

Return of Organization Exempt From Income Tax

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

2022

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Header section A-M containing organization details: THE SALK INSTITUTE FOR BIOLOGICAL STUDIES, EIN 95-2160097, 10010 N TORREY PINES ROAD, LA JOLLA, CA 92037-1002.

Part I Summary

Table with 4 columns: Line number, Description, Prior Year, Current Year. Rows include Revenue (8-12), Expenses (13-19), and Net Assets or Fund Balances (20-22).

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.

Signature of officer: Kimberley M Castillo, CFO, dated 05/08/2024.

Paid Preparer Use Only section: Preparer Steven T. Rutti, Ernst & Young US LLP, dated 05/08/2024.

May the IRS discuss this return with the preparer shown above? See instructions. [X] 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 Yes No

1 Briefly describe the organization's mission:
INVOLVED IN RESEARCH ACTIVITIES, THE OBJECTIVES OF WHICH ARE THE ADVANCEMENT AND DISSEMINATION
OF KNOWLEDGE RELEVANT TO THE HEALTH AND WELLBEING OF HUMANKIND. THE OBJECTIVES ARE MET PRIMARILY
THROUGH RESEARCH AND ADVANCED INSTRUCTION IN (A) BIOLOGY, (B) THE CAUSE, PREVENTION AND CURE OF
(CONTINUED ON 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 \$ 138,470,686 including grants of \$ 0) (Revenue \$ 0)
SEE SCHEDULE O

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

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

4d Other program services (Describe on Schedule O.)
(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses 138,470,686

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<input type="checkbox"/>	<input type="checkbox"/>
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>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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? <i>If "Yes," complete Schedule I, Parts I and III</i>		✓
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? <i>If "Yes," complete Schedule J</i>	✓	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		✓
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		✓
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? <i>If "Yes," complete Schedule L, Part I</i>		✓
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or 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? <i>If "Yes," complete Schedule L, Part II</i>	✓	
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 employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		✓
28 Was the organization a party to a business transaction with one of the following parties (see the 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? <i>If "Yes," complete Schedule L, Part IV</i>		✓
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		✓
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		✓
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	✓	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		✓
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		✓
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		✓
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? <i>If "Yes," complete Schedule R, Part I</i>		✓
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	✓	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	✓	
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		✓
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		✓
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? <i>If "Yes," complete Schedule R, Part VI</i>		✓
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	✓	

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		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	✓	

Part V Statements Regarding Other IRS Filings and Tax Compliance <i>(continued)</i>		Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	1,144		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		✓	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓	
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b		✓	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			✓
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		✓	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		✓	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			✓
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15			✓
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			✓
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17			

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 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.		
	1a 31		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 25		
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?		<input checked="" type="checkbox"/>
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?		<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		<input checked="" type="checkbox"/>
6	Did the organization have members or stockholders?	<input checked="" type="checkbox"/>	
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?	<input checked="" type="checkbox"/>	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<input checked="" type="checkbox"/>	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	<input checked="" type="checkbox"/>	
b	Each committee with authority to act on behalf of the governing body?	<input checked="" type="checkbox"/>	
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		<input checked="" type="checkbox"/>

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?		<input checked="" type="checkbox"/>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		<input checked="" type="checkbox"/>
b	Describe on 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	<input checked="" type="checkbox"/>	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<input checked="" type="checkbox"/>	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	<input checked="" type="checkbox"/>	
12c		<input checked="" type="checkbox"/>	
13	Did the organization have a written whistleblower policy?	<input checked="" type="checkbox"/>	
14	Did the organization have a written document retention and destruction policy?	<input checked="" type="checkbox"/>	
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	<input checked="" type="checkbox"/>	
b	Other officers or key employees of the organization	<input checked="" type="checkbox"/>	
	If "Yes" to line 15a or 15b, describe the process on 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?		<input checked="" type="checkbox"/>
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 [AK, AL, AR, AZ, \(CONTINUED ON SCHEDULE O\)](#)
- 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.
 KIMBERLY CASTILLO, 10010 N. TORREY PINES ROAD, LA JOLLA, CA 92037-1002, (858) 453-4100

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the 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 dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) FRED GAGE, PH.D. PRESIDENT (OUTGOING APRIL 2023)/PROFESSOR	50.0	✓		✓				884,422	0	53,918
(2) KIM E WITMER TREASURER/SVP FINANCE & ADMN	50.0			✓				483,502	0	46,561
(3) GERALD JOYCE, MD, PH.D. PRESIDENT (INCOMING APRIL 2023)/PROFESSOR	50.0	✓		✓				451,511	0	51,587
(4) MARTIN HETZER, PH.D. CSO (OUTGOING MARCH 2023)/PROFESSOR	50.0					✓		438,679	0	56,018
(5) REUBEN SHAW, PH.D. TRUSTEE/PROFESSOR	50.0	✓						414,745	0	48,741
(6) RONALD EVANS, PH.D. PROFESSOR	50.0					✓		427,878	0	32,096
(7) JULIA A MILLER, J.D. SECRETARY/GENERAL COUNSEL	50.0			✓				391,828	0	56,235
(8) SAMUEL PFAFF, PH.D. PROFESSOR	50.0					✓		366,432	0	55,964
(9) EDWARD CALLAWAY, PH.D. PROFESSOR	50.0					✓		354,745	0	52,713
(10) KIMBERLY CASTILLO CHIEF FINANCIAL OFFICER	50.0			✓				311,772	0	51,400
(11) DAVID LAWRENCE EXECUTIVE DIRECTOR, HPI	50.0					✓		361,608	0	1,095
(12) WOLFGANG BUSCH, PH.D. TRUSTEE/PROFESSOR	50.0	✓						306,970	0	43,076
(13) MARTYN GOULDING, PH.D. TRUSTEE/PROFESSOR	50.0	✓						266,191	0	47,114
(14) TATYANA SHARPEE, PH.D. TRUSTEE/PROFESSOR	50.0	✓						255,675	0	41,957

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) MARN A C WHITTINGTON, PH.D. CHAIR	2.0	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
(16) RICHARD A HEYMAN, PH.D. VICE CHAIR	2.0	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
(17) ALAN D GOLD TRUSTEE	0.5	<input checked="" type="checkbox"/>						0	0	0
(18) BENJAMIN H LEWIS TRUSTEE	0.5	<input checked="" type="checkbox"/>						0	0	0
(19) CAROL GALLAHER, PHARM.D. TRUSTEE	0.5	<input checked="" type="checkbox"/>						0	0	0
(20) CORINNE MENTZELOPOULOS TRUSTEE	0.5	<input checked="" type="checkbox"/>						0	0	0
(21) DANIEL C LEWIS TRUSTEE	0.5	<input checked="" type="checkbox"/>						0	0	0
(22) DANIEL TIERNEY TRUSTEE	0.5	<input checked="" type="checkbox"/>						0	0	0
(23) DAVID DOLBY TRUSTEE	0.5	<input checked="" type="checkbox"/>						0	0	0
(24) DENNIS DRIVER TRUSTEE	2.0	<input checked="" type="checkbox"/>						0	0	0
(25) (SEE STATEMENT)										
1b Subtotal								5,715,958	0	638,475
c Total from continuation sheets to Part VII, Section A								0	0	0
d Total (add lines 1b and 1c)								5,715,958	0	638,475

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 147

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

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
EAST END ADVISORS, LLC, 610 FIFTH AVENUE, SUITE 506, NEW YORK, NY 10020	INVESTMENT ADVISOR	2,736,484
UNIVERSITY OF CALIFORNIA, SAN DIEGO, 9500 GILMAN DRIVE, LA JOLLA, CA 92093	TRNG PROGRAM/SUBCONT	2,595,091
A.O. REED & CO, 4777 RUFFIN STREET, SAN DIEGO, CA 92111	CONSTRUCTION SERVICE	621,177
ISEC INCORPORATED, 6000 GREENWOOD PLAZA BLVD #200, GREENWOOD VILLAGE, CO 80111	CONSTRUCTION SERVICE	520,000
RUDOLPH & SLETTEN INC, 7584 METROPOLITAN DR STE 100, SAN DIEGO, CA 92108	CONSTRUCTION SERVICE	464,212
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	13	

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	
Contributions, Gifts, Grants, and Other Similar Amounts	1a	Federated campaigns	1a 0					
	b	Membership dues	1b 0					
	c	Fundraising events	1c 1,034,108					
	d	Related organizations	1d 0					
	e	Government grants (contributions)	1e 75,856,260					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 73,923,208					
	g	Noncash contributions included in lines 1a-1f	1g \$ 1,865,829					
	h	Total. Add lines 1a-1f						150,813,576
	Program Service Revenue							Business Code
2a				0	0	0		
b				0	0	0		
c				0	0	0	0	
d				0	0	0	0	
e				0	0	0	0	
f		All other program service revenue . .		0	0	0	0	
g		Total. Add lines 2a-2f		0				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		4,646,388	0	(1,937,670)	6,584,058	
	4	Income from investment of tax-exempt bond proceeds		0	0	0	0	
	5	Royalties		2,075,128	0	0	2,075,128	
	6a	6a						
			(i) Real	(ii) Personal				
	b	Less: rental expenses	6b					
	c	Rental income or (loss)	6c	0	0			
	d	Net rental income or (loss)		0	0	0	0	
	7a	7a						
			(i) Securities	(ii) Other				
	b	Less: cost or other basis and sales expenses	7b	158,305,327				
	c	Gain or (loss)	7c	17,117,182	0			
	d	Net gain or (loss)		17,117,182	0	0	17,117,182	
	8a	Gross income from fundraising events (not including \$ 1,034,108 of contributions reported on line 1c). See Part IV, line 18	8a	67,600				
b	Less: direct expenses	8b	900,773					
c	Net income or (loss) from fundraising events		(833,173)		0	(833,173)		
9a	9a							
b	Less: direct expenses	9b						
c	Net income or (loss) from gaming activities		0	0	0	0		
10a	10a							
b	Less: cost of goods sold	10b						
c	Net income or (loss) from sales of inventory		0	0	0	0		
Miscellaneous Revenue				Business Code				
	11a	OIL ROYALTIES	900099	1,781	0	0	1,781	
	b	IMAGE USE FEE	900099	100,000	0	100,000	0	
	c	REVENUE SHARE-HOST VEHICLE CHARGING STAT	900099	1,083	0	0	1,083	
	d	All other revenue		(269,603)	0	0	(269,603)	
e	Total. Add lines 11a-11d			(166,739)				
12	Total revenue. See instructions			173,652,362	0	(1,837,670)	24,676,456	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0	0		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	3,901,445	1,737,484	2,008,286	155,675
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	68,660,300	57,969,040	7,382,225	3,309,035
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,659,041	3,827,992	591,775	239,274
9	Other employee benefits	8,978,297	7,378,128	1,140,594	459,575
10	Payroll taxes	4,944,031	4,062,148	627,973	253,910
11	Fees for services (nonemployees):				
a	Management	245,788	45,000	200,788	0
b	Legal	1,175,992	731,698	444,294	0
c	Accounting	246,005	0	246,005	0
d	Lobbying	3,070	0	3,070	0
e	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	2,613,145	0	2,613,145	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	15,698,854	13,510,928	1,831,826	356,100
12	Advertising and promotion	25,388	6,739	9,958	8,691
13	Office expenses	725,992	209,809	474,323	41,860
14	Information technology	3,780,312	2,610,457	869,676	300,179
15	Royalties	0	0	0	0
16	Occupancy	10,289,896	7,850,311	2,028,486	411,099
17	Travel	1,155,870	998,825	103,481	53,564
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	1,539,783	1,094,142	326,874	118,767
20	Interest	304,349	0	304,349	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	11,692,449	10,664,887	930,913	96,649
23	Insurance	458,660	0	458,660	0
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	<u>SCIENTIFIC SUBCONTRACTS</u>	9,053,187	9,053,187	0	0
b	<u>RESEARCH SUPPLIES</u>	16,297,930	16,297,930	0	0
c	<u>REPAIRS & PARTS</u>	278,538	258,630	18,656	1,252
d	<u>UBI TAXES</u>	1,675	0	1,675	0
e	All other expenses	676,837	163,351	472,370	41,116
25	Total functional expenses. Add lines 1 through 24e	167,406,834	138,470,686	23,089,402	5,846,746
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

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	11,250,882	1	8,278,560
	2 Savings and temporary cash investments	22,475,096	2	24,496,644
	3 Pledges and grants receivable, net	26,741,877	3	36,602,578
	4 Accounts receivable, net	718,748	4	1,159,918
	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	1,160,629	5	409,357
	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)	0	6	0
	7 Notes and loans receivable, net	2,325,002	7	2,276,567
	8 Inventories for sale or use	15,836	8	23,735
	9 Prepaid expenses and deferred charges	2,279,897	9	1,339,293
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 292,972,954		
	b Less: accumulated depreciation	10b 218,232,880	73,224,890	10c 74,740,074
	11 Investments—publicly traded securities	80,825,357	11	145,400,000
	12 Investments—other securities. See Part IV, line 11	529,022,668	12	495,706,221
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets. See Part IV, line 11	9,786,156	15	14,822,631
16 Total assets. Add lines 1 through 15 (must equal line 33)	759,827,038	16	805,255,578	
Liabilities	17 Accounts payable and accrued expenses	42,759,193	17	41,913,073
	18 Grants payable	0	18	0
	19 Deferred revenue	29,265,728	19	25,958,026
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	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	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	67,387,318	23	94,236,307
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	4,965,856	25	10,859,097
	26 Total liabilities. Add lines 17 through 25	144,378,095	26	172,966,503
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	113,937,864	27	112,765,719
	28 Net assets with donor restrictions	501,511,079	28	519,523,356
	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	0	29	0
	30 Paid-in or capital surplus, or land, building, or equipment fund	0	30	0
	31 Retained earnings, endowment, accumulated income, or other funds	0	31	0
	32 Total net assets or fund balances	615,448,943	32	632,289,075
33 Total liabilities and net assets/fund balances	759,827,038	33	805,255,578	

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	173,652,362
2	Total expenses (must equal Part IX, column (A), line 25)	2	167,406,834
3	Revenue less expenses. Subtract line 2 from line 1	3	6,245,528
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	615,448,943
5	Net unrealized gains (losses) on investments	5	9,915,168
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain on Schedule O)	9	679,436
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	632,289,075

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 on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<input checked="" type="checkbox"/>
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<input checked="" type="checkbox"/>	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	<input checked="" type="checkbox"/>	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	<input checked="" type="checkbox"/>	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.	<input checked="" type="checkbox"/>	

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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	Former			
(25) DONALD L COHN ----- TRUSTEE (OUTGOING AUGUST 2022)	0.5 -----	✓						0	0	0
(26) EDWIN K HUNTER ----- TRUSTEE	0.5 -----	✓						0	0	0
(27) ERIC SAGERMAN ----- TRUSTEE	2.0 -----	✓						0	0	0
(28) FREDERICK J DOTZLER ----- TRUSTEE	2.0 -----	✓						0	0	0
(29) FREDERIK PAULSEN, PH.D. ----- TRUSTEE	0.5 -----	✓						0	0	0
(30) HAEYOUNG KONG TANG, PH.D. ----- TRUSTEE	2.0 -----	✓						0	0	0
(31) HOWARD H NEWMAN, PH.D. ----- TRUSTEE	0.5 -----	✓						0	0	0
(32) IRVING WEISSMAN, M.D. ----- TRUSTEE	0.5 -----	✓						0	0	0
(33) IRWIN M JACOBS, S.M, SC.D. ----- CHAIR EMERITUS	2.0 -----	✓						0	0	0
(34) JAY FLATLEY ----- TRUSTEE	2.0 -----	✓						0	0	0
(35) LARRY E JENNINGS ----- TRUSTEE (OUTGOING AUGUST 2022)	0.5 -----	✓						0	0	0
(36) LYN HUTTON ----- TRUSTEE	2.0 -----	✓						0	0	0
(37) MARK KNICKREHM ----- TRUSTEE	0.5 -----	✓						0	0	0
(38) MARKUS REINHARD ----- VICE CHAIR	2.0 -----	✓						0	0	0
(39) MARY JANE SALK ----- TRUSTEE	0.5 -----	✓						0	0	0
(40) SANJAY K JHA, PH.D. ----- TRUSTEE	0.5 -----	✓						0	0	0
(41) TERRY ROSEN, PH.D. ----- TRUSTEE	2.0 -----	✓						0	0	0
(42) TIMOTHY M SCHOEN ----- TRUSTEE	2.0 -----	✓						0	0	0

**SCHEDULE A
(Form 990)**

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 for instructions and the latest information.

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization THE SALK INSTITUTE FOR BIOLOGICAL STUDIES	Employer identification number 95-2160097
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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).)
- 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)(vii)**. (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 33¹/₃% 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 33¹/₃% 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

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

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

Cat. No. 11285F

Schedule A (Form 990) 2022

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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	166,753,206	160,545,802	176,855,692	138,798,417	150,881,176	793,834,293
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	166,753,206	160,545,802	176,855,692	138,798,417	150,881,176	793,834,293
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)						12,425,761
6 Public support. Subtract line 5 from line 4						781,408,532

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	166,753,206	160,545,802	176,855,692	138,798,417	150,881,176	793,834,293
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	5,160,349	4,322,033	6,807,160	9,621,065	6,721,516	32,632,123
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	5,125	3,315	1,945	4,857	2,864	18,106
11 Total support. Add lines 7 through 10						826,484,522
12 Gross receipts from related activities, etc. (see instructions)					12	0
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	94.55 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	94.37 %
16a 33 1/3% support test—2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test—2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2022. 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—2021. 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 on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
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? 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.		
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)? 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).		
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? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2			
3	By reason of the relationship described on line 2, above, 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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3			

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2	Activities Test. Answer lines 2a and 2b 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? 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.		
2a			
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? 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.		
2b			
3	Parent of Supported Organizations. Answer lines 3a and 3b 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? If "Yes" or "No," provide details in Part VI .		
3a			
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		
3b			

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

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

Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
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 0.015 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 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<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).		

Schedule A (Form 990) 2022

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	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Part VI

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.)

Return Reference - Identifier	Explanation						
	Description	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
SCHEDULE A, PART II, LINE 10 - OTHER INCOME	(1) OIL ROYALTIES	1,545	1,093	993	2,851	1,781	8,263
	(2) REVENUE SHARING-HOST VEHICLE CHARGING STATION	1,278	1,228	952	2,006	1,083	6,547
	(3) NET GIFT SHOP SALES	2,302	994	0	0	0	3,296
	Total	5,125	3,315	1,945	4,857	2,864	18,106

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization THE SALK INSTITUTE FOR BIOLOGICAL STUDIES

Employer identification number 95-2160097

Organization type (check one):

Filers of:

Section:

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

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

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

General Rule

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

Special Rules

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

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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).

Name of organization THE SALK INSTITUTE FOR BIOLOGICAL STUDIES	Employer identification number 95-2160097
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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	US DEPT OF HEALTH & HUMAN SERVICE ----- PO BOX 6021 ----- ROCKVILLE, MD 20852 -----	\$ 71,364,500	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.)
-----	----- ----- -----	\$ -----	Person <input 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.)
-----	----- ----- -----	\$ -----	Person <input 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.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE SALK INSTITUTE FOR BIOLOGICAL STUDIES	Employer identification number 95-2160097
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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) <small>(See instructions.)</small>	(d) Date received
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----

Name of organization THE SALK INSTITUTE FOR BIOLOGICAL STUDIES	Employer identification number 95-2160097
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Part III *Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.* Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) \$ _____
 Use duplicate copies of Part III if additional space is needed.

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

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

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

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

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

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

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

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

**SCHEDULE C
(Form 990)**

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2022

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization THE SALK INSTITUTE FOR BIOLOGICAL STUDIES	Employer identification number 95-2160097
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."
- 2 Political campaign activity expenditures. See instructions \$ _____
- 3 Volunteer hours for political campaign activities. See instructions _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		✓	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		✓	
c Media advertisements?		✓	
d Mailings to members, legislators, or the public?		✓	
e Publications, or published or broadcast statements?		✓	
f Grants to other organizations for lobbying purposes?		✓	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		✓	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		✓	
i Other activities?	✓		3,070
j Total. Add lines 1c through 1i			3,070
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		✓	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?	4	
5 Taxable amount of lobbying and political expenditures. See instructions	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

[SEE NEXT PAGE](#)

Part IV

Supplemental Information. Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference - Identifier	Explanation
SCHEDULE C, PART II-B, LINE 1 - DETAILED DESCRIPTION OF THE LOBBYING ACTIVITY	PAID MEMBERSHIP DUES TO RESEARCH AND BIOMEDICAL ORGANIZATIONS, A PORTION OF WHICH ARE CONSIDERED LOBBYING. ASSOCIATION OF INDEPENDENT RESEARCH INSTITUTES - \$1,500, NATIONAL ASSOCIATION FOR BIOMEDICAL RESEARCH - \$1,200, BIOCUM - \$370.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

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

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization: THE SALK INSTITUTE FOR BIOLOGICAL STUDIES; Employer identification number: 95-2160097

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

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

Table with 3 columns: Line number, Description, Held at the End of the Tax Year. Includes questions 1-9 regarding conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Line number, Description, Amount. Includes questions 1a, 1b, 2 regarding collections of art and historical treasures.

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** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange program
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? **Yes** **No**

Part IV Escrow and Custodial Arrangements.

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f 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	345,211,760	375,050,161	299,166,085	286,834,762	240,056,992
b Contributions	4,585,120	1,603,261	14,926,831	6,580,341	42,422,494
c Net investment earnings, gains, and losses	17,999,745	(15,394,543)	74,973,285	17,530,495	14,937,417
d Grants or scholarships					
e Other expenditures for facilities and programs	16,695,002	16,047,119	14,016,040	11,779,513	10,582,141
f Administrative expenses					
g End of year balance	351,101,623	345,211,760	375,050,161	299,166,085	286,834,762

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

- a** Board designated or quasi-endowment 3.11 %
- b** Permanent endowment 72.80 %
- c** Term endowment 24.09 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(ii) Related organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	<input type="checkbox"/>	<input type="checkbox"/>

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		1,153,930		1,153,930
b Buildings		64,209,980	54,562,927	9,647,053
c Leasehold improvements		102,610,267	73,412,189	29,198,078
d Equipment		123,700,198	88,973,442	34,726,756
e Other		1,298,579	1,284,322	14,257
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				74,740,074

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		
(3) Other		
(A) ALTERNATIVE INVESTMENTS	466,747,759	END OF YEAR MARKET VALUE
(B) STOCKS NOT-PUBLICLY TRADED <5%	3,011	COST
(C) LIMITED PARTNERSHIP INTEREST	28,955,451	END OF YEAR MARKET VALUE
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	495,706,221	

Part VIII Investments—Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	5,143
(2) DEFERRED RETIREE MEDICAL OBLIG	4,174,113
(3) LEASE LIABILITY	6,679,841
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	10,859,097

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.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total revenue reported as 178,205,447 on line 1, adjusted to 171,996,136 on line 3, and finally 173,652,362 on line 5.

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

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Total expenses reported as 165,750,610 on line 1, adjusted to 164,849,837 on line 3, and finally 167,406,834 on line 5.

Part XIII Supplemental Information.

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

SEE STATEMENT

Series of horizontal dashed lines for providing supplemental information.

Part XIII

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.

Return Reference - Identifier	Explanation	
SCHEDULE D, PART XI, LINE 2(D) - OTHER REVENUES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	(a) Description	(b) Amount
	INVESTMENT RETURN IN EXCESS OF AMOUNT DESIGNATED FOR CURRENT OPERATIONS UNDER SPENDING POLICY	- 3,659,268
	CHANGE IN VALUE OF DEFERRED GIFTS	- 46,590
	ROUNDING	1
SCHEDULE D, PART XI, LINE 4(B) - OTHER REVENUE	(a) Description	(b) Amount
	FUNDRAISING EXPENSES	- 900,773
	ROUNDING	553
SCHEDULE D, PART XII, LINE 2(D) - OTHER EXPENSES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	(a) Description	(b) Amount
	FUNDRAISING EXPENSES	900,773
SCHEDULE D, PART XII, LINE 4(B) - OTHER EXPENSES	(a) Description	(b) Amount
	ROUNDING	551

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.

Return Reference - Identifier	Explanation
SCHEDULE D, PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUNDS	ENDOWMENT INCOME INTENDED TO BE USED FOR AND TO SUPPORT RESEARCH, OPERATIONS, AND LECTURESHIP EXPENSES.
SCHEDULE D, PART X, LINE 2 - FIN 48 (ASC 740) FOOTNOTE	INCOME TAXES - THE INSTITUTE HAS NO UNRECOGNIZED TAX BENEFITS AS OF JUNE 30, 2023 AND 2022.
SCHEDULE D, PART XI, LINE 2(D) -	INVESTMENT RETURN IN EXCESS OF AMOUNT DESIGNATED FOR CURRENT OPERATIONS UNDER SPENDING POLICY (\$3,659,268), CHANGE IN VALUE OF DEFERRED GIFTS (\$46,590), AND ROUNDING \$1.
SCHEDULE D, PART XI, LINE 4(B) -	FUNDRAISING EXPENSES (\$900,773) AND ROUNDING \$553
SCHEDULE D, PART XII, LINE 2(D) -	FUNDRAISING EVENTS EXPENSE \$900,773 AND ROUNDING \$552

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2022

Open to Public Inspection

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

Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

THE SALK INSTITUTE FOR BIOLOGICAL STUDIES

Employer identification number

95-2160097

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

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	SCIENTISTS TRAVEL TO FOREIGN COUNTRIES TO ATTEND CONFERENCES. WE DO NOT DEEM THESE ACTIVITIES TO CONSTITUTE WORKING IN THE REGION.	172,584
(2) NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	PROGRAM SERVICES	SCIENTISTS TRAVEL TO FOREIGN COUNTRIES TO ATTEND CONFERENCES. WE DO NOT DEEM THESE ACTIVITIES TO CONSTITUTE WORKING IN THE REGION.	74,790
(3) CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	SCIENTISTS TRAVEL TO FOREIGN COUNTRIES TO ATTEND CONFERENCES. WE DO NOT DEEM THESE ACTIVITIES TO CONSTITUTE WORKING IN THE REGION.	5,937
(4) EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	SCIENTISTS TRAVEL TO FOREIGN COUNTRIES TO ATTEND CONFERENCES. WE DO NOT DEEM THESE ACTIVITIES TO CONSTITUTE WORKING IN THE REGION.	50,495
(5) MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	SCIENTISTS TRAVEL TO FOREIGN COUNTRIES TO ATTEND CONFERENCES. WE DO NOT DEEM THESE ACTIVITIES TO CONSTITUTE WORKING IN THE REGION.	2,984
(6) SOUTH AMERICA	0	0	PROGRAM SERVICES	SCIENTISTS TRAVEL TO FOREIGN COUNTRIES TO ATTEND CONFERENCES. WE DO NOT DEEM THESE ACTIVITIES TO CONSTITUTE WORKING IN THE REGION.	9,101
(7) RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES	SCIENTISTS TRAVEL TO FOREIGN COUNTRIES TO ATTEND CONFERENCES. WE DO NOT DEEM THESE ACTIVITIES TO CONSTITUTE WORKING IN THE REGION.	1,133
(8) CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		210,145,003
(9) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	INVESTMENTS		23,265,027
(10) SUB-SAHARAN AFRICA	0	0	INVESTMENTS		372,470
(11) NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	INVESTMENTS		1,215,756
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal	0	0			235,315,280
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			235,315,280

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

Cat. No. 50082W

Schedule F (Form 990) 2022

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

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

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

3 Enter total number of other organizations or entities . . . ▶

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

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

Part IV Foreign Forms

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

Schedule F (Form 990) 2022

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).

Return Reference - Identifier	Explanation
<p>SCHEDULE F, PART I, LINE 3 - METHOD USED TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS</p>	<p>CENTRAL AMERICA AND THE CARIBBEAN -ACCRUAL EAST ASIA AND THE PACIFIC -ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND) -ACCRUAL MIDDLE EAST AND NORTH AFRICA -ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY) -ACCRUAL RUSSIA AND NEIGHBORING STATES -ACCRUAL SOUTH AMERICA -ACCRUAL SUB-SAHARAN AFRICA -ACCRUAL</p>

**SCHEDULE G
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization

THE SALK INSTITUTE FOR BIOLOGICAL STUDIES

Employer identification number

95-2160097

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
- 2a** 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? **Yes** **No**
- 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			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

- 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.

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.

		(a) Event #1 <u>CONCERT</u> (event type)	(b) Event #2 _____ (event type)	(c) Other events _____ (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	1,101,708			1,101,708
	2 Less: Contributions	1,034,108			1,034,108
	3 Gross income (line 1 minus line 2)	67,600	0	0	67,600
Direct Expenses	4 Cash prizes				0
	5 Noncash prizes				0
	6 Rent/facility costs				0
	7 Food and beverages	87,653			87,653
	8 Entertainment	412,589			412,589
	9 Other direct expenses	400,531			400,531
	10 Direct expense summary. Add lines 4 through 9 in column (d)				900,773
11 Net income summary. Subtract line 10 from line 3, column (d)				(833,173)	

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.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	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:

a The organization's facility	13a	%
b An outside facility	13b	%

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 J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

THE SALK INSTITUTE FOR BIOLOGICAL STUDIES

Employer identification number

95-2160097

Part I Questions Regarding Compensation

	Yes	No
<p>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.</p> <p> <input checked="" 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) </p>		
<p>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</p>	1b ✓	
<p>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?</p>	2 ✓	
<p>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.</p> <p> <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 </p>		
<p>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:</p> <p> 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. </p>	4a	✓
	4b	✓
	4c	✓
<p>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.</p> <p>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:</p> <p> a The organization? b Any related organization? If "Yes" on line 5a or 5b, describe in Part III. </p>	5a	✓
	5b	✓
<p>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:</p> <p> a The organization? b Any related organization? If "Yes" on line 6a or 6b, describe in Part III. </p>	6a	✓
	6b	✓
<p>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</p>	7	✓
<p>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</p>	8	✓
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9	

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 and/or 1099-NEC 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	FRED GAGE, PH.D. PRESIDENT (OUTGOING APRIL 2023)/PROFESSOR	(i) 867,507	0	16,915	36,600	17,318	938,340	0
	(ii) 0	0	0	0	0	0	0	0
2	KIM E WITMER TREASURER/SVP FINANCE & ADMN	(i) 466,254	0	17,248	36,600	9,961	530,063	0
	(ii) 0	0	0	0	0	0	0	0
3	GERALD JOYCE, MD, PH.D. PRESIDENT (INCOMING APRIL 2023)/PROFESSOR	(i) 441,224	0	10,287	36,600	14,987	503,098	0
	(ii) 0	0	0	0	0	0	0	0
4	MARTIN HETZER, PH.D. CSO (OUTGOING MARCH 2023)/PROFESSOR	(i) 404,256	0	34,423	36,600	19,418	494,697	0
	(ii) 0	0	0	0	0	0	0	0
5	REUBEN SHAW, PH.D TRUSTEE/PROFESSOR	(i) 250,741	0	164,004	36,600	12,141	463,486	0
	(ii) 0	0	0	0	0	0	0	0
6	RONALD EVANS, PH.D PROFESSOR	(i) 392,063	0	35,815	30,500	1,596	459,974	0
	(ii) 0	0	0	0	0	0	0	0
7	JULIA A MILLER, J.D. SECRETARY/GENERAL COUNSEL	(i) 373,036	0	18,792	36,600	19,635	448,063	0
	(ii) 0	0	0	0	0	0	0	0
8	SAMUEL PFAFF, PH.D. PROFESSOR	(i) 294,058	0	72,374	36,600	19,364	422,396	0
	(ii) 0	0	0	0	0	0	0	0
9	EDWARD CALLAWAY, PH.D. PROFESSOR	(i) 343,386	0	11,359	36,600	16,113	407,458	0
	(ii) 0	0	0	0	0	0	0	0
10	KIMBERLY CASTILLO CHIEF FINANCIAL OFFICER	(i) 302,168	0	9,604	36,600	14,800	363,172	0
	(ii) 0	0	0	0	0	0	0	0
11	DAVID LAWRENCE EXECUTIVE DIRECTOR, HPI	(i) 355,385	0	6,223	1,095	0	362,703	0
	(ii) 0	0	0	0	0	0	0	0
12	WOLFGANG BUSCH, PH.D. TRUSTEE/PROFESSOR	(i) 215,033	0	91,937	32,744	10,332	350,046	0
	(ii) 0	0	0	0	0	0	0	0
13	MARTYN GOULDING, PH.D. TRUSTEE/PROFESSOR	(i) 246,178	0	20,013	32,622	14,492	313,305	0
	(ii) 0	0	0	0	0	0	0	0
14	TATYANA SHARPEE, PH.D. TRUSTEE/PROFESSOR	(i) 226,204	0	29,471	29,958	11,999	297,632	0
	(ii) 0	0	0	0	0	0	0	0
15		(i)						
	(ii)							
16		(i)						
	(ii)							

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.

Return Reference - Identifier	Explanation
SCHEDULE J, PART I, LINE 1A - FIRST-CLASS OR CHARTER TRAVEL	FIRST-CLASS OR CHARTER TRAVEL: FRED GAGE, PRESIDENT/PROFESSOR - \$22,315; GERALD JOYCE, PRESIDENT/PROFESSOR - \$2,869; KIM WITMER, SVP-FINANCE & ADMINISTRATION - \$858; MARTIN HETZER, CSO/PROFESSOR - \$394. NOT TAXABLE - ACCOUNTABLE PLAN.

**SCHEDULE L
(Form 990)**

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27,
28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

**Open To Public
Inspection**

Name of the organization: **THE SALK INSTITUTE FOR BIOLOGICAL STUDIES** Employer identification number: **95-2160097**

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

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

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

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

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

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1) REUBEN SHAW	PROFESSOR	HOME LOAN		✓	700,000	337,550		✓	✓		✓	
(2) TATYANA SHARPEE	PROFESSOR	HOME LOAN		✓	30,140	30,140		✓	✓		✓	
(3) WOLFGANG BUSCH	PROFESSOR	HOME LOAN		✓	250,000	41,667		✓	✓		✓	
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total						\$	409,357					

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

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

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

**Open to Public
Inspection**

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization
THE SALK INSTITUTE FOR BIOLOGICAL STUDIES

Employer identification number
95-2160097

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				
2				
3				
4				
5				
6				
7				
8				
9	✓	118	1,865,829	MARKET VALUE
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 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.		

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.

Return Reference - Identifier	Explanation
SCHEDULE M, PART I - EXPLANATIONS OF REPORTING METHOD FOR NUMBER OF CONTRIBUTIONS	SECURITIES - PUBLICLY TRADED - THE AMOUNT REPORTED REPRESENTS THE NUMBER OF CONTRIBUTIONS RECEIVED.

**SCHEDULE O
(Form 990)**

Department of 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 for the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the Organization
THE SALK INSTITUTE FOR BIOLOGICAL STUDIES

Employer Identification Number
95-2160097

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION	DISEASES, AND (C) THE FACTORS AND CIRCUMSTANCES CONDUCIVE TO THE FULFILLMENT OF HUMANKIND'S BIOLOGICAL POTENTIAL.

Return Reference - Identifier	Explanation
<p>FORM 990, PART III, LINE 4A - CONTINUED1</p>	<p>IMAGING REVEALS HOW LARGE HIV PROTEIN FUNCTIONS TO FORM INFECTIOUS VIRUS - UNDERSTANDING HOW HIV REPLICATES WITHIN CELLS IS KEY FOR DEVELOPING NEW THERAPIES FOR THE NEARLY 40 MILLION PEOPLE LIVING WITH HIV GLOBALLY. A TEAM OF SCIENTISTS FROM THE SALK INSTITUTE AND RUTGERS UNIVERSITY HAVE DETERMINED THE MOLECULAR STRUCTURE OF HIV POL, A PROTEIN THAT PLAYS A KEY ROLE IN THE LATE STAGES OF HIV REPLICATION, OR THE PROCESS THROUGH WHICH THE VIRUS PROPAGATES ITSELF AND SPREADS THROUGH THE BODY. DETERMINING THE MOLECULE'S STRUCTURE HELPS ANSWER LONGSTANDING QUESTIONS ABOUT HOW THE PROTEIN BREAKS ITSELF APART TO ADVANCE THE REPLICATION PROCESS. THE DISCOVERY REVEALS A NEW VULNERABILITY IN THE VIRUS THAT COULD BE TARGETED WITH DRUGS. THE STUDY WAS LED BY ASSISTANT PROFESSOR DMITRY LYUMKIS AND PUBLISHED IN SCIENCE ADVANCES ON JULY 6, 2022.</p> <p>THE BEST OFFENSE IS A GREAT DEFENSE FOR SOME CARNIVOROUS PLANTS - INSECT-EATING PLANTS HAVE FASCINATED BIOLOGISTS FOR MORE THAN A CENTURY, BUT HOW PLANTS EVOLVED THE ABILITY TO CAPTURE AND CONSUME LIVE PREY HAS LARGELY REMAINED A MYSTERY. NOW, SALK SCIENTISTS, ALONG WITH COLLABORATORS FROM WASHINGTON UNIVERSITY IN ST. LOUIS, HAVE INVESTIGATED THE MOLECULAR BASIS OF PLANT CARNIVORY AND FOUND EVIDENCE THAT IT EVOLVED FROM MECHANISMS PLANTS USE TO DEFEND THEMSELVES. THE RESEARCH DETAILS HOW CALCIUM MOLECULES MOVE DYNAMICALLY WITHIN CELLS IN THE LEAVES OF CARNIVOROUS PLANTS IN RESPONSE TO TOUCH FROM LIVE PREY. THE STUDY WAS LED BY PROFESSOR JOANNE CHORY AND PUBLISHED IN PROCEEDINGS OF THE NATIONAL ACADEMY OF SCIENCES ON JULY 11, 2022.</p> <p>HOW RNA PROCESSING GOES AWRY IN RARE IMMUNE DISEASE - RESEARCHERS AT THE SALK INSTITUTE AND KING ABDULLAH UNIVERSITY OF SCIENCE AND TECHNOLOGY (KAUST) IN SAUDI ARABIA DISCOVERED A NEW UNDERLYING CAUSE OF WISKOTT-ALDRICH SYNDROME, A RARE GENETIC DISEASE THAT LEADS TO BLEEDING AND IMMUNE DEFICIENCIES IN BABIES. THEY FOUND THE GENETIC MUTATIONS ASSOCIATED WITH WISKOTT-ALDRICH SYNDROME DISRUPT RNA SPLICING WHICH, IN TURN, PREVENTS NUMEROUS IMMUNE AND ANTI-INFLAMMATORY PROTEINS FROM BEING MADE CORRECTLY. THE STUDY WAS LED BY PROFESSOR JUAN CARLOS IZPISUA BELMONTE AND PUBLISHED IN NATURE COMMUNICATIONS ON JUNE 25, 2022.</p> <p>MAKING A MEMORY POSITIVE OR NEGATIVE - RESEARCHERS AT THE SALK INSTITUTE AND COLLEAGUES DISCOVERED THE MOLECULE IN THE BRAIN RESPONSIBLE FOR ASSOCIATING GOOD OR BAD FEELINGS WITH A MEMORY. THEIR DISCOVERY PAVES THE WAY FOR A BETTER UNDERSTANDING OF WHY SOME PEOPLE ARE MORE LIKELY TO RETAIN NEGATIVE EMOTIONS THAN POSITIVE ONES-AS CAN OCCUR WITH ANXIETY, DEPRESSION OR POST-TRAUMATIC STRESS DISORDER (PTSD). THE STUDY WAS LED BY PROFESSOR KAY TYE AND PUBLISHED IN NATURE ON JULY 20, 2022.</p> <p>A SURPRISING LINK BETWEEN MITOCHONDRIAL DNA AND INCREASED ATHEROSCLEROSIS RISK - MITOCHONDRIA ARE KNOWN AS CELLS' POWERHOUSES, BUT MOUNTING EVIDENCE SUGGESTS THEY ALSO PLAY A ROLE IN INFLAMMATION. SCIENTISTS FROM THE SALK INSTITUTE AND UC SAN DIEGO EXAMINED HUMAN BLOOD CELLS AND DISCOVERED A SURPRISING LINK BETWEEN MITOCHONDRIA, INFLAMMATION AND DNMT3A AND TET2-TWO GENES THAT NORMALLY HELP REGULATE BLOOD CELL GROWTH BUT, WHEN MUTATED, ARE ASSOCIATED WITH AN INCREASED RISK OF ARTERY-BLOCKING PLAQUE BUILDUP KNOWN AS ATHEROSCLEROSIS. THE FINDINGS COULD LEAD TO NEW THERAPEUTICS FOR ATHEROSCLEROSIS AND OTHER INFLAMMATORY DISEASES. THE STUDY WAS LED BY PROFESSOR GERALD SHADEL AND PUBLISHED IN IMMUNITY ON AUGUST 2, 2022.</p> <p>DISCOVERY ADVANCES THE POTENTIAL OF GENE THERAPY TO RESTORE HEARING LOSS - RESEARCH FROM THE SALK INSTITUTE AND THE UNIVERSITY OF SHEFFIELD MAY DRIVE THE DEVELOPMENT OF NEW GENE THERAPIES TO REPAIR HEARING LOSS. IN DEVELOPED COUNTRIES, ROUGHLY 80 PERCENT OF DEAFNESS CASES THAT OCCUR BEFORE A CHILD LEARNS TO SPEAK ARE DUE TO GENETIC FACTORS. ONE OF THESE GENETIC COMPONENTS LEADS TO THE ABSENCE OF THE PROTEIN EPS8, WHICH COINCIDES WITH IMPROPER DEVELOPMENT OF SENSORY HAIR CELLS IN THE INNER EAR. THE TEAM'S FINDINGS SHOW THAT DELIVERY OF NORMAL EPS8 CAN RESCUE STEREOCILIA ELONGATION AND THE FUNCTION OF AUDITORY HAIR CELLS IN THE EARS OF MICE AFFECTED BY THE LOSS OF EPS8. THE STUDY WAS LED BY ASSISTANT PROFESSOR URI MANOR AND PUBLISHED IN MOLECULAR THERAPY - METHODS & CLINICAL DEVELOPMENT ON JULY 31, 2022.</p> <p>NEW TARGET IDENTIFIED FOR TREATMENT OF PREMATURE AGING DISEASE - SCIENTISTS AT THE SALK INSTITUTE AND KING ABDULLAH UNIVERSITY OF SCIENCE AND TECHNOLOGY (KAUST) IN SAUDI ARABIA DISCOVERED THAT A STRETCH OF DNA THAT HOPS AROUND THE HUMAN GENOME PLAYS A ROLE IN PREMATURE AGING DISORDERS. IN PEOPLE WITH EARLY AGING, OR PROGERIA, RNA ENCODED BY THIS MOBILE DNA BUILDS UP INSIDE CELLS. THE SCIENTISTS ALSO FOUND THAT BLOCKING THIS RNA REVERSES THE DISEASE IN MICE. THE STUDY WAS LED BY PROFESSOR JUAN CARLOS IZPISUA BELMONTE AND PUBLISHED IN SCIENCE TRANSLATIONAL MEDICINE ON AUGUST 10, 2022.</p> <p>HOW THE BRAIN GATHERS THREAT CUES AND TURNS THEM INTO FEAR - SCIENTISTS AT THE SALK INSTITUTE UNCOVERED A MOLECULAR PATHWAY THAT DISTILLS THREATENING SIGHTS, SOUNDS AND SMELLS INTO A SINGLE MESSAGE: BE AFRAID. A MOLECULE CALLED CGRP ENABLES NEURONS IN TWO SEPARATE AREAS OF THE BRAIN TO BUNDLE THREATENING SENSORY CUES INTO A UNIFIED SIGNAL, TAG IT AS NEGATIVE AND CONVEY IT TO THE AMYGDALA, WHICH TRANSLATES THE SIGNAL INTO FEAR. THE RESEARCH MAY LEAD TO NEW THERAPIES FOR FEAR-RELATED DISORDERS SUCH AS POST-TRAUMATIC STRESS DISORDER (PTSD) OR HYPERSENSITIVITY DISORDERS SUCH AS AUTISM, MIGRAINES AND FIBROMYALGIA. THE STUDY WAS LED BY ASSISTANT PROFESSOR SUNG HAN AND PUBLISHED IN CELL REPORTS ON AUGUST 16, 2022.</p> <p>HOW LIGHT AND TEMPERATURE WORK TOGETHER TO AFFECT PLANT GROWTH - PLANTS LENGTHEN AND BEND TO SECURE ACCESS TO SUNLIGHT. DESPITE OBSERVING THIS PHENOMENON FOR CENTURIES, SCIENTISTS DO NOT FULLY UNDERSTAND IT. SALK SCIENTISTS DISCOVERED THAT TWO PLANT FACTORS-THE PROTEIN PIF7 AND THE GROWTH HORMONE AUXIN-</p>

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	<p>ARE THE TRIGGERS THAT ACCELERATE GROWTH WHEN PLANTS ARE SHADED BY CANOPY AND EXPOSED TO WARM TEMPERATURES AT THE SAME TIME. THE FINDINGS WILL HELP SCIENTISTS INCREASE CROP PRODUCTIVITY DESPITE RISING GLOBAL TEMPERATURES. THE STUDY WAS LED BY PROFESSOR JOANNE CHORY AND PUBLISHED IN NATURE COMMUNICATIONS ON AUGUST 29, 2022.</p> <p>BEYOND NEURONS: HOW CELLS CALLED ASTROCYTES CONTRIBUTE TO BRAIN DISORDERS - MOST RESEARCH ON BRAIN DISEASES FOCUSES ON NEURONS, BUT STAR-SHAPED CELLS CALLED ASTROCYTES, ANOTHER ABUNDANT CELL IN THE HUMAN BRAIN, MAY BEAR THE BRUNT OF THE RESPONSIBILITY IN SOME NEURODEVELOPMENTAL DISORDERS. SALK INSTITUTE SCIENTISTS IDENTIFIED A MOLECULE PRODUCED BY ASTROCYTES THAT INTERFERES WITH NORMAL NEURON DEVELOPMENT IN RETT, FRAGILE X AND DOWN SYNDROMES, AND REPORT THAT BLOCKING THE MOLECULE REDUCES THE SIGNS OF DISEASE IN MICE BRAINS. THE STUDY WAS LED BY ASSOCIATE PROFESSOR NICOLA ALLEN AND PUBLISHED IN NATURE NEUROSCIENCE ON AUGUST 30, 2022.</p> <p>AGGRESSION DE-ESCALATION GENE IDENTIFIED IN FRUIT FLIES - THE BRAIN MECHANISMS THAT CAUSE AGGRESSIVE BEHAVIOR HAVE BEEN WELL STUDIED, BUT FAR LESS IS KNOWN ABOUT THE PROCESSES THAT TELL THE BODY WHEN IT'S TIME TO STOP FIGHTING. SALK INSTITUTE SCIENTISTS IDENTIFIED A GENE AND A GROUP OF CELLS IN THE BRAIN THAT PLAY A CRITICAL ROLE IN SUPPRESSING AGGRESSION IN FRUIT FLIES. THE FINDINGS HAVE IMPLICATIONS FOR DISORDERS SUCH AS PARKINSON'S DISEASE, WHICH CAN SOMETIMES CAUSE BEHAVIORAL CHANGES LIKE INCREASED AGGRESSION AND COMBATIVENESS. THE STUDY WAS LED BY ASSOCIATE PROFESSOR KENTA ASAHINA AND PUBLISHED IN SCIENCE ADVANCES ON SEPTEMBER 7, 2022.</p> <p>TIME-RESTRICTED EATING IMPROVES HEALTH OF FIREFIGHTERS - FIREFIGHTER'S 24-HOUR SHIFTS ARE HARD ON THE BODY AND INCREASE THE RISK OF CARDIOMETABOLIC DISEASES, SUCH AS HEART DISEASE AND DIABETES, AS WELL AS CANCER. IN COLLABORATION WITH THE SAN DIEGO FIRE-RESCUE DEPARTMENT, SCIENTISTS FROM THE SALK INSTITUTE AND UC SAN DIEGO HEALTH CONDUCTED A CLINICAL TRIAL AND FOUND THAT TIME-RESTRICTED EATING IMPROVED MEASURES OF HEALTH AND WELLBEING IN FIREFIGHTERS. THE NEW FINDINGS MAY ALSO HAVE IMPLICATIONS FOR SHIFT WORKERS, SUCH AS MILITARY PERSONNEL; HEALTH CARE, FOOD SERVICE, AND TRANSPORTATION PROFESSIONALS; TELECOMMUNICATIONS STAFF; AND NEW PARENTS, WHOSE SCHEDULES OFTEN MIMIC SHIFT WORK WHEN CARING FOR A NEW BABY. THE STUDY WAS LED BY PROFESSOR SATCHIDANANDA PANDA AND PUBLISHED IN CELL METABOLISM ON OCTOBER 4, 2022.</p>

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<p>FORM 990, PART III, LINE 4A - CONTINUED2</p>	<p>GROWING MOTOR NEURONS GUIDED BY "LOVE-HATE RELATIONSHIP" WITH BLOOD VESSELS - WHEN NEURONS INVOLVED IN MOVEMENT-CALLED MOTOR NEURONS-FORM, THEY MUST BUILD CONNECTIONS THAT REACH FROM THE BRAIN, BRAINSTEM, OR SPINAL CORD ALL THE WAY TO THE HEAD, ARMS, OR THE TIPS OF THE TOES. A COLLABORATIVE STUDY BETWEEN SALK INSTITUTE SCIENTISTS AND COLLEAGUES AT THE SAN RAFFAELE SCIENTIFIC INSTITUTE IN ITALY SHOWED HOW BLOOD VESSEL GENES PLAY A CRITICAL ROLE IN MOTOR NEURON DEVELOPMENT BY TELLING BLOOD VESSELS TO GET OUT OF THE WAY. THE DISCOVERY HAS IMPLICATIONS FOR UNDERSTANDING DISEASES IN WHICH MOTOR NEURON CONNECTIONS ARE DESTROYED, SUCH AS AMYOTROPHIC LATERAL SCLEROSIS (ALS) OR SPINAL MUSCULAR ATROPHY (SMA). THE STUDY WAS LED BY PROFESSOR SAMUEL PFAFF AND PUBLISHED IN NEURON ON OCTOBER 7, 2022.</p> <p>ANTI-INFLAMMATORY MOLECULES DECLINE IN THE AGING BRAIN - AGING INVOLVES INFLAMMATION, STRESS, METABOLISM CHANGES, AND MORE. A TEAM OF SALK INSTITUTE AND UC SAN DIEGO SCIENTISTS REVEALED ANOTHER FACTOR IMPLICATED IN THE AGING PROCESS-A CLASS OF LIPIDS CALLED SGGDS (3-SULFOGALACTOSYL DIACYLGLYCEROLS) THAT DECLINE IN THE BRAIN WITH AGE AND MAY HAVE ANTI-INFLAMMATORY EFFECTS. THE RESEARCH HELPS UNRAVEL THE MOLECULAR BASIS OF BRAIN AGING, REVEALS NEW MECHANISMS UNDERLYING AGE-RELATED NEUROLOGICAL DISEASES, AND OFFERS FUTURE OPPORTUNITIES FOR THERAPEUTIC INTERVENTION. THE STUDY WAS LED BY PROFESSOR ALAN SAGHATELIAN AND PUBLISHED IN NATURE CHEMICAL BIOLOGY ON OCTOBER 20, 2022.</p> <p>DETERIORATING NEURONS ARE SOURCE OF BRAIN INFLAMMATION IN ALZHEIMER'S DISEASE - SCIENTISTS FROM THE SALK INSTITUTE FOUND THAT NEURONS FROM PEOPLE WITH ALZHEIMER'S DISEASE SHOW DETERIORATION AND UNDERGO A LATE-LIFE STRESS PROCESS CALLED SENESCENCE. THESE NEURONS HAVE A LOSS OF FUNCTIONAL ACTIVITY, IMPAIRED METABOLISM, AND INCREASED BRAIN INFLAMMATION. THE RESEARCHERS ALSO DISCOVERED THAT TARGETING THE DETERIORATING NEURONS WITH THERAPEUTICS COULD BE AN EFFECTIVE STRATEGY FOR PREVENTING OR TREATING ALZHEIMER'S DISEASE. THE STUDY WAS LED BY PROFESSOR RUSTY GAGE AND PUBLISHED IN CELL STEM CELL ON DECEMBER 1, 2022.</p> <p>FLIPPING THE SWITCH: GENETIC CHANGES THAT TURN "ON" CANCER GENES - CANCER CAN BE CAUSED BY GENETIC MUTATIONS, YET THE IMPACT OF SPECIFIC TYPES SUCH AS STRUCTURAL VARIANTS THAT BREAK AND REJOIN DNA, CAN VARY WIDELY. RESEARCHERS FROM THE SALK INSTITUTE ZEROED IN ON SPECIFIC MECHANISMS THAT ACTIVATE ONCOGENES, SHOWING THAT THE ACTIVITY OF CANCER-ASSOCIATED MUTATIONS DEPENDS ON THE DISTANCE BETWEEN A PARTICULAR GENE AND THE SEQUENCES THAT REGULATE THE GENE, AS WELL AS ON THE LEVEL OF ACTIVITY OF THE REGULATORY SEQUENCES INVOLVED. THIS WORK ADVANCES THE ABILITY TO PREDICT AND INTERPRET WHICH GENETIC MUTATIONS FOUND IN CANCER GENOMES ARE CAUSING THE DISEASE. THE STUDY WAS LED BY ASSISTANT PROFESSOR JESSE DIXON AND PUBLISHED IN NATURE ON DECEMBER 7, 2022.</p> <p>NEW COMPOUND REVERSES GUT INFLAMMATION IN MICE - A DRUG DEVELOPED BY SALK INSTITUTE RESEARCHERS ACTS LIKE A MASTER RESET SWITCH IN THE INTESTINES. THE COMPOUND, CALLED FE XD, HAS PREVIOUSLY BEEN FOUND TO LOWER CHOLESTEROL, BURN FAT, AND WARD OFF COLORECTAL CANCER IN MICE. NOW, THE TEAM REPORTED THAT FE XD CAN ALSO PREVENT AND REVERSE INTESTINAL INFLAMMATION IN MOUSE MODELS OF INFLAMMATORY BOWEL DISEASE. THE STUDY WAS LED BY PROFESSOR RONALD EVANS AND PUBLISHED IN PROCEEDINGS OF THE NATIONAL ACADEMY OF SCIENCES ON DECEMBER 12, 2022.</p> <p>THE BRAIN'S ABILITY TO PERCEIVE SPACE EXPANDS LIKE THE UNIVERSE - SALK SCIENTISTS DISCOVERED THAT TIME SPENT EXPLORING AN ENVIRONMENT CAUSES NEURAL REPRESENTATIONS TO GROW IN SURPRISING WAYS. THEIR FINDINGS SHOW THAT NEURONS IN THE HIPPOCAMPUS ESSENTIAL FOR SPATIAL NAVIGATION, MEMORY, AND PLANNING REPRESENT SPACE IN A MANNER THAT CONFORMS TO A NONLINEAR HYPERBOLIC GEOMETRY-A THREE-DIMENSIONAL EXPANSE THAT GROWS OUTWARD EXPONENTIALLY. IN OTHER WORDS, IT'S SHAPED LIKE THE INTERIOR OF AN EXPANDING HOURGLASS. THE RESEARCHERS ALSO FOUND THAT THE SIZE OF THAT SPACE GROWS WITH TIME SPENT IN A PLACE. THIS DISCOVERY PROVIDES VALUABLE METHODS FOR ANALYZING DATA ON NEUROCOGNITIVE DISORDERS INVOLVING LEARNING AND MEMORY, SUCH AS ALZHEIMER'S DISEASE. THE STUDY WAS LED BY PROFESSOR TATYANA SHARPEE AND PUBLISHED IN NATURE NEUROSCIENCE ON DECEMBER 29, 2022.</p> <p>MICROPROTEIN INCREASES APPETITE IN MICE - OBESITY AND METABOLIC DISEASES, SUCH AS DIABETES, ARE EXTREMELY COMMON IN THE UNITED STATES. TINY PROTEINS CALLED MICROPROTEINS HAVE LONG BEEN OVERLOOKED IN RESEARCH, BUT NEW EVIDENCE DEMONSTRATES THAT THEY HAVE AN IMPORTANT ROLE IN METABOLISM. SALK INSTITUTE SCIENTISTS DISCOVERED THAT BOTH BROWN AND WHITE FAT IS FILLED WITH THOUSANDS OF PREVIOUSLY UNKNOWN MICROPROTEINS, AND SHOWED THAT ONE OF THESE MICROPROTEINS, CALLED GM8773, CAN INCREASE APPETITE IN MICE. THESE FINDINGS COULD LEAD TO THE DEVELOPMENT OF A THERAPEUTIC TO HELP PEOPLE GAIN WEIGHT IN CERTAIN DISEASE SITUATIONS, SUCH AS DURING CHEMOTHERAPY FOR CANCER. THE STUDY WAS LED BY PROFESSOR ALAN SAGHATELIAN AND PUBLISHED IN CELL METABOLISM ON JANUARY 3, 2023.</p> <p>TIME-RESTRICTED EATING RESHAPES GENE EXPRESSION THROUGHOUT THE BODY - EXACTLY HOW TIME-RESTRICTED FEEDING AFFECTS THE BODY ON THE MOLECULAR LEVEL, AND HOW THOSE CHANGES INTERACT ACROSS MULTIPLE ORGAN SYSTEMS, HAS NOT BEEN WELL UNDERSTOOD. SCIENTISTS AT THE SALK INSTITUTE SHOWED HOW TIME-RESTRICTED EATING INFLUENCES GENE EXPRESSION IN MICE ACROSS MORE THAN 22 REGIONS OF THE BODY AND BRAIN. THE FINDINGS HAVE IMPLICATIONS FOR A WIDE RANGE OF HEALTH CONDITIONS WHERE TIME-RESTRICTED EATING HAS SHOWN POTENTIAL BENEFITS, INCLUDING DIABETES, HEART DISEASE, HYPERTENSION, AND CANCER. THE STUDY WAS LED BY PROFESSOR SATCHIDANANDA PANDA AND PUBLISHED IN CELL METABOLISM ON JANUARY 3, 2023.</p> <p>SUPPLEMENTATION WITH AMINO ACID SERINE EASES NEUROPATHY IN DIABETIC MICE - APPROXIMATELY HALF OF PEOPLE WITH TYPE 1 OR TYPE 2 DIABETES EXPERIENCE PERIPHERAL NEUROPATHY-WEAKNESS, NUMBNESS, AND PAIN, PRIMARILY IN THE HANDS AND FEET. SALK INSTITUTE RESEARCHERS IDENTIFIED A NEW FACTOR CONTRIBUTING TO DIABETES-ASSOCIATED PERIPHERAL NEUROPATHY: ALTERED AMINO ACID METABOLISM. THE TEAM FOUND THAT DIABETIC</p>

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	<p>MICE WITH LOW LEVELS OF TWO RELATED AMINO ACIDS, SERINE AND GLYCINE, ARE AT HIGHER RISK FOR PERIPHERAL NEUROPATHY. THEY WERE ALSO ABLE TO ALLEVIATE NEUROPATHY SYMPTOMS IN DIABETIC MICE BY SUPPLEMENTING THEIR DIETS WITH SERINE. THE STUDY WAS LED BY PROFESSOR CHRISTIAN METALLO AND PUBLISHED IN NATURE ON JANUARY 25, 2023.</p> <p>TELOMERES, MITOCHONDRIA, AND INFLAMMATION WORK TOGETHER TO PREVENT CANCER - A TEAM OF SALK SCIENTISTS DISCOVERED THAT WHEN TELOMERES, THE END CAPS OF OUR CHROMOSOMES, BECOME VERY SHORT, THEY COMMUNICATE WITH MITOCHONDRIA, THE CELL'S POWERHOUSES. THIS COMMUNICATION TRIGGERS A COMPLEX SET OF SIGNALING PATHWAYS AND INITIATES AN INFLAMMATORY RESPONSE THAT DESTROYS CELLS THAT COULD OTHERWISE BECOME CANCEROUS. THE FINDINGS OPEN NEW POSSIBILITIES FOR PREVENTING AND TREATING CANCER AND OTHER HARMFUL CONSEQUENCES OF AGING. THE STUDY WAS LED BY PROFESSORS JAN KARLSEDER AND GERALD SHADEL AND PUBLISHED IN NATURE ON FEBRUARY 8, 2023.</p> <p>AI CHATBOT CHATGPT MIRRORS ITS USERS TO APPEAR INTELLIGENT - THE ARTIFICIAL INTELLIGENCE (AI) LANGUAGE MODEL CHATGPT MAY HAVE MANY APPLICATIONS IN SCIENCE AND BUSINESS, BUT HOW MUCH DO THESE TOOLS UNDERSTAND WHAT WE SAY TO THEM AND HOW DO THEY DECIDE WHAT TO SAY BACK? SALK INSTITUTE SCIENTISTS EXPLORED THE RELATIONSHIP BETWEEN THE HUMAN INTERVIEWER AND LANGUAGE MODELS TO UNCOVER WHY CHATBOTS RESPOND IN PARTICULAR WAYS, WHY THOSE RESPONSES VARY, AND HOW TO IMPROVE THEM IN THE FUTURE. THE RESULTS SUGGEST THAT LANGUAGE MODELS REFLECT THE INTELLIGENCE AND DIVERSITY OF THEIR INTERVIEWER. THE STUDY WAS LED BY PROFESSOR TERENCE SEJNOWSKI AND PUBLISHED IN NEURAL COMPUTATION ON FEBRUARY 17, 2023.</p> <p>NEW COMBINATION OF DRUGS WORKS TOGETHER TO REDUCE LUNG TUMORS IN MICE - STANDARD CHEMOTHERAPY AND IMMUNOTHERAPY TREATMENTS ARE NOT EFFECTIVE AGAINST NON-SMALL CELL LUNG CANCERS (NSCLCS) THAT HAVE AN LKB1 GENETIC MUTATION. A NEW STUDY REVEALED FDA-APPROVED TRAMETINIB AND ENTINOSTAT (WHICH IS CURRENTLY IN CLINICAL TRIALS) CAN BE GIVEN IN TANDEM TO PRODUCE FEWER AND SMALLER TUMORS IN MICE WITH LKB1-MUTATED NSCLC. THE STUDY WAS LED BY PROFESSOR REUBEN SHAW AND PUBLISHED IN SCIENCE ADVANCES ON MARCH 17, 2023.</p>

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<p>FORM 990, PART III, LINE 4A - CONTINUED3</p>	<p>WEARABLE MICROSCOPES ADVANCE SPINAL CORD IMAGING IN MICE - WHILE THE SPINAL CORD IS KNOWN TO PLAY AN ESSENTIAL ROLE IN RELAYING PAIN SIGNALS, TECHNOLOGY HAS LIMITED SCIENTISTS' UNDERSTANDING OF HOW THIS PROCESS OCCURS ON A CELLULAR LEVEL. SALK SCIENTISTS CREATED WEARABLE MICROSCOPES TO ENABLE UNPRECEDENTED INSIGHT INTO THE SIGNALING PATTERNS THAT OCCUR WITHIN THE SPINAL CORDS OF MICE. THESE TECHNOLOGICAL ADVANCEMENTS WILL HELP RESEARCHERS BETTER UNDERSTAND THE NEURAL BASIS OF SENSATIONS AND MOVEMENT IN HEALTHY AND DISEASE CONTEXTS, SUCH AS CHRONIC PAIN, ITCH, AMYOTROPHIC LATERAL SCLEROSIS (ALS), OR MULTIPLE SCLEROSIS (MS). THE STUDIES WERE LED BY ASSOCIATE PROFESSOR AXEL NIMMERJAHN AND PUBLISHED IN NATURE COMMUNICATIONS ON MARCH 21, 2023, AND NATURE BIOTECHNOLOGY ON MARCH 6, 2023.</p> <p>NOT ALL ITCHES ARE THE SAME, ACCORDING TO THE BRAIN - RESEARCH BY SALK INSTITUTE SCIENTISTS REVEALED A DEDICATED BRAIN PATHWAY THAT DRIVES THE MECHANICAL SENSATION OF ITCH (E.G., THE SENSATION OF A MOSQUITO CRAWLING ON YOUR ARM) AND IS DISTINCT FROM THE NEURAL PATHWAY THAT ENCODES THE CHEMICAL SENSATION OF ITCH (E.G., FROM THE MOSQUITO'S SALIVA AFTER A BITE). THEY FOUND THAT A SMALL POPULATION OF NEURONS RELAYS MECHANICAL ITCH INFORMATION FROM THE SPINAL CORD TO THE BRAIN AND ALSO IDENTIFIED THE NEUROPEPTIDE SIGNALS THAT REGULATE BOTH ITCH TYPES. THE FINDINGS OPEN NEW AVENUES FOR THERAPEUTIC INTERVENTIONS FOR CHRONIC ITCH CONDITIONS, INCLUDING ATOPIC DERMATITIS AND PSORIASIS. THE STUDY WAS LED BY PROFESSOR MARTYN GOULDING AND ASSISTANT PROFESSOR SUNG HAN, AND PUBLISHED IN NEURON ON APRIL 5, 2023.</p> <p>MITOCHONDRIA POWER-SUPPLY FAILURE MAY CAUSE AGE-RELATED COGNITIVE IMPAIRMENT - RESEARCHERS AT THE SALK INSTITUTE FOUND THAT THE LOSS OF SYNAPSES BETWEEN NEURONS OCCURS WITH BOTH HEALTHY AND MEMORY-IMPAIRED AGING, BUT WHAT DIFFERS IS THE BREAKDOWN IN THE STANDARD CORRELATION BETWEEN THE SIZES OF SYNAPTIC BOUTONS AND THE MITOCHONDRIA INSIDE. THE FINDINGS HIGHLIGHT THIS VIOLATION OF THE ULTRASTRUCTURAL SIZE PRINCIPLE AND MITOCHONDRIA-RELATED FAILURES AS THE KEY TO AGE-RELATED COGNITIVE IMPAIRMENT, USHERING IN A NEW ERA FOR AGING RESEARCH. THE STUDY WAS LED BY PROFESSOR JOHN REYNOLDS AND PUBLISHED IN FRONTIERS IN AGING NEUROSCIENCE ON APRIL 12, 2023.</p> <p>CRACKING THE CASE OF MITOCHONDRIAL REPAIR AND REPLACEMENT IN METABOLIC STRESS - WHEN CELLULAR ENERGY LEVELS DIP, THE CELL RESPONSE TO THIS METABOLIC STRESS IS TO GET RID OF THE DAMAGED MITOCHONDRIA AND CREATE NEW ONES-BUT HOW THIS OCCURS REMAINED UNCLEAR. SCIENTISTS AT THE SALK INSTITUTE FOUND THAT A PROTEIN CALLED FNI1 IS THE CRITICAL LINK BETWEEN A CELL SENSING LOW ENERGY LEVELS AND ELIMINATING AND REPLACING DAMAGED MITOCHONDRIA. THIS FUNDAMENTAL DISCOVERY CAN HELP US UNDERSTAND HEALTHY AGING, CANCEROUS TUMORS, NEURODEGENERATIVE DISEASES, AND MORE. THE STUDY WAS LED BY PROFESSOR REUBEN SHAW AND PUBLISHED IN SCIENCE ON APRIL 20, 2023.</p> <p>HOW AN AGGRESSION-PROMOTING BRAIN PEPTIDE WORKS IN FRUIT FLIES - SALK RESEARCHERS SHOWED HOW NEUROPEPTIDES RELEASED FROM A SMALL GROUP OF NEURONS CAN RESHAPE ACTIVITY PATTERNS IN MULTIPLE DOWNSTREAM BRAIN AREAS IN THE FLY AND IMPACT THE ANIMAL'S BEHAVIOR. THE FINDINGS ARE AN IMPORTANT STEP TO UNDERSTANDING HOW VARIABLE RESPONSES TO NEUROPEPTIDES CONTRIBUTE TO HUMAN CONDITIONS LIKE AUTISM-SPECTRUM DISORDER OR ATTENTION-DEFICIT DISORDERS. THE STUDY WAS LED BY ASSOCIATE PROFESSOR KENTA ASAHINA AND PUBLISHED IN THE JOURNAL OF NEUROSCIENCE ON MAY 10, 2023.</p> <p>A NEW MODEL OF STUDYING HUMAN BRAIN IMMUNE CELLS AND NEUROLOGICAL DISORDERS - UNLIKE SOME HUMAN CELLS THAT CAN BE STUDIED OUTSIDE OF THE BODY OR IN NONHUMAN MODELS, HUMAN MICROGLIA ARE DIFFICULT TO STUDY WHEN REMOVED FROM THE HUMAN-BRAIN-LIKE ENVIRONMENT. TO OVERCOME THIS BARRIER, SALK SCIENTISTS DEVELOPED AN ORGANOID MODEL THAT ALLOWS RESEARCHERS TO STUDY HUMAN MICROGLIAL DEVELOPMENT AND FUNCTION FOR THE FIRST TIME IN LIVING HUMAN-DERIVED TISSUE. THE SCIENTISTS ALSO EXAMINED PATIENT-DERIVED MICROGLIA FROM CHILDREN WITH MACROCEPHALIC AUTISM SPECTRUM DISORDER, HIGHLIGHTING THE IMPORTANCE OF IMMUNE CELL AND BRAIN INTERACTIONS IN NEURODEGENERATIVE AND DEVELOPMENTAL DISEASES. THE STUDY WAS LED BY PROFESSOR RUSTY GAGE AND PUBLISHED IN CELL ON MAY 11, 2023.</p> <p>SEEING THE INSIDES OF PLANTS IN 3D - SALK SCIENTISTS DEVELOPED A NEW TECHNOLOGY THAT CAN CAPTURE THE INTERNAL PLANT WORLD AT AN UNPRECEDENTED RESOLUTION, OPENING THE DOOR FOR UNDERSTANDING HOW PLANTS RESPOND TO A CHANGING CLIMATE. THE METHOD, CALLED PHYTOMAP, CAN CAPTURE ENTIRE PLANT TISSUES (LIKE THE WHOLE ROOT TIP), INSTEAD OF A SMALL SLICE, AND PROVIDES INSIGHT INTO THE COMPLEX BIOLOGICAL CONVERSATIONS BETWEEN CELLS THAT IS DIFFICULT IN TWO DIMENSIONS. THE STUDY WAS LED BY PROFESSOR JOSEPH ECKER AND PUBLISHED IN NATURE PLANTS ON JUNE 12, 2023.</p> <p>MAPPING THE DEVELOPMENT OF INFECTION-FIGHTING IMMUNE CELLS - SPECIALIZED IMMUNE CELLS, CALLED CYTOTOXIC T CELLS, CAN DEVELOP INTO SHORT-LIVED EFFECTOR CELLS THAT KILL INFECTED OR CANCEROUS CELLS WITHIN OUR BODIES. A SMALL PORTION OF THOSE EFFECTOR CELLS REMAIN AFTER AN INFECTION AND BECOME LONGER-LIVED MEMORY CELLS. SALK SCIENTISTS DISCOVERED THAT A PROTEIN COMPLEX CALLED CBAF CAN OPEN OR CLOSE GENETIC "DOORS" TO CONTROL WHETHER A T CELL BECOMES AN EFFECTOR OR A MEMORY CELL. THE FINDINGS ILLUMINATE HOW T CELLS FIGHT AND REMEMBER INFECTIONS AND PAVE THE WAY FOR THE DEVELOPMENT OF MORE EFFECTIVE VACCINES AND CANCER THERAPEUTICS. THE STUDY WAS LED BY PROFESSOR SUSAN KAECH AND ASSOCIATE PROFESSOR DIANA HARGREAVES, AND PUBLISHED IN IMMUNITY ON JUNE 13, 2023.</p> <p>ALL THE IMMUNITY, NONE OF THE SYMPTOMS - SALK SCIENTISTS DISCOVERED THAT, IN MICE, PAIRING DISEASE-CAUSING BACTERIA WITH SPECIFIC DIETARY INTERVENTIONS CREATES LONG-TERM IMMUNITY, REVEALING A NEW POTENTIAL VACCINATION STRATEGY FOR DIARRHEAL DISEASES LIKE E. COLI. THE STUDY WAS LED BY PROFESSOR JANELLE AYRES AND PUBLISHED IN SCIENCE ADVANCES ON JUNE 23, 2023.</p>

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FORM 990, PART VI, LINE 1A - DELEGATE BROAD AUTHORITY TO A COMMITTEE	THE EXECUTIVE COMMITTEE SHALL ADVISE AND AID THE OFFICERS OF THE CORPORATION IN ALL MATTERS CONCERNING ITS INTERESTS, INCLUDING WITHOUT LIMITATION ALL MATTERS RELATING TO COMPENSATION AND BENEFITS, AND SHALL POSSESS AND MAY EXERCISE, DURING THE INTERVALS BETWEEN THE MEETINGS OF THE BOARD OF TRUSTEES, ALL THE POWERS AND AUTHORITY OF THE BOARD OF TRUSTEES IN THE MANAGEMENT OF THE BUSINESS AND AFFAIRS OF THE CORPORATION, INCLUDING THE POWER TO AUTHORIZE THE CORPORATE SEAL TO BE AFFIXED TO ANY AND ALL DOCUMENTS WHICH MAY REQUIRE THE SAME TO BE AFFIXED THERETO, INSOFAR AS SUCH SEEMS TO THE EXECUTIVE COMMITTEE FOR THE BEST INTERESTS OF THE CORPORATION, IN ALL CASES IN WHICH SPECIFIC DIRECTIONS SHALL NOT HAVE BEEN GIVEN BY THE BOARD OF TRUSTEES, EXCEPT THAT THE EXECUTIVE COMMITTEE SHALL HAVE NO POWER TO ADOPT, AMEND, OR REPEAL THE BY-LAWS.
FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS	MEMBERSHIP OF THE CORPORATION CONSISTS OF THE PERSONS ELECTED TO THE BOARD OF TRUSTEES AND THREE MEMBERS FROM AMONG THE RESIDENT AND NON-RESIDENT FELLOWS AND PROFESSORS CHOSEN AND ELECTED ANNUALLY BY THE RESIDENT AND NON-RESIDENT FELLOWS AND PROFESSORS.
FORM 990, PART VI, LINE 7A - MEMBERS OR STOCKHOLDERS ELECTING MEMBERS OF GOVERNING BODY	THE MEMBERS OF THE CORPORATION ELECT THE TRUSTEES.
FORM 990, PART VI, LINE 7B - DECISIONS REQUIRING APPROVAL BY MEMBERS OR STOCKHOLDERS	THE MEMBERS OF THE CORPORATION MAY ALTER, AMEND, OR REPEAL THE BY-LAWS BY VOTE.
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	THE FORM 990 IS PREPARED BY THE INSTITUTE, INTERNALLY REVIEWED BY THE CHIEF FINANCIAL OFFICER AND EXTERNALLY REVIEWED BY THE TAX DEPARTMENT OF A PUBLIC ACCOUNTING FIRM. PRIOR TO ELECTRONIC FILING, A COPY OF THIS FORM 990 IS PROVIDED TO AND DISCUSSED IN THE EXECUTIVE SESSION OF THE BOARD OF TRUSTEES.
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	ANNUALLY, THE CONFLICT OF INTEREST DISCLOSURE STATEMENT IS SENT OUT FOR COMPLETION BY THE MEMBERS OF THE BOARD OF TRUSTEES, SENIOR MEMBERS OF ADMINISTRATION AND RESEARCHERS. THE DESIGNATED OFFICIAL FOR EACH GROUP REVIEWS THE COMPLETED FORMS AND BRINGS ANY POTENTIAL CONFLICT OF INTEREST TO THE RESPECTIVE COMMITTEES FOR REVIEW. UPON DETERMINATION THAT A CONFLICT OF INTEREST EXISTS, THE FOLLOWING CONDITIONS OR RESTRICTIONS MAY BE IMPOSED: A. MONITORING OF ACTIVITIES GENERATING THE CONFLICT BY ANOTHER MEMBER; B. DISQUALIFICATION FROM PARTICIPATION IN THE ACTIVITIES GIVING RISE TO THE CONFLICT; C. MODIFICATION OF RESPONSIBILITIES TO AVOID CONFLICTS; D. PUBLIC DISCLOSURE OR DIVESTITURE OF SIGNIFICANT FINANCIAL INTERESTS; E. MODIFICATION OF THE RESEARCH PLAN OR REMOVAL OF THE AFFECTED RESEARCHER FROM THE RESEARCH; F. SEVERANCE OF RELATIONSHIP THAT CREATES ACTUAL OR POTENTIAL CONFLICTS; G. TERMINATION OF EMPLOYMENT.
FORM 990, PART VI, LINE 15A - PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	A COMPREHENSIVE MARKET ASSESSMENT WAS COMPLETED IN APRIL 2023 BASED ON DATA FROM A SELECTED PEER GROUP AND HISTORICAL OVERALL MARKET DATA FOR SALK PRESIDENT AND EXECUTIVE LEADERSHIP ROLES. THIS REPORT WAS PROVIDED TO THE CHAIR AND CO-CHAIRS OF SALK'S BOARD OF TRUSTEES AND TO SALK'S CURRENT PRESIDENT AND PREVIOUS PRESIDENT. SALK'S PRESIDENT FOR THE PERIOD THROUGH APRIL 2023 DISCUSSED THE PERFORMANCE OF EACH VICE-PRESIDENT LEVEL EXECUTIVE AT A SPECIAL MEETING HELD ON JUNE 13, 2023, WITH THE CHAIR AND CO-CHAIR OF THE BOARD OF DIRECTORS AND SALK'S CURRENT PRESIDENT. AFTER DISCUSSION, RECOMMENDED CHANGES WERE APPROVED FOR VICE-PRESIDENT LEVEL INCUMBENTS ON SALK'S EXECUTIVE LEADERSHIP TEAM. NO CHANGES WERE RECOMMENDED FOR THE SALK PRESIDENT ROLE DUE TO THE LIMITED TENURE OF THE INCUMBENT. ALL COMPENSATION CHANGES WERE EFFECTIVE JULY 1, 2023.
FORM 990, PART VI, LINE 15B - PROCESS TO ESTABLISH COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES	A COMPREHENSIVE MARKET ASSESSMENT WAS COMPLETED IN APRIL 2023 BASED ON DATA FROM A SELECTED PEER GROUP AND HISTORICAL OVERALL MARKET DATA FOR SALK PRESIDENT AND EXECUTIVE LEADERSHIP ROLES. THIS REPORT WAS PROVIDED TO THE CHAIR AND CO-CHAIRS OF SALK'S BOARD OF TRUSTEES AND TO SALK'S CURRENT PRESIDENT AND PREVIOUS PRESIDENT. SALK'S PRESIDENT FOR THE PERIOD THROUGH APRIL 2023 DISCUSSED THE PERFORMANCE OF EACH VICE-PRESIDENT LEVEL EXECUTIVE AT A SPECIAL MEETING HELD ON JUNE 13, 2023, WITH THE CHAIR AND CO-CHAIR OF THE BOARD OF DIRECTORS AND SALK'S CURRENT PRESIDENT. AFTER DISCUSSION, RECOMMENDED CHANGES WERE APPROVED FOR VICE-PRESIDENT LEVEL INCUMBENTS ON SALK'S EXECUTIVE LEADERSHIP TEAM. NO CHANGES WERE RECOMMENDED FOR THE SALK PRESIDENT ROLE DUE TO THE LIMITED TENURE OF THE INCUMBENT. ALL COMPENSATION CHANGES WERE EFFECTIVE JULY 1, 2023.
FORM 990, PART VI, LINE 17 - STATES WITH WHICH A COPY OF THIS FORM 990 IS REQUIRED TO BE FILED	CA, CT, GA, HI, IL, KS, KY, MA, MD, ME, MI, MN, MS, NC, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	UPON REQUEST, THE OFFICE OF THE CHIEF FINANCIAL OFFICER MAKES AVAILABLE TO THE PUBLIC THE INSTITUTE'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY. FINANCIAL STATEMENTS ARE AVAILABLE ON THE SALK WEBSITE.
FORM 990, PART VII, SECTION A - DIRECTORS COMPENSATION	THE FOLLOWING INDIVIDUALS WERE COMPENSATED FOR THE FOLLOWING SERVICES AND NOT PAID AS TRUSTEES: FRED GAGE, PH.D. - PRESIDENT/PROFESSOR; REUBEN SHAW, PH.D. - PROFESSOR; MARTYN GOULDING, PH.D. - PROFESSOR; TATYANA SHARPEE, PH.D. - PROFESSOR.

Return Reference - Identifier	Explanation	
FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES	(a) Description	(b) Amount
	POSTRETIREMENT BENEFIT CHANGES OTHER THAN NET PERIODIC BENEFIT COST	726,028
	CHANGE IN VALUE OF DEFERRED GIFTS	- 46,590
	ROUNDING	- 2

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

THE SALK INSTITUTE FOR BIOLOGICAL STUDIES

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 for instructions and the latest information.

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Employer identification number

95-2160097

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Cat. No. 50135Y

Schedule R (Form 990) 2022

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512–514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)-----												
(2)-----												
(3)-----												
(4)-----												
(5)-----												
(6)-----												
(7)-----												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)(SEE STATEMENT)-----									
(2)-----									
(3)-----									
(4)-----									
(5)-----									
(6)-----									
(7)-----									

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.

	Yes	No
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.

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

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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512–514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part IV**Identification of Related Organizations Taxable as a Corporation or Trust** (continued)

(a) Name, address and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C-corp, S-corp or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) SALK INSTITUTE COMMERCIAL SERVICES CORP (23-2159172) 10010 N. TORREY PINES ROAD, LA JOLLA, CA 92037-1002	MGMT SERVICES	PA	SALK INSTITUTE	C CORPORATION	4	41,138	100.00	✓	
(2) CHARITABLE REMAINDER TRUSTS (5)	SUPPORT	CA	N/A	TRUST					