TEMPORARY HELP:

PROGRAM SERVICE EXPENSES	595,947.
MANAGEMENT AND GENERAL EXPENSES	457,300.
FUNDRAISING EXPENSES	63,419.
<b>TOTAL EXPENSES</b>	<b>1,116,666.</b>
<b>TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A</b>	<b>12,562,274.</b>

## FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

GAIN/(LOSS) ON FOREIGN CURRENCY EXCHANGE	-17,347.
EFFECT OF ADOPTION PROVISIONS SFAS NO. 158	-40,000.
LOSS ON BOND DEBT RE-FINANCING	-274,787.
WRITE OFF INDIA PLC SHARES	-9,530.
WRITE OFF INDIA PLC DUE FROM INDIA	-39,564.
<b>TOTAL TO FORM 990, PART XI, LINE 9</b>	<b>-381,228.</b>

## Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information

2019

**Open to Public  
Inspection**

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THE BROOKINGS INSTITUTION

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**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33

**Part II** **Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

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

Schedule R (Form 990) 2019

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

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

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

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....
- b** Gift, grant, or capital contribution to related organization(s) .....
- c** Gift, grant, or capital contribution from related organization(s) .....
- d** Loans or loan guarantees to or for related organization(s) .....
- e** Loans or loan guarantees by related organization(s) .....
- f** Dividends from related organization(s) .....
- g** Sale of assets to related organization(s) .....
- h** Purchase of assets from related organization(s) .....
- i** Exchange of assets with related organization(s) .....
- j** Lease of facilities, equipment, or other assets to related organization(s) .....
- k** Lease of facilities, equipment, or other assets from related organization(s) .....
- l** Performance of services or membership or fundraising solicitations for related organization(s) .....
- m** Performance of services or membership or fundraising solicitations by related organization(s) .....
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....
- o** Sharing of paid employees with related organization(s) .....
- p** Reimbursement paid to related organization(s) for expenses .....
- q** Reimbursement paid by related organization(s) for expenses .....
- r** Other transfer of cash or property to related organization(s) .....
- s** Other transfer of cash or property from related organization(s) .....

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

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

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

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

## **Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.