

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2023**Open to Public Inspection**

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

Do not enter social security numbers on this form as it may be made public.

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

A For the 2023 calendar year, or tax year beginning <u>07/01</u> , 2023, and ending <u>06/30</u> , 20 <u>24</u>																									
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization <u>THE SALK INSTITUTE FOR BIOLOGICAL STUDIES</u></td> <td>D Employer identification number <u>95-2160097</u></td> </tr> <tr> <td colspan="2">Doing business as</td> <td rowspan="3">E Telephone number <u>(858) 453-4100</u></td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> </tr> <tr> <td colspan="2"><u>10010 N TORREY PINES ROAD</u></td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code <u>LA JOLLA, CA 92037-1002</u></td> <td rowspan="2">G Gross receipts \$ <u>448,822,367</u></td> </tr> <tr> <td colspan="2">F Name and address of principal officer: <u>GERALD JOYCE</u> <u>SAME AS C ABOVE</u></td> </tr> <tr> <td colspan="2">I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td> H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions. </td> </tr> <tr> <td colspan="2">J Website: <u>WWW.SALK.EDU</u></td> <td>H(c) Group exemption number</td> </tr> <tr> <td colspan="2">K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other</td> <td>L Year of formation: <u>1960</u> M State of legal domicile: <u>CA</u></td> </tr> </table>	C Name of organization <u>THE SALK INSTITUTE FOR BIOLOGICAL STUDIES</u>		D Employer identification number <u>95-2160097</u>	Doing business as		E Telephone number <u>(858) 453-4100</u>	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<u>10010 N TORREY PINES ROAD</u>		City or town, state or province, country, and ZIP or foreign postal code <u>LA JOLLA, CA 92037-1002</u>		G Gross receipts \$ <u>448,822,367</u>	F Name and address of principal officer: <u>GERALD JOYCE</u> <u>SAME AS C ABOVE</u>		I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions.	J Website: <u>WWW.SALK.EDU</u>		H(c) Group exemption number	K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: <u>1960</u> M State of legal domicile: <u>CA</u>
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Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>BASIC RESEARCH IN THE FOLLOWING: MOLECULAR BIOLOGY & GENETICS, NEUROSCIENCE, AND PLANT BIOLOGY.</u>
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3	Number of voting members of the governing body (Part VI, line 1a) 3 <u>28</u>
	4	Number of independent voting members of the governing body (Part VI, line 1b) 4 <u>24</u>
	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 <u>1,144</u>
	6	Total number of volunteers (estimate if necessary) 6 <u>24</u>
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 7a <u>(1,432,732)</u>
b	Net unrelated business taxable income from Form 990-T, Part I, line 11 7b <u>0</u>	
Revenue	8	Contributions and grants (Part VIII, line 1h) <u>150,813,576</u>
	9	Program service revenue (Part VIII, line 2g) <u>0</u>
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) <u>21,763,570</u>
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <u>1,075,216</u>
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) <u>173,652,362</u>
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3) <u>0</u>
	14	Benefits paid to or for members (Part IX, column (A), line 4) <u>0</u>
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) <u>91,143,114</u>
	16a	Professional fundraising fees (Part IX, column (A), line 11e) <u>0</u>
	b	Total fundraising expenses (Part IX, column (D), line 25) <u>6,599,611</u>
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) <u>76,263,720</u>
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) <u>167,406,834</u>
19	Revenue less expenses. Subtract line 18 from line 12 <u>6,245,528</u>	
Net Assets or Fund Balances	20	Total assets (Part X, line 16) <u>805,255,578</u>
	21	Total liabilities (Part X, line 26) <u>172,966,503</u>
	22	Net assets or fund balances. Subtract line 21 from line 20 <u>632,289,075</u>

Part II Signature Block

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

Sign Here		<u>04/09/2025</u>			
	Signature of officer <u>KIMBERLY M CASTILLO, CFO</u> Type or print name and title	Date			
Paid Preparer Use Only	Print/Type preparer's name <u>STEVEN T. RUTTI</u>	Preparer's signature 	Date <u>04/07/2025</u>	Check <input type="checkbox"/> if self-employed	PTIN <u>P00775456</u>
	Firm's name <u>ERNST & YOUNG US LLP</u>			Firm's EIN <u>34-6565596</u>	
	Firm's address <u>101 E WASHINGTON ST, PHOENIX, AZ 85004</u>			Phone no. <u>(602) 322-3000</u>	

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form **990** (2023)

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:

UNLOCKING THE SECRETS OF LIFE ITSELF IS THE DRIVING FORCE BEHIND THE SALK INSTITUTE. OUR TEAM OF
WORLD-CLASS, AWARD-WINNING SCIENTISTS PUSHES BOUNDARIES OF KNOWLEDGE IN AREAS SUCH AS
NEUROSCIENCE, CANCER RESEARCH, AGING, IMMUNOBIOLOGY, PLANT BIOLOGY, COMPUTATIONAL BIOLOGY, AND
(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 \$ 147,208,206 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 147,208,206

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>	1 ✓	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2 ✓	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	✓
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>	4 ✓	
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>	5	✓
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	✓
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	✓
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	✓
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	✓
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 ✓	
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>	11a ✓	
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>	11b ✓	
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>	11c	✓
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>	11d	✓
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e ✓	
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>	11f ✓	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a ✓	
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>	12b	✓
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	✓
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	✓
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>	14b ✓	
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>	15	✓
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>	16	✓
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>	17	✓
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>	18 ✓	
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>	19	✓
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	✓
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	✓

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>	22	✓
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>	23	✓
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>	24a	✓
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
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>	25a	✓
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>	25b	✓
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>	26	✓
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>	27	✓
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>	28a	✓
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	✓
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>	28c	✓
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29	✓
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>	30	✓
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	✓
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>	32	✓
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>	33	✓
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>	34	✓
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	✓
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>	35b	✓
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>	36	✓
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>	37	✓
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	38	✓

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	149
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	✓

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 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? If "No" to line 3b, provide an explanation on Schedule O	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? If "No," provide an explanation on Schedule O	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 1a 28 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
b Enter the number of voting members included on line 1a, above, who are independent 1b 24		
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?	2	<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?	3	<input checked="" type="checkbox"/>
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<input checked="" type="checkbox"/>
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	<input checked="" type="checkbox"/>
6 Did the organization have members or stockholders?	6	<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?	7a	<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?	7b	<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?	8a	<input checked="" type="checkbox"/>
b Each committee with authority to act on behalf of the governing body?	8b	<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	9	<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?	10a	<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?	11a	<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	12a	<input checked="" type="checkbox"/>
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	<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	12c	<input checked="" type="checkbox"/>
13 Did the organization have a written whistleblower policy?	13	<input checked="" type="checkbox"/>
14 Did the organization have a written document retention and destruction policy?	14	<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	15a	<input checked="" type="checkbox"/>
b Other officers or key employees of the organization	15b	<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?	16a	<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, CA, (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 ContractorsCheck 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) GERALD JOYCE, MD, PH.D. PRESIDENT / PROFESSOR	50.0	✓		✓				761,791	0	56,240
(2) FRED GAGE, PH.D. PROFESSOR	50.0					✓		585,895	0	58,365
(3) KIM E WITMER TREASURER/SVP FINANCE & ADMN	50.0			✓				523,931	0	48,414
(4) BRYAN ROBINSON VP, EXTERNAL RELATIONS	50.0					✓		500,110	0	47,465
(5) JULIA A MILLER, J.D. SECRETARY/GENERAL COUNSEL	50.0			✓				414,822	0	62,210
(6) RONALD EVANS, PH.D. PROFESSOR	50.0					✓		435,269	0	35,772
(7) REUBEN SHAW, PH.D. TRUSTEE/PROFESSOR	50.0	✓				✓		408,448	0	53,564
(8) SAMUEL PFAFF, PH.D. PROFESSOR	50.0					✓		379,480	0	57,673
(9) WOLFGANG BUSCH, PH.D. TRUSTEE/PROFESSOR	50.0	✓						349,121	0	49,249
(10) KIMBERLY CASTILLO CHIEF FINANCIAL OFFICER	50.0			✓				325,608	0	56,562
(11) JANELLE AYRES, PH.D. TRUSTEE/PROFESSOR	50.0	✓						269,237	0	40,484
(12) TATYANA SHARPEE, PH.D. TRUSTEE/PROFESSOR (OUTGOING MAR 2024)	50.0	✓						259,119	0	45,248
(13) MARKUS REINHARD VICE CHAIR	2.0	✓		✓				0	0	0
(14) MARNA C WHITTINGTON, PH.D. CHAIR	2.0	✓		✓				0	0	0

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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) RICHARD A HEYMAN, PH.D. VICE CHAIR	2.0	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
(16) ALAN D GOLD TRUSTEE (OUTGOING NOV 2023)	0.5	<input checked="" type="checkbox"/>						0	0	0
(17) AMY JACOBS 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 GALLAGHER, 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 (OUTGOING JULY 2023)	0.5	<input checked="" type="checkbox"/>						0	0	0
(25) (SEE STATEMENT)										
1b Subtotal								5,212,831	0	611,246
c Total from continuation sheets to Part VII, Section A								0	0	0
d Total (add lines 1b and 1c)								5,212,831	0	611,246
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								167		

	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
RUDOLPH & SLETTEN INC, 7584 METROPOLITAN DR STE 100, SAN DIEGO, CA 92108	CONSTRUCTION SERVICE
EAST END ADVISORS, LLC, 610 FIFTH AVENUE, SUITE 506, NEW YORK, NY 10020	INVESTMENT ADVISOR
UNIVERSITY OF CALIFORNIA, SAN DIEGO, 9500 GILMAN DRIVE, LA JOLLA, CA 92093	TRNG PROGRAM/SUBCONT
A.O. REED & CO, 4777 RUFFIN STREET, SAN DIEGO, CA 92111	CONSTRUCTION SERVICE
SHOW IMAGING INC, 1125 JOSHUA WAY, VISTA, CA 92081	ENTERTAINMENT SERVICE
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	16

Part VIII Statement of RevenueCheck 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				
	b	Membership dues	1b				
	c	Fundraising events	1c	920,400			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	82,929,715			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	55,544,316			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 2,882,637			
	h	Total. Add lines 1a-1f		139,394,431			
	Program Service Revenue				Business Code		
2a							
b							
c							
d							
e							
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)		9,038,204		(1,432,732)	10,470,936
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties		1,011,800			1,011,800
	6a	Gross rents	(i) Real				
	b	Less: rental expenses	(ii) Personal				
	c	Rental income or (loss)		0	0		
	d	Net rental income or (loss)					
	7a	Gross amount from sales of assets other than inventory	(i) Securities	299,192,646			
	b	Less: cost or other basis and sales expenses . .	(ii) Other	286,190,780			
	c	Gain or (loss)		13,001,866	0		
	d	Net gain or (loss)		13,001,866			13,001,866
	8a	Gross income from fundraising events (not including \$ 920,400 of contributions reported on line 1c). See Part IV, line 18		153,300			
	b	Less: direct expenses		1,465,117			
	c	Net income or (loss) from fundraising events		(1,311,817)			(1,311,817)
	9a	Gross income from gaming activities. See Part IV, line 19					
	b	Less: direct expenses					
	c	Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less returns and allowances					
	b	Less: cost of goods sold					
	c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue				Business Code			
	11a	ROYALTIES	900099	1,183			1,183
	b	A/R RECHARGE ALLOWANCE	900099	28,806			28,806
	c	REVENUE SHARE-HOST VEHICLE CHARGING STAT	900099	1,997			1,997
	d	All other revenue		0	0	0	0
	e	Total. Add lines 11a-11d		31,986			
12	Total revenue. See instructions			161,166,470	0	(1,432,732)	23,204,771

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	3,109,959	1,236,676	1,784,936	88,347
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	71,543,965	59,576,885	8,306,292	3,660,788
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,874,763	4,095,746	525,735	253,282
9 Other employee benefits	8,664,051	7,280,929	934,589	448,533
10 Payroll taxes	5,172,392	4,345,812	557,834	268,746
11 Fees for services (nonemployees):				
a Management	394,545	65,000	329,545	0
b Legal	979,867	252,352	727,515	0
c Accounting	276,990	0	276,990	0
d Lobbying	3,100	0	3,100	0
e Professional fundraising services. See Part IV, line 17	0			0
f Investment management fees	2,870,948	0	2,870,948	0
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	13,741,606	12,298,542	825,907	617,157
12 Advertising and promotion	27,535	7,153	7,323	13,059
13 Office expenses	752,066	222,101	404,540	125,425
14 Information technology	4,040,059	2,764,439	995,943	279,677
15 Royalties	0	0	0	0
16 Occupancy	11,355,383	8,635,643	2,314,262	405,478
17 Travel	1,172,063	1,002,520	53,449	116,094
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19 Conferences, conventions, and meetings	1,640,570	1,203,731	243,991	192,848
20 Interest	684,922	0	684,922	0
21 Payments to affiliates	0	0	0	0
22 Depreciation, depletion, and amortization	12,023,131	10,995,942	925,065	102,124
23 Insurance	427,138	0	427,138	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>	17,621,097	17,621,097	0	0
b <u>RESEARCH SUPPLIES</u>	15,161,358	15,161,358	0	0
c <u>OTHER EXPENSES</u>	405,324	184,477	193,787	27,060
d <u>REPAIRS & PARTS</u>	264,385	257,803	5,589	993
e All other expenses	22,019	0	22,019	0
25 Total functional expenses. Add lines 1 through 24e	177,229,236	147,208,206	23,421,419	6,599,611
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 SheetCheck 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	8,278,560	1	9,611,719
	2 Savings and temporary cash investments	24,496,644	2	34,743,132
	3 Pledges and grants receivable, net	36,602,578	3	38,515,677
	4 Accounts receivable, net	1,159,918	4	1,427,815
	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	409,357	5	304,304
	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	2,276,567	7	2,445,253
	8 Inventories for sale or use	23,735	8	13,522
	9 Prepaid expenses and deferred charges	1,339,293	9	932,459
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 286,923,828		
	b Less: accumulated depreciation	10b 210,401,712	10c	76,522,116
	11 Investments—publicly traded securities	145,400,000	11	128,474,605
	12 Investments—other securities. See Part IV, line 11	495,706,221	12	515,504,339
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	
	15 Other assets. See Part IV, line 11	14,822,631	15	14,283,070
16 Total assets. Add lines 1 through 15 (must equal line 33)	805,255,578	16	822,778,011	
Liabilities	17 Accounts payable and accrued expenses	41,913,073	17	47,596,671
	18 Grants payable	0	18	0
	19 Deferred revenue	25,958,026	19	24,485,921
	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	94,236,307	23	92,138,737
	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	10,859,097	25	9,149,952
	26 Total liabilities. Add lines 17 through 25	172,966,503	26	173,371,281
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	112,765,719	27	119,439,210
	28 Net assets with donor restrictions	519,523,356	28	529,967,520
	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	632,289,075	32	649,406,730
33 Total liabilities and net assets/fund balances	805,255,578	33	822,778,011	

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Part XI Reconciliation of Net AssetsCheck 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	161,166,470
2	Total expenses (must equal Part IX, column (A), line 25)	2	177,229,236
3	Revenue less expenses. Subtract line 2 from line 1	3	(16,062,766)
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	632,289,075
5	Net unrealized gains (losses) on investments	5	33,334,875
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	(154,454)
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	649,406,730

Part XII Financial Statements and ReportingCheck 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		✓
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	✓	
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.	✓	
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? . . .	✓	
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 .	✓	

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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 (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) EDWIN K HUNTER ----- TRUSTEE	0.5 -----	✓						0	0	0
(26) ERIC SAGERMAN ----- TRUSTEE	2.0 -----	✓						0	0	0
(27) FREDERICK J DOTZLER ----- TRUSTEE	0.5 -----	✓						0	0	0
(28) FREDERIK PAULSEN, PH.D. ----- TRUSTEE	0.5 -----	✓						0	0	0
(29) HAEYOUNG KONG TANG, PH.D. ----- TRUSTEE	2.0 -----	✓						0	0	0
(30) HOWARD H NEWMAN, PH.D. ----- TRUSTEE	0.5 -----	✓						0	0	0
(31) IRVING WEISSMAN, M.D. ----- TRUSTEE	0.5 -----	✓						0	0	0
(32) IRWIN M JACOBS, S.M, SC.D. ----- CHAIR EMERITUS (OUTGOING NOV 2023)	2.0 -----	✓						0	0	0
(33) JAY FLATLEY ----- TRUSTEE	2.0 -----	✓						0	0	0
(34) LYN HUTTON ----- TRUSTEE	2.0 -----	✓						0	0	0
(35) MARK KNICKREHM ----- TRUSTEE	0.5 -----	✓						0	0	0
(36) MARY JANE SALK ----- TRUSTEE	0.5 -----	✓						0	0	0
(37) SANJAY K JHA, PH.D. ----- TRUSTEE	0.5 -----	✓						0	0	0
(38) TERRY ROSEN, PH.D. ----- TRUSTEE	2.0 -----	✓						0	0	0
(39) 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

2023**Open to Public
Inspection**

Name of the organization

THE SALK INSTITUTE FOR BIOLOGICAL STUDIES

Employer identification number

95-2160097

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) 2023

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	160,545,802	176,855,692	138,798,417	150,881,176	139,394,431	766,475,518
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	160,545,802	176,855,692	138,798,417	150,881,176	139,394,431	766,475,518
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)						12,874,606
6 Public support. Subtract line 5 from line 4						753,600,912

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	160,545,802	176,855,692	138,798,417	150,881,176	139,394,431	766,475,518
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4,322,033	6,807,160	9,621,065	6,721,516	10,050,004	37,521,778
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.)	3,315	1,945	4,857	2,864	31,986	44,967
11 Total support. Add lines 7 through 10						804,042,263
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 2023 (line 6, column (f), divided by line 11, column (f))	14	93.73 %
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	94.55 %
16a 33¹/₃% support test—2023. 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 33¹/₃% support test—2022. 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—2023. 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—2022. 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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)) . . .	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%
19a 33¹/₃% support tests—2023. 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 . . . <input type="checkbox"/>		
b 33¹/₃% support tests—2022. 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 . . . <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . <input type="checkbox"/>		

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>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer 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>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</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>		
b 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>		
c 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>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described 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) 2023

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 2023 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-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019 . . .			
b Excess from 2020 . . .			
c Excess from 2021 . . .			
d Excess from 2022 . . .			
e Excess from 2023 . . .			

Schedule A (Form 990) 2023

Part VI

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

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						
SCHEDULE A, PART II, LINE 10 - OTHER INCOME	Description	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	(1) ROYALTIES	1,093	993	2,851	1,781	1,183	7,901
	(2) REVENUE SHARING-HOST VEHICLE CHARGING STATION	1,228	952	2,006	1,083	1,997	7,266
	(3) NET GIFT SHOP SALES	994	0	0	0	0	994
	(4) AR RECHARGE ALLOWANCE	0	0	0	0	28,806	28,806
	Total	3,315	1,945	4,857	2,864	31,986	44,967

**Schedule B
(Form 990)**Department of the Treasury
Internal Revenue Service**Schedule of Contributors**Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

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

☒ 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 foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

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

Special Rules

- ☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 $\frac{1}{3}$ % 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

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		\$ 79,853,353	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.)
		\$	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) (See instructions.)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-----	----- ----- ----- -----	\$ -----	-----

Name of organization

THE SALK INSTITUTE FOR BIOLOGICAL STUDIES

Employer identification number

95-2160097

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)Department of the Treasury
Internal Revenue Service**Political Campaign and Lobbying Activities****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.

OMB No. 1545-0047

2023**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

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)				

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

Cat. No. 50084S

Schedule C (Form 990) 2023

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"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>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) 2020	(b) 2021	(c) 2022	(d) 2023	(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					

Schedule C (Form 990) 2023

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?	✓		3,100
j	Total. Add lines 1c through 1i			3,100
2a	Did the activities in line 1 cause the organization to not be 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, BIOCOT - \$400.

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023**Open to Public
Inspection**

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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Part II Conservation Easements

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

1 Purpose(s) of conservation easements held by the organization (check all that apply). <input type="checkbox"/> Preservation of land for public use (for example, recreation or education) <input type="checkbox"/> Preservation of a historically important land area <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure <input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	
4 Number of states where property subject to conservation easement is located	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? <input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year	
8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

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

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

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

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

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

a ☐ Public exhibition

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

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

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

Part IV Escrow and Custodial Arrangements

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in 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	351,101,623	345,211,760	375,050,161	299,166,085	286,834,762
b Contributions	4,828,947	4,585,120	1,603,261	14,926,831	6,580,341
c Net investment earnings, gains, and losses	31,788,749	17,999,745	(15,394,543)	74,973,285	17,530,495
d Grants or scholarships					
e Other expenditures for facilities and programs	16,900,459	16,695,002	16,047,119	14,016,040	11,779,513
f Administrative expenses					
g End of year balance	370,818,860	351,101,623	345,211,760	375,050,161	299,166,085

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

a Board designated or quasi-endowment 3.87 %

b Permanent endowment 69.51 %

c Term endowment 26.62 %

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

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

(i) Unrelated organizations? **3a(i)** Yes No ☒

(ii) Related organizations? **3a(ii)** Yes No ☒

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? **3b** Yes No ☐

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	56,127,835	8,082,145
c Leasehold improvements		100,100,412	70,489,610	29,610,802
d Equipment		120,527,559	82,860,875	37,666,684
e Other		931,947	923,392	8,555
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				76,522,116

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	486,545,877	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, line 12, col. (B)) . . .	515,504,339	

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, line 13, col. (B)) . . .		

Part IX Other Assets

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

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

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	4,585
(2) DEFERRED RETIREE MEDICAL OBLIG	4,129,876
(3) LEASE LIABILITY	5,015,491
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	9,149,952

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	167,039,603
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	33,334,875
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	(26,288,749)
e	Add lines 2a through 2d	2e	7,046,126
3	Subtract line 2e from line 1	3	159,993,477
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	2,637,713
b	Other (Describe in Part XIII.)	4b	(1,464,720)
c	Add lines 4a and 4b	4c	1,172,993
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	161,166,470

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

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

1	Total expenses and losses per audited financial statements	1	176,056,640
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	1,465,117
e	Add lines 2a through 2d	2e	1,465,117
3	Subtract line 2e from line 1	3	174,591,523
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	2,637,713
b	Other (Describe in Part XIII.)	4b	0
c	Add lines 4a and 4b	4c	2,637,713
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	177,229,236

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](#)

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 INCOME IN EXCESS OF AMOUNT DESIGNATED FOR CURRENT OPERATIONS	- 26,141,913
	CHANGE IN VALUE OF DEFERRED GIFTS	- 146,836
SCHEDULE D, PART XI, LINE 4(B) - OTHER REVENUE	(a) Description	(b) Amount
	FUNDRAISING EXPENSES	- 1,465,117
	ROUNDING	397
SCHEDULE D, PART XII, LINE 2(D) - OTHER EXPENSES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	(a) Description	(b) Amount
	FUNDRAISING EXPENSES	1,465,117

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, 2024 AND 2023.
SCHEDULE D, PART XI, LINE 2(D) -	INVESTMENT RETURN IN EXCESS OF AMOUNT DESIGNATED FOR CURRENT OPERATIONS UNDER SPENDING POLICY (\$26,141,913) AND CHANGE IN VALUE OF DEFERRED GIFTS (\$146,836)
SCHEDULE D, PART XI, LINE 4(B) -	FUNDRAISING EXPENSES (\$1,073,700) AND ROUNDING \$397
SCHEDULE D, PART XII, LINE 2(D) -	FUNDRAISING EVENTS EXPENSE \$1,073,700
SCHEDULE D, PART XII, LINE 4(B) -	ROUNDING \$1

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

OMB No. 1545-0047

2023**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization

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.	288,481
(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.	44,461
(3) SOUTH ASIA	0	0	PROGRAM SERVICES	SCIENTISTS TRAVEL TO FOREIGN COUNTRIES TO ATTEND CONFERENCES. WE DO NOT DEEM THESE ACTIVITIES TO CONSTITUTE WORKING IN THE REGION.	6,203
(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.	67,580
(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.	2,797
(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.	25,071
(7) CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		215,382,133
(8) EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	INVESTMENTS		37,220,916
(9) NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	INVESTMENTS		1,188,844
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal	0	0			254,226,486
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			254,226,486

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

Cat. No. 50082W

Schedule F (Form 990) 2023

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) 2023

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
SCHEDULE F, PART I, LINE 3 - METHOD USED TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	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 SOUTH AMERICA -ACCRUAL SOUTH ASIA -ACCRUAL

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

2023

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 <input type="checkbox"/> Mail solicitations | e <input type="checkbox"/> Solicitation of non-government grants |
| b <input type="checkbox"/> Internet and email solicitations | f <input type="checkbox"/> Solicitation of government grants |
| c <input type="checkbox"/> Phone solicitations | g <input type="checkbox"/> Special fundraising events |
| d <input type="checkbox"/> In-person solicitations | |
- 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.

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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	1,073,700			1,073,700
	2 Less: Contributions	920,400			920,400
	3 Gross income (line 1 minus line 2)	153,300	0	0	153,300
Direct Expenses	4 Cash prizes				0
	5 Noncash prizes				0
	6 Rent/facility costs				0
	7 Food and beverages	71,903			71,903
	8 Entertainment	620,088			620,088
	9 Other direct expenses	773,126			773,126
	10 Direct expense summary. Add lines 4 through 9 in column (d)				1,465,117
	11 Net income summary. Subtract line 10 from line 3, column (d)				(1,311,817)

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: _____

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**SCHEDULE J
(Form 990)**Department of the Treasury
Internal Revenue Service

Name of the organization

Compensation InformationFor certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated EmployeesComplete 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

2023**Open to Public
Inspection**

Employer identification number

95-2160097

THE SALK INSTITUTE FOR BIOLOGICAL STUDIES

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input checked="" type="checkbox"/> First-class or charter travel		
<input type="checkbox"/> Travel for companions		
<input type="checkbox"/> Tax indemnification and gross-up payments		
<input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Personal services (such as maid, chauffeur, chef)		
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.	✓	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	✓	
3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
<input checked="" type="checkbox"/> Compensation committee		
<input checked="" type="checkbox"/> Independent compensation consultant		
<input checked="" type="checkbox"/> Form 990 of other organizations		
<input type="checkbox"/> Written employment contract		
<input checked="" type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?		✓
b Participate in or receive payment from a supplemental nonqualified retirement plan?		✓
c Participate in or receive payment from an equity-based compensation arrangement?		✓
If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.		
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?		✓
b Any related organization?		✓
If "Yes" on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?		✓
b Any related organization?		✓
If "Yes" on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.		✓
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.		✓
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

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

Cat. No. 50053T

Schedule J (Form 990) 2023

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	GERALD JOYCE, MD, PH.D. PRESIDENT / PROFESSOR	751,123	0	10,668	39,600	16,640	818,031	0
		0	0	0	0	0	0	0
2	FRED GAGE, PH.D. PROFESSOR	568,480	0	17,415	39,600	18,765	644,260	0
		0	0	0	0	0	0	0
3	KIM E WITMER TREASURER/SVP FINANCE & ADMN	506,663	0	17,268	39,600	8,814	572,345	0
		0	0	0	0	0	0	0
4	BRYAN ROBINSON VP, EXTERNAL RELATIONS	470,601	0	29,509	33,000	14,465	547,575	0
		0	0	0	0	0	0	0
5	JULIA A MILLER, J.D. SECRETARY/GENERAL COUNSEL	385,649	0	29,173	39,600	22,610	477,032	0
		0	0	0	0	0	0	0
6	RONALD EVANS, PH.D. PROFESSOR	406,745	0	28,524	33,000	2,772	471,041	0
		0	0	0	0	0	0	0
7	REUBEN SHAW, PH.D. TRUSTEE/PROFESSOR	261,343	0	147,105	39,600	13,964	462,012	0
		0	0	0	0	0	0	0
8	SAMUEL PFAFF, PH.D. PROFESSOR	306,990	0	72,490	38,688	18,985	437,153	0
		0	0	0	0	0	0	0
9	WOLFGANG BUSCH, PH.D. TRUSTEE/PROFESSOR	217,250	0	131,871	37,284	11,965	398,370	0
		0	0	0	0	0	0	0
10	KIMBERLY CASTILLO CHIEF FINANCIAL OFFICER	315,835	0	9,773	39,600	16,962	382,170	0
		0	0	0	0	0	0	0
11	JANELLE AYRES, PH.D. TRUSTEE/PROFESSOR	263,290	0	5,947	32,175	8,309	309,721	0
		0	0	0	0	0	0	0
12	TATYANA SHARPEE, PH.D. TRUSTEE/PROFESSOR (OUTGOING MAR 2024)	240,373	0	18,746	31,394	13,854	304,367	0
		0	0	0	0	0	0	0
13								
14								
15								
16								

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, PH.D., PROFESSOR - \$16,705; JANELLE AYRES, PH.D., PROFESSOR - \$7,632; JAN KARLSEDER, PH.D., PROFESSOR - \$7,312; WOLFGANG BUSCH, PH.D., PROFESSOR - \$4,115. 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

2023**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	274,164		✓	✓		✓	
(2) TATYANA SHARPEE	PROFESSOR	HOME LOAN		✓	30,140	30,140		✓	✓		✓	
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total						\$ 304,304						

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)				

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

Cat. No. 50056A

Schedule L (Form 990) 2023

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V	Supplemental Information.
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Provide additional information for responses to questions on Schedule L (see instructions).

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

SCHEDULE M
(Form 990)**Noncash Contributions**

OMB No. 1545-0047

2023**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service**Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
Attach to Form 990.**Go to www.irs.gov/Form990 for instructions and the latest information.**

Name of the organization

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 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	✓	84	2,882,637	MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement			29	0
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?				Yes No 30a ✓
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?				31 ✓
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?				32a ✓
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
		2023 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	MORE. FOUNDED BY JONAS SALK, DEVELOPER OF THE FIRST SAFE AND EFFECTIVE POLIO VACCINE, THE INSTITUTE IS AN INDEPENDENT, NONPROFIT RESEARCH ORGANIZATION AND ARCHITECTURAL LANDMARK: SMALL BY CHOICE, INTIMATE BY NATURE, AND FEARLESS IN THE FACE OF ANY CHALLENGE.

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 4A - CONTINUED ¹	<p>PREYING ON HUNGRY, ANXIOUS WORMS-THE LIFE OF THE TINY WORM CALLED C. ELEGANS CONSISTS MOSTLY OF LOOKING FOR FOOD, EATING FOOD, AND LAYING EGGS. SO, WHEN ANY OF THESE BEHAVIORS IS DISRUPTED, THERE'S CAUSE FOR CONCERN. IN A NEW STUDY, SALK RESEARCHERS DISCOVERED THAT THE "FEEL GOOD" BRAIN CHEMICAL DOPAMINE REGULATES ANXIOUS WORM BEHAVIOR IN THE PRESENCE OF NIPPING PREDATORS. THE FINDINGS ILLUMINATE HOW THIS DOPAMINE-REGULATED BRAIN PATHWAY MAY BE RELATED TO ANXIETY AND COULD PROVIDE INSIGHT INTO HUMAN CONDITIONS, SUCH AS POST-TRAUMATIC STRESS DISORDER (PTSD). THE STUDY WAS LED BY PROFESSOR SREEKANTH CHALASANI AND PUBLISHED IN ELIFE ON JULY 11, 2023.</p> <p>REVEALING HIV DRUG-RESISTANCE MECHANISMS THROUGH PROTEIN STRUCTURES-SALK SCIENTISTS, IN COLLABORATION WITH THE NATIONAL INSTITUTES OF HEALTH, DISCOVERED THE MOLECULAR MECHANISMS BY WHICH THE HUMAN IMMUNODEFICIENCY VIRUS (HIV) BECOMES RESISTANT TO DOLUTEGRAVIR, ONE OF THE MOST EFFECTIVE, CLINICALLY USED ANTIVIRAL DRUGS FOR TREATING THE INFECTION. THE NEW STUDY REVEALS HOW CHANGES TO THE 3D STRUCTURES OF INTEGRASE, AN HIV PROTEIN, CAN LEAD TO DOLUTEGRAVIR RESISTANCE AND HOW OTHER COMPOUNDS MAY BE ABLE TO OVERCOME THIS RESISTANCE. THE STUDY WAS LED BY ASSOCIATE PROFESSOR DMITRY LYUMKIS AND PUBLISHED IN SCIENCE ADVANCES ON JULY 21, 2023.</p> <p>WHY WE LOSE FAT AND MUSCLE DURING INFECTION-A SALK TEAM DISCOVERED THE WASTING RESPONSE-LOSS OF FAT AND MUSCLE-TO INFECTION WITH THE BACTERIA T. BRUCEI IN MICE OCCURS IN TWO PHASES, EACH REGULATED BY DIFFERENT T CELL SUBTYPES. WHILE FAT LOSS DID NOT BENEFIT THE FIGHT AGAINST INFECTION, MUSCLE LOSS DID-A SURPRISING CLUE THAT SOME WASTING MAY HELP MANAGE ILLNESS. THE FINDINGS CAN INFORM THE DEVELOPMENT OF MORE EFFECTIVE THERAPEUTICS THAT SPARE PEOPLE FROM WASTING AND INCREASE OUR UNDERSTANDING OF HOW WASTING INFLUENCES SURVIVAL AND MORBIDITY ACROSS INFECTIONS, CANCERS, CHRONIC ILLNESSES, AND MORE. THE STUDY WAS LED BY PROFESSOR JANELLE AYRES AND PUBLISHED IN CELL REPORTS ON JULY 24, 2023.</p> <p>USING THE BODY'S "INVISIBLE SCALPEL" TO REMOVE BRAIN CANCER-SALK RESEARCHERS FOUND THAT HELPER T CELLS PLAY A CRUCIAL ROLE IN THE SUCCESS OF THE IMMUNOTHERAPY TREATMENT ANTI-CTLA-4 IN MICE WITH GLIOBLASTOMA, THE MOST COMMON AND DEADLY FORM OF BRAIN CANCER. THE IMMUNOTHERAPY'S SUCCESS DEPENDED ON HELPER T CELLS PAIRING UP WITH BRAIN-RESIDENT IMMUNE CELLS CALLED MICROGLIA-DEMONSTRATING THE VALUE OF THE IMMUNE SYSTEM'S QUILTED CONNECTIONS. THE FINDINGS SHOW THE BENEFIT OF HARNESSING THE BODY'S OWN IMMUNE CELLS TO FIGHT BRAIN CANCER AND COULD LEAD TO MORE EFFECTIVE IMMUNOTHERAPIES FOR TREATING BRAIN CANCER IN HUMANS. THE STUDY WAS LED BY PROFESSOR SUSAN KAECH AND PUBLISHED IN IMMUNITY ON AUGUST 11, 2023.</p> <p>HIGH-FAT DIETS ALTER GUT BACTERIA, BOOSTING COLORECTAL CANCER RISK IN MICE-THE PREVALENCE OF COLORECTAL CANCER IN PEOPLE UNDER THE AGE OF 50 HAS RISEN IN RECENT DECADES. ONE SUSPECTED REASON: THE INCREASING RATE OF OBESITY AND HIGH-FAT DIETS. NOW, SALK SCIENTISTS, IN COLLABORATION WITH UC SAN DIEGO, DISCOVERED EXACTLY HOW HIGH-FAT DIETS CAN CHANGE GUT BACTERIA AND ALTER DIGESTIVE MOLECULES CALLED BILE ACIDS, PREDISPOSING MICE TO COLORECTAL CANCER. THE FINDINGS HELP SCIENTISTS BETTER UNDERSTAND COLORECTAL CANCER AND HOW TO POTENTIALLY PREVENT IT. THE STUDY WAS LED BY PROFESSOR RONALD EVANS AND PUBLISHED IN CELL REPORTS ON AUGUST 22, 2023.</p> <p>"SUPER-ENHANCER" SUPER-CHARGES PANCREATIC TUMOR GROWTH-PANCREATIC CANCERS ARE AMONG THE MOST AGGRESSIVE, DEADLY TUMOR TYPES AND FOR YEARS RESEARCHERS HAVE STRUGGLED TO DEVELOP EFFECTIVE DRUGS AGAINST THE TUMORS. A SALK TEAM IDENTIFIED A NEW SET OF MOLECULES THAT FUEL THE GROWTH OF TUMORS IN PANCREATIC DUCTAL ADENOCARCINOMA (PDAC), THE MOST COMMON TYPE OF PANCREATIC CANCER. THE NEW RESEARCH EXPLAINS HOW CERTAIN GENE MUTATIONS TRIGGER OUT-OF-CONTROL GROWTH IN PANCREATIC CANCER BY ACTIVATING A "SUPER-ENHANCER" THAT TURNS ON OTHER GENES. THEY ALSO SHOW THE EFFECTIVENESS OF A NEW DRUG THAT PUTS THE BRAKES ON PANCREATIC CANCER GROWTH BY BLOCKING THE EFFECTS OF THAT SUPER-ENHANCER. THE STUDY WAS LED BY PROFESSOR RONALD EVANS AND PUBLISHED IN NATURE COMMUNICATIONS ON SEPTEMBER 6, 2023.</p> <p>REDUCING STRESS ON T CELLS MAKES THEM BETTER CANCER FIGHTERS-EVEN FOR KILLER T CELLS-SPECIALIZED IMMUNE CELLS-SEEKING AND DESTROYING CANCER CELLS AROUND THE CLOCK CAN BE EXHAUSTING. IN A NEW STUDY, SALK SCIENTISTS DISCOVERED THE BODY'S SYMPATHETIC STRESS RESPONSE ("FIGHT-OR-FLIGHT") HORMONES CAN EXHAUST KILLER T CELLS IN VARYING CANCER TYPES IN MOUSE AND HUMAN TISSUE SAMPLES-AND THAT EXHAUSTION CAN BE INHIBITED WITH BETA-BLOCKERS. THEIR DISCOVERY DEMONSTRATES THE POTENTIAL BENEFIT OF PAIRING BETA-BLOCKERS WITH EXISTING IMMUNOTHERAPIES TO IMPROVE CANCER TREATMENT BY BOLSTERING KILLER T CELL FUNCTION. THE STUDY WAS LED BY PROFESSOR SUSAN KAECH AND PUBLISHED IN NATURE ON SEPTEMBER 20, 2023.</p> <p>REWIRING TUMOR MITOCHONDRIA ENHANCES THE IMMUNE SYSTEM'S ABILITY TO RECOGNIZE AND FIGHT CANCER-IMMUNOTHERAPY, WHICH USES THE BODY'S OWN IMMUNE SYSTEM TO FIGHT CANCER, IS AN EFFECTIVE TREATMENT OPTION, YET MANY PATIENTS DO NOT RESPOND TO IT. THUS, CANCER RESEARCHERS ARE SEEKING NEW WAYS TO OPTIMIZE IMMUNOTHERAPY SO THAT IT IS MORE EFFECTIVE FOR MORE PEOPLE. RESEARCHERS AT SALK FOUND THAT MANIPULATING AN EARLY STEP IN ENERGY PRODUCTION IN MITOCHONDRIA-THE CELL'S POWERHOUSES-REDUCES MELANOMA TUMOR GROWTH AND ENHANCES THE IMMUNE RESPONSE IN MICE. IN THE FUTURE, THIS MANIPULATION OF MITOCHONDRIA ENERGY PRODUCTION MAY BE LEVERAGED TO CREATE NEW CANCER THERAPEUTICS THAT ARE LESS HARMFUL FOR MITOCHONDRIA AND CELLS. THE STUDY WAS LED BY PROFESSORS SUSAN KAECH AND GERALD SHADEL AND PUBLISHED IN SCIENCE ON SEPTEMBER 21, 2023.</p> <p>UNLEASHING THE POWER OF AI TO TRACK ANIMAL BEHAVIOR-MOVEMENT OFFERS A WINDOW INTO HOW THE BRAIN OPERATES AND CONTROLS THE BODY. METHODS FOR TRACKING HUMAN AND ANIMAL MOVEMENT HAVE COME A LONG WAY, WITH CURRENT CUTTING-EDGE METHODS UTILIZING ARTIFICIAL INTELLIGENCE TO AUTOMATICALLY TRACK PARTS OF THE BODY AS THEY MOVE.</p>

Return Reference - Identifier	Explanation
	<p>HOWEVER, TRAINING THESE MODELS IS STILL TIME-INTENSIVE AND LIMITED BY THE NEED FOR RESEARCHERS TO MANUALLY MARK EACH BODY PART HUNDREDS TO THOUSANDS OF TIMES. A SALK TEAM CREATED GLOWTRACK, A NONINVASIVE MOVEMENT-TRACKING METHOD THAT USES FLUORESCENT DYE MARKERS TO TRAIN ARTIFICIAL INTELLIGENCE. GLOWTRACK IS ROBUST, TIME-EFFICIENT, AND HIGH DEFINITION-CAPABLE OF TRACKING A SINGLE DIGIT ON A MOUSE'S PAW OR HUNDREDS OF LANDMARKS ON A HUMAN HAND. THE STUDY WAS LED BY ASSOCIATE PROFESSOR EIMAN AZIM AND PUBLISHED IN NATURE COMMUNICATIONS ON SEPTEMBER 26, 2023.</p> <p>"A NEW ERA IN BRAIN SCIENCE": UNVEILING HUMAN BRAIN CELL ATLAS-SALK COLLEAGUES AND GLOBAL COLLABORATORS ANALYZED MORE THAN HALF A MILLION BRAIN CELLS FROM THREE HUMAN BRAINS TO ASSEMBLE AN ATLAS OF HUNDREDS OF CELL TYPES THAT MAKE UP A HUMAN BRAIN IN UNPRECEDENTED DETAIL. THE MASSIVE SCIENTIFIC COLLABORATION IS A PART OF THE NATIONAL INSTITUTES OF HEALTH'S BRAIN INITIATIVE, AN EFFORT LAUNCHED IN 2014 TO DESCRIBE THE FULL PLETHORA OF CELLS IN MAMMALIAN BRAINS. MORE DETAILED WORK ON A LARGER NUMBER OF BRAINS, ECKER SAYS, WILL PAVE THE WAY TOWARD A BETTER UNDERSTANDING OF HOW CERTAIN BRAIN CELL TYPES CAN MALFUNCTION IN BRAIN DISORDERS AND DISEASES. THE STUDY WAS LED BY PROFESSOR JOSEPH ECKER AND RESEARCH PROFESSOR MARGARITA BEHRENS AND WAS PUBLISHED IN SCIENCE ON OCTOBER 13, 2023.</p> <p>GENETIC ARCHITECTURE MAY BE KEY TO USING PEACEKEEPING IMMUNE CELLS TO TREAT AUTOIMMUNITY OR FIGHT CANCER-REGULATORY T CELLS ARE SPECIALIZED IMMUNE CELLS THAT SUPPRESS THE IMMUNE RESPONSE AND PREVENT THE BODY FROM ATTACKING ITS OWN CELLS. UNDERSTANDING HOW THESE CELLS WORK IS KEY TO DETERMINING HOW THEY MIGHT BE MANIPULATED TO ENCOURAGE THE DESTRUCTION OF CANCER CELLS OR PREVENT AUTOIMMUNITY. CELL BEHAVIOR IS INFLUENCED BY CHROMATIN ARCHITECTURE (THE 3D SHAPE OF CHROMOSOMES) AND WHICH GENES ARE ACCESSIBLE TO PROTEINS-LIKE FOXP3, WHICH PROMOTES REGULATORY T CELL DEVELOPMENT. SALK RESEARCHER REVEALED THAT FOXP3 IS ESSENTIAL FOR CREATING THE UNIQUE CHROMATIN ARCHITECTURE OF REGULATORY T CELLS AND, IN TURN, PROMOTING THEIR IMMUNE SUPPRESSIVE FUNCTION. THE STUDY WAS LED BY PROFESSOR YE ZHENG AND ASSISTANT PROFESSOR JESSE DIXON AND PUBLISHED IN NATURE COMMUNICATIONS ON NOVEMBER 6, 2023.</p> <p>REPAIRING NERVE CELLS AFTER INJURY AND IN CHRONIC DISEASE-EACH YEAR IN THE UNITED STATES THERE ARE MORE THAN 3 MILLION CASES OF PERIPHERAL NEUROPATHY, WHEREIN NERVES OUTSIDE OF THE BRAIN AND SPINAL CORD ARE DAMAGED AND CAUSE PAIN AND LOSS OF FEELING IN THE AFFECTED AREAS. SALK RESEARCHERS HAVE NOW UNCOVERED IN MICE A MECHANISM FOR REPAIRING DAMAGED NERVES DURING PERIPHERAL NEUROPATHY. THE FINDINGS HAVE THE POTENTIAL TO INSPIRE NOVEL THERAPEUTICS THAT BOLSTER REPAIR FUNCTION AND HEAL PERIPHERAL NEUROPATHY CAUSED BY DIABETES, INJURY, GENETICALLY INHERITED DISEASE, INFECTION, AND MORE. THE STUDY WAS LED BY PROFESSOR SAMUEL PFAFF AND PUBLISHED IN CELL REPORTS ON NOVEMBER 28, 2023.</p>

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 4A - CONTINUED2	<p>HOW DRUGS CAN TARGET THE THICK "SCAR TISSUE" OF PANCREATIC CANCER-PANCREATIC CANCER IS ONE OF THE DEADLIEST CANCERS-ONLY ABOUT ONE IN EIGHT PATIENTS SURVIVES FIVE YEARS AFTER DIAGNOSIS. THOSE DISMAL STATISTICS ARE IN PART DUE TO THE THICK, NEARLY IMPENETRABLE, WALL OF FIBROSIS, OR SCAR TISSUE, THAT SURROUNDS MOST PANCREATIC TUMORS AND MAKES IT HARD FOR DRUGS TO ACCESS AND DESTROY THE CANCER CELLS. SALK RESEARCHERS HAVE NOW DISCOVERED HOW A CLASS OF ANTI-CANCER DRUGS CALLED HDAC INHIBITORS CAN HELP TREAT PANCREATIC CANCER BY MODULATING THE ACTIVATION OF FIBROBLASTS-THE CELLS THAT MAKE UP THAT WALL OF SCAR TISSUE. THE STUDY WAS LED BY PROFESSOR RONALD EVANS AND PUBLISHED IN NATURE COMMUNICATIONS ON DECEMBER 6, 2023.</p> <p>SALK TEAMS ASSEMBLE FIRST FULL EPIGENOMIC CELL ATLAS OF THE MOUSE BRAIN-AS PART OF A WORLDWIDE INITIATIVE TO REVOLUTIONIZE SCIENTISTS' UNDERSTANDING OF THE BRAIN. SALK SCIENTISTS HELPED ANALYZE MORE THAN 2 MILLION BRAIN CELLS FROM MICE TO ASSEMBLE THE MOST COMPLETE ATLAS EVER OF THE MOUSE BRAIN. THEIR WORK NOT ONLY DETAILS THE THOUSANDS OF CELL TYPES PRESENT IN THE BRAIN BUT ALSO HOW THOSE CELLS CONNECT AND THE GENES AND REGULATORY PROGRAMS THAT ARE ACTIVE IN EACH CELL. THE EFFORTS WERE COORDINATED BY THE NATIONAL INSTITUTES OF HEALTH'S BRAIN RESEARCH THROUGH ADVANCING INNOVATIVE NEUROTECHNOLOGIES® (BRAIN) INITIATIVE, WHICH ULTIMATELY AIMS TO PRODUCE A NEW, DYNAMIC PICTURE OF MAMMALIAN BRAINS. THE FOUR SALK-AUTHORED STUDIES INCLUDED IN THE SPECIAL NATURE ISSUE PUBLISHED DECEMBER 13, 2023, WERE LED BY PROFESSOR EDWARD CALLAWAY, PROFESSOR JOSEPH ECKER, AND RESEARCH PROFESSOR MARGARITA BEHRENS.</p> <p>UNCOVERING KEY BRAIN PATHWAY MEDIATING PANIC DISORDER SYMPTOMS-CREATING A MAP OF THE REGIONS, NEURONS, AND CONNECTIONS IN THE BRAIN THAT MEDIATE PANIC ATTACKS CAN PROVIDE GUIDANCE FOR DEVELOPING MORE EFFECTIVE PANIC DISORDER THERAPEUTICS. SALK SCIENTISTS HAVE BEGUN TO CONSTRUCT SUCH A MAP, DESCRIBING A CIRCUIT OF SPECIALIZED NEURONS THAT SEND AND RECEIVE A NEUROPEPTIDE-A SMALL PROTEIN THAT SENDS MESSAGES THROUGHOUT THE BRAIN-CALLED PACAP. WHAT'S MORE, THEY DETERMINED THAT PACAP AND THE NEURONS THAT PRODUCE ITS RECEPTOR ARE POSSIBLE DRUGGABLE TARGETS FOR NEW PANIC DISORDER TREATMENTS. THE STUDY WAS LED BY ASSOCIATE PROFESSOR SUNG HAN AND PUBLISHED IN NATURE NEUROSCIENCE ON JANUARY 4, 2024.</p> <p>A STEP TOWARDS CLINIC-READY PATIENT-DERIVED ORGANOIDS-PANCREATIC CANCER HAS THE HIGHEST MORTALITY RATE OF ALL MAJOR CANCERS AND IS ESPECIALLY DIFFICULT TO TREAT BECAUSE THE TUMORS GROW SO QUICKLY AND ARE CONSTANTLY EVOLVING-BUT PATIENT-DERIVED ORGANOIDS COULD CHANGE ALL THAT. A SALK STUDY PROVIDED CRITICAL INSIGHTS INTO THE ROBUSTNESS OF THESE LAB-GROWN MINI-ORGANS AS A CLINICAL MODEL OF PANCREATIC CANCER. THEY FOUND THE ORGANOIDS' GENE EXPRESSION AND DRUG RESPONSES WERE NOT AFFECTED BY THE BRAND OF EXTRACELLULAR MATRIX USED IN THE CELL CULTURE, AND THAT ONE BRAND EVEN SPED UP THE GROWTH OF TUMOR ORGANOIDS-MAKING THEM WELL-SUITED FOR FAST PACED CANCER TREATMENT PROTOCOLS. DATA LIKE THIS INCREASES CONFIDENCE THAT CLINICAL CONCLUSIONS ARE RELIABLE ACROSS DIFFERENT LABS AND BATCHES OF ORGANOIDS. THE STUDY WAS LED BY ASSISTANT PROFESSOR DANNIELLE ENGLE AND PUBLISHED IN JCI INSIGHT ON JANUARY 9, 2024.</p> <p>IRON INFLUENCES PLANT IMMUNITY AND MAY PROMOTE RESILIENCY AGAINST CLIMATE CHANGE-PLANTS AND ANIMALS ALIKE RELY ON IRON FOR GROWTH AND REGULATION OF MICROBIOMES-COLLECTIONS OF BACTERIA, FUNGI, AND MORE THAT CO-EXIST IN PLACES LIKE THE HUMAN GUT OR THE SOIL AROUND A PLANT'S ROOTS. PLANTS FACE A SPECIAL CHALLENGE WHEN ACQUIRING IRON, SINCE THE STRATEGIES PLANTS USE TO INCREASE IRON AVAILABILITY ALTER THE ROOT MICROBIOME AND CAN INADVERTENTLY BENEFIT HARMFUL SOIL-DWELLING BACTERIA. SALK SCIENTISTS DISCOVERED HOW PLANTS MANAGE IRON DEFICIENCY WITHOUT HELPING "BAD" BACTERIA THRIVE-BY ELIMINATING IMA1, THE MOLECULAR SIGNAL FOR IRON DEFICIENCY IN ROOTS AT RISK OF BACTERIAL ATTACK. ADDITIONALLY, THEY FOUND THAT THIS IRON DEFICIENCY SIGNALING PATHWAY AND THE PLANT IMMUNE SYSTEM ARE DEEPLY INTERTWINED. THE STUDY WAS LED BY PROFESSOR WOLFGANG BUSCH AND PUBLISHED IN NATURE ON JANUARY 10, 2024.</p> <p>LUNG CANCER HIJACKS IMMUNE CELL METABOLISM TO FUEL ITS OWN GROWTH-LUNG ADENOCARCINOMA IS THE MOST COMMON LUNG CANCER AND THE CAUSE OF MOST CANCER-RELATED DEATHS IN THE UNITED STATES. ONE WAY LUNG ADENOCARCINOMA ARISES IS A MUTATION IN A PROTEIN CALLED EGFR (EPIDERMAL GROWTH FACTOR RECEPTOR). MODERN IMMUNOTHERAPIES DON'T WORK AGAINST EGFR-DRIVEN LUNG ADENOCARCINOMA, AND WHILE SOME DRUGS TO TREAT THE CANCER DO EXIST, PATIENTS TYPICALLY DEVELOP A RESISTANCE TO THEM WITHIN JUST A FEW YEARS. SALK COLLEAGUES AND COLLABORATORS AT YALE UNIVERSITY AND UC LOS ANGELES DISCOVERED THAT EGFR-DRIVEN LUNG ADENOCARCINOMA HIJACKS A SPECIALIZED LUNG-RESIDENT IMMUNE CELLS CALLED MACROPHAGES, PULLING THEM INTO THE TUMOR AND TURNING THEM INTO CANCER FUEL-SUPPLIERS. THE FINDINGS COULD INSPIRE NEW LUNG ADENOCARCINOMA INTERVENTIONS THAT DISRUPT THIS TUMOR CELL-MACROPHAGE RELATIONSHIP, AS WELL AS SUGGEST EGFR INHIBITOR TREATMENTS MAY BE MORE SUCCESSFUL WHEN PAIRED WITH STATINS, A CLASS OF DRUGS USED TO LOWER CHOLESTEROL LEVELS. THE STUDY WAS LED BY PROFESSORS SUSAN KAECH AND CHRISTIAN METALLO AND PUBLISHED IN CANCER DISCOVERY ON JANUARY 25, 2024.</p> <p>FAULTY DNA DISPOSAL SYSTEM CAUSES INFLAMMATION-CELLS IN THE HUMAN BODY CONTAIN POWER-GENERATING MITOCHONDRIA, EACH WITH THEIR OWN UNIQUE SET OF GENETIC INSTRUCTIONS CALLED MTDNA. WHEN MTDNA REMAINS INSIDE MITOCHONDRIA, IT SUSTAINS BOTH MITOCHONDRIAL AND CELLULAR HEALTH, BUT IF IT LEAVES THE MITOCHONDRIA, IT CAN INITIATE AN IMMUNE RESPONSE THAT PROMOTES INFLAMMATION. SALK RESEARCHERS AND COLLABORATORS AT UC SAN DIEGO AND UNIVERSITY OF VIRGINIA HAVE DISCOVERED A MECHANISM THAT MOVES IMPROPERLY FUNCTIONING MTDNA FROM THE MITOCHONDRIA INTO THE REST OF THE CELL. WHEN THIS HAPPENS, THE MTDNA GETS FLAGGED AS FOREIGN DNA AND ACTIVATES A CELLULAR PATHWAY TO PROMOTE INFLAMMATION-A PROMISING TARGET FOR NEW THERAPEUTICS THAT DISRUPT INFLAMMATION AND MITIGATE ITS NEGATIVE EFFECTS DURING AGING AND DISEASES LIKE LUPUS OR RHEUMATOID ARTHRITIS. THE STUDY WAS LED BY PROFESSOR GERALD SHADEL AND PUBLISHED IN NATURE CELL BIOLOGY ON FEBRUARY 8, 2024.</p>

Return Reference - Identifier	Explanation
	<p>CONTROLLING ROOT GROWTH DIRECTION COULD HELP SAVE CROPS AND MITIGATE CLIMATE CHANGE-ROOT SYSTEMS ARE CENTRAL TO PLANT SURVIVAL AND PRODUCTIVITY, DETERMINING THE PLANT'S ACCESS TO NUTRIENTS AND WATER AND, THEREFORE, THE PLANT'S ABILITY TO WITHSTAND NUTRIENT DEPLETION AND EXTREME WEATHER LIKE DROUGHT. A SALK TEAM REVEALED FOR THE FIRST TIME THAT THE COMMON PLANT HORMONE ETHYLENE IS INVOLVED IN REGULATING THE LATERAL ROOT ANGLES THAT SHAPE ROOT SYSTEMS. RESEARCHERS IN SALK'S HARNESSING PLANTS INITIATIVE NOW PLAN TO TARGET THE ETHYLENE SIGNALING PATHWAY IN THEIR EFFORTS TO ENGINEER PLANTS AND CROPS THAT CAN WITHSTAND THE ENVIRONMENTAL STRESSES OF CLIMATE CHANGE AND DROUGHT. THE STUDY WAS LED BY PROFESSOR WOLFGANG BUSCH AND PUBLISHED IN CELL REPORTS ON FEBRUARY 13, 2024.</p> <p>SALK SCIENTISTS DISCOVER NEW TARGET FOR REVERSIBLE, NON-HORMONAL MALE BIRTH CONTROL-SURVEYS SHOW MOST MEN IN THE UNITED STATES ARE INTERESTED IN USING MALE CONTRACEPTIVES, YET THEIR OPTIONS REMAIN LIMITED TO UNRELIABLE CONDOMS OR INVASIVE VASECTOMIES. NEW APPROACHES TO MALE CONTRACEPTION ARE NEEDED, BUT BECAUSE SPERM DEVELOPMENT IS SO COMPLEX, RESEARCHERS HAVE STRUGGLED TO IDENTIFY PARTS OF THE PROCESS THAT CAN BE SAFELY AND EFFECTIVELY TINKERED WITH. IN A SALK STUDY, RESEARCHERS DEMONSTRATED THAT TREATING MALE MICE WITH AN EXISTING CLASS OF DRUGS, CALLED HDAC (HISTONE DEACETYLASE) INHIBITORS, CAN INTERRUPT THE FUNCTION OF THIS PROTEIN COMPLEX AND BLOCK FERTILITY WITHOUT AFFECTING LIBIDO. THE TEAM HOPES TO SOON SEE THIS THERAPEUTIC APPROACH IN DEVELOPMENT FOR HUMAN CLINICAL TRIALS. THE STUDY WAS LED BY PROFESSOR RONALD EVANS AND PUBLISHED IN PROCEEDINGS OF THE NATIONAL ACADEMY OF SCIENCES (PNAS) ON FEBRUARY 20, 2024.</p> <p>MORE THAN JUST NEURONS: A NEW MODEL FOR STUDYING HUMAN BRAIN INFLAMMATION-NEURONS ONLY MAKE UP HALF OF THE HUMAN BRAIN, WITH THE OTHER HALF-ROUGHLY 85 BILLION CELLS-CONSISTING OF OTHER CELLS CALLED GLIA. THE MOST COMMON TYPE OF GLIAL CELLS ARE ASTROCYTES, WHICH ARE IMPORTANT FOR SUPPORTING NEURONAL HEALTH AND ACTIVITY. SALK RESEARCHERS HAVE CREATED THE FIRST 3D ORGANOID THAT MIMIC FEATURES OF THE HUMAN BRAIN TO CONTAIN MATURE, FUNCTIONAL ASTROCYTES. WITH THIS ASTROCYTE-RICH MODEL, RESEARCHERS WILL BE ABLE TO STUDY STRESS AND INFLAMMATION IN AGING AND ALZHEIMER'S DISEASE WITH GREATER DEPTH AND CLARITY THAN EVER BEFORE. ALREADY, THE RESEARCHERS HAVE USED THE NEW ORGANOID TO REVEAL A RELATIONSHIP BETWEEN ASTROCYTE DYSFUNCTION AND INFLAMMATION, AS WELL AS A POTENTIALLY DRUGGABLE TARGET FOR DISRUPTING THAT RELATIONSHIP. THE STUDY WAS LED BY PROFESSOR RUSTY GAGE AND PUBLISHED IN NATURE BIOTECHNOLOGY ON FEBRUARY 28, 2024.</p>

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 4A - CONTINUED3	<p>MODELING THE ORIGINS OF LIFE: NEW EVIDENCE FOR AN "RNA WORLD"-SCIENTISTS IN THE 1960S, INCLUDING SALK FELLOW LESLIE ORGEL, PROPOSED THAT LIFE BEGAN WITH THE "RNA WORLD"-A HYPOTHETICAL ERA IN WHICH SMALL, STRINGY RNA MOLECULES RULED THE EARLY EARTH AND ESTABLISHED THE DYNAMICS OF DARWINIAN EVOLUTION. NEW SALK RESEARCH PROVIDES FRESH INSIGHTS ON THE ORIGINS OF LIFE, PRESENTING COMPELLING EVIDENCE SUPPORTING THE RNA WORLD HYPOTHESIS. THE RECENT STUDY UNVEILED AN RNA ENZYME THAT CAN MAKE ACCURATE COPIES OF OTHER FUNCTIONAL RNA STRANDS, WHILE ALSO ALLOWING NEW VARIANTS OF THE MOLECULE TO EMERGE OVER TIME. THESE REMARKABLE CAPABILITIES SUGGEST THE EARLIEST FORMS OF EVOLUTION MAY HAVE OCCURRED ON A MOLECULAR SCALE IN RNA. THE STUDY WAS LED BY PROFESSOR AND SALK PRESIDENT GERALD JOYCE AND PUBLISHED IN PROCEEDINGS OF THE NATIONAL ACADEMY OF SCIENCES (PNAS) ON MARCH 4, 2024.</p>
	<p>PROTECTING BRAIN CELLS WITH CANNABINOL-ONE IN EVERY 10 INDIVIDUALS ABOVE THE AGE OF 65 DEVELOPS AN AGE-RELATED NEUROLOGICAL DISORDER LIKE ALZHEIMER'S OR PARKINSON'S, YET TREATMENT OPTIONS FOR THIS POPULATION REMAIN SPARSE. CANNABINOIDS-COMPOUNDS DERIVED FROM THE CANNABIS PLANT, LIKE WELL-KNOWN THC (TETRAHYDROCANNABINOL) AND CBD (CANNABIDIOL)-MAY OFFER A SOLUTION. ONE CANNABINOID CALLED CBN (CANNABINOL) HAS RECENTLY PIQUED THE INTEREST OF RESEARCHERS, WHO HAVE BEGUN EXPLORING THE CLINICAL POTENTIAL OF THE Milder, LESS PSYCHOACTIVE SUBSTANCE. SALK SCIENTISTS FOUND CBN PROTECTS THE BRAIN AGAINST AGING AND NEURODEGENERATION, THEN BEGAN DEVELOPING POTENTIAL THERAPEUTICS. THE STUDY WAS LED BY RESEARCH PROFESSOR PAMELA MAHER AND PUBLISHED IN REDOX BIOLOGY ON MARCH 29, 2024.</p>
	<p>ARTIFICIAL INTELLIGENCE HELPS SCIENTISTS ENGINEER PLANTS TO FIGHT CLIMATE CHANGE-SALK SCIENTISTS ARE DESIGNING CLIMATE-SAVING PLANTS USING A SOPHISTICATED NEW RESEARCH TOOL CALLED SLEAP-AN EASY-TO-USE ARTIFICIAL INTELLIGENCE (AI) SOFTWARE THAT TRACKS MULTIPLE FEATURES OF ROOT GROWTH. THE INTERDISCIPLINARY SALK TEAM HAVE OFFICIALLY DEBUTED A NEW PROTOCOL FOR USING SLEAP TO ANALYZE PLANT ROOT PHENOTYPES-HOW DEEP AND WIDE THEY GROW, HOW MASSIVE THEIR ROOT SYSTEMS BECOME, AND OTHER PHYSICAL QUALITIES THAT, PRIOR TO SLEAP, WERE TEDIOUS TO MEASURE. APPLYING SLEAP TO PLANTS HAS ALREADY ENABLED THE RESEARCHERS TO ESTABLISH THE MOST EXTENSIVE CATALOG OF PLANT ROOT SYSTEM PHENOTYPES TO DATE, GIVING SALK'S HARNESSING PLANTS INITIATIVE A POWERFUL BOOST. THE STUDY WAS LED BY SALK FELLOW TALMO PEREIRA AND PROFESSOR WOLFGANG BUSCH AND PUBLISHED IN PLANT PHENOMICS ON APRIL 12, 2024.</p>
	<p>UPGRADING BRAIN STORAGE: QUANTIFYING HOW MUCH INFORMATION OUR SYNAPSES CAN HOLD-TO UNDERSTAND HOW THE BRAIN LEARNS AND RETAINS INFORMATION, SCIENTISTS TRY TO QUANTIFY HOW MUCH STRONGER A SYNAPSE HAS GOTTEN THROUGH LEARNING, AND HOW MUCH STRONGER IT CAN GET. SYNAPTIC STRENGTH CAN BE MEASURED BY LOOKING AT THE PHYSICAL CHARACTERISTICS OF SYNAPSES, BUT IT IS MUCH MORE DIFFICULT TO MEASURE THE PRECISION OF PLASTICITY (WHETHER SYNAPSES GROW WEAKER OR STRONGER BY A CONSISTENT AMOUNT) AND THE AMOUNT OF INFORMATION A SYNAPSE CAN STORE. A NEW COMPUTATIONAL METHOD DEVELOPED AT SALK CAN DO ALL THREE, OPENING THE DOOR FOR NEW STUDIES ON HUMAN LEARNING AND MEMORY AND HOW THOSE PROCESSES EVOLVE OR DETERIORATE WITH AGE OR DISEASE. THE STUDY WAS LED BY PROFESSOR TERRENCE SEJNOWSKI AND PUBLISHED IN NEURAL COMPUTATION ON APRIL 23, 2024.</p>
	<p>THIS TIME, IT'S PERSONAL: ENHANCING PATIENT RESPONSE TO CANCER IMMUNOTHERAPY-FEWER THAN HALF OF ALL CANCER PATIENTS RESPOND TO CURRENT IMMUNOTHERAPIES, CREATING AN URGENT NEED TO IDENTIFY BIOMARKERS THAT CAN PREDICT WHICH PATIENTS ARE MOST LIKELY TO BENEFIT. SALK SCIENTISTS HAVE DONE JUST THAT, FINDING THAT MUTATIONS IN A GENE CALLED ARID1A MAKE PATIENTS MORE LIKELY TO RESPOND POSITIVELY TO IMMUNE CHECKPOINT BLOCKADE-A TYPE OF IMMUNOTHERAPY THAT WORKS BY KEEPING CANCER-FIGHTING IMMUNE CELLS TURNED "ON." THE ARID1A MUTATION PROMPTS AN ANTIVIRAL RESPONSE THAT PULLS MORE CANCER-FIGHTING IMMUNE CELLS INTO THE TUMOR, AND BECAUSE THE GENE IS PRESENT IN MANY CANCERS-ENDOMETRIAL, OVARIAN, COLON, GASTRIC, LIVER, AND PANCREATIC-THE BIOMARKER COULD HAVE A HUGE IMPACT IN IDENTIFYING PATIENTS FOR SPECIFIC IMMUNOTHERAPIES. THE FINDINGS ALSO ENCOURAGE THE DEVELOPMENT OF DRUGS THAT TARGET ARID1A AND RELATED PROTEINS AS A WAY OF SENSITIZING OTHER TUMORS TO IMMUNOTHERAPY. THE STUDY WAS LED BY PROFESSOR DIANA HARGREAVES AND PUBLISHED IN CELL ON MAY 15, 2024.</p>
	<p>KEY NUTRIENTS HELP PLANTS BEAT THE HEAT-BECAUSE PLANTS CANNOT REGULATE THEIR OWN TEMPERATURES, THEY ARE ESPECIALLY SENSITIVE TO CLIMATE CHANGE-RELATED TEMPERATURE CHANGES. SALK SCIENTISTS HAVE DISCOVERED THAT PLANT'S TYPICAL RESPONSE TO HIGH TEMPERATURES CAN ULTIMATELY REDUCE LEVELS OF TWO IMPORTANT NUTRIENTS-NITROGEN AND PHOSPHORUS-IN THE PLANT, MAKING THEM LESS NUTRITIOUS WHEN CONSUMED. AT THE SAME TIME, IF THE SOIL CONTAINS LOW AMOUNTS OF THESE NUTRIENTS, PLANTS SLOW ROOT GROWTH AND DON'T RESPOND ADEQUATELY TO THE HIGHER TEMPERATURES. THE NEW MOLECULAR DETAILS OF THIS INTERACTION BETWEEN ROOT GROWTH AND NUTRIENT AVAILABILITY IN THE FACE OF HIGH TEMPERATURES WILL INFORM THE ENGINEERING OF SALK IDEAL PLANTS®. THE STUDY WAS LED BY PROFESSOR WOLFGANG BUSCH AND PUBLISHED IN NATURE COMMUNICATIONS ON JUNE 1, 2024.</p>
	<p>COOPERATIVE PROTEINS HELP THE IMMUNE SYSTEM IDENTIFY AND ATTACK INVADERS-AT THE FRONT LINE OF THE HUMAN IMMUNE RESPONSE ARE CELLS CALLED MACROPHAGES, WHICH ARE RESPONSIBLE FOR CORRECTLY IDENTIFYING INTRUDERS AND THEN DIRECTING HOW THE ENTIRE IMMUNE SYSTEM RESPONDS. ACTIVATING MACROPHAGES REQUIRES THE WORK OF THREE VERSIONS OF A PROTEIN COMPLEX CALLED SWI/SNF: CBAF, NCBAF, AND PBAF. SALK RESEARCHERS DISCOVERED THAT EACH VARIANT PLAYS A DISTINCT ROLE IN INITIATING MACROPHAGES' RESPONSES TO INTRUDERS AND, CONSEQUENTLY, HOW THE IMMUNE SYSTEM REGULATES INFLAMMATION. BY DELINEATING THESE SWI/SNF VARIANTS, THE TEAM HAS REVEALED NEW IMMUNE SYSTEM MECHANISMS THAT COULD BE TARGETED WITH THERAPEUTICS TO REGULATE INFLAMMATION ASSOCIATED WITH CONDITIONS LIKE SEPSIS, CYTOKINE STORM, COVID-19, AND MANY MORE. THE STUDY WAS LED BY ASSOCIATE PROFESSOR DIANA HARGREAVES AND PUBLISHED IN IMMUNITY ON JUNE 5, 2024.</p>

Return Reference - Identifier	Explanation
	UNVEILING TELO-SEQ: A BREAKTHROUGH IN TELOMERE RESEARCH ON AGING AND CANCER- THERE IS A LOT OF INTEREST IN UNDERSTANDING EXACTLY WHEN AND HOW TELOMERES, THE ENDCAPS ON OUR CHROMOSOMES, SHORTEN OVER TIME AND HOW THAT MAY IMPACT HEALTH AND DISEASE, BUT EXISTING TECHNOLOGY ONLY ALLOWED SCIENTISTS TO MEASURE THE AVERAGE LENGTH OF ALL TELOMERES IN A CELL. IN COLLABORATION WITH OXFORD NANOPORE TECHNOLOGIES, A SALK TEAM DEVELOPED "TELO-SEQ"-A TOOL THAT COMBINES STATE-OF-THE-ART SEQUENCING, BIOCHEMISTRY, AND BIOINFORMATICS TECHNIQUES TO ACHIEVE UNPRECEDENTED RESOLUTION OF TELOMERE STRUCTURE AND COMPOSITION. THEIR FINDINGS WILL FACILITATE A SLEW OF NEW INSIGHTS INTO THE MOLECULAR DYNAMICS OF CANCER AND AGING, WHICH COULD LEAD TO NOVEL THERAPEUTICS TARGETING THESE TELOMERIC MECHANISMS. THE STUDY WAS LED BY PROFESSOR AND CSO JAN KARLSEDER AND PUBLISHED IN NATURE COMMUNICATIONS ON JUNE 18, 2024.
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 2024, BASED ON COMPENSATION DATA FROM A SELECTED PEER GROUP FOR SALK PRESIDENT AND EXECUTIVE LEADERSHIP ROLES. THIS ASSESSMENT WAS PROVIDED TO THE CHAIR AND CO-CHAIRS OF SALK'S BOARD OF TRUSTEES AND TO SALK'S PRESIDENT. SALK'S PRESIDENT AND THE INSTITUTE'S VICE-PRESIDENT PEOPLE & CULTURE DISCUSSED THE PERFORMANCE OF VICE-PRESIDENT-LEVEL EXECUTIVES AT A MEETING ON APRIL 17, 2024, WITH THE CHAIR AND CO-CHAIRS OF THE BOARD OF DIRECTORS; THE VICE-PRESIDENT PEOPLE & CULTURE WAS NOT PRESENT FOR DISCUSSION ABOUT HER PERFORMANCE. AFTER THIS MEETING, A SEPARATE DISCUSSION ABOUT THE COMPENSATION OF THE INSTITUTE PRESIDENT, RECOMMENDED CHANGES WERE PRESENTED TO AND APPROVED BY THE SALK BOARD OF TRUSTEES AT THE EXECUTIVE SESSION OF THE APRIL 19, 2024 BOARD OF TRUSTEES MEETING.
FORM 990, PART VI, LINE 15B - PROCESS TO ESTABLISH COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES	A COMPREHENSIVE MARKET ASSESSMENT WAS COMPLETED IN APRIL 2024, BASED ON COMPENSATION DATA FROM A SELECTED PEER GROUP FOR SALK PRESIDENT AND EXECUTIVE LEADERSHIP ROLES. THIS ASSESSMENT WAS PROVIDED TO THE CHAIR AND CO-CHAIRS OF SALK'S BOARD OF TRUSTEES AND TO SALK'S PRESIDENT. SALK'S PRESIDENT AND THE INSTITUTE'S VICE-PRESIDENT PEOPLE & CULTURE DISCUSSED THE PERFORMANCE OF VICE-PRESIDENT-LEVEL EXECUTIVES AT A MEETING ON APRIL 17, 2024, WITH THE CHAIR AND CO-CHAIRS OF THE BOARD OF DIRECTORS; THE VICE-PRESIDENT PEOPLE & CULTURE WAS NOT PRESENT FOR DISCUSSION ABOUT HER PERFORMANCE. AFTER THIS MEETING, A SEPARATE DISCUSSION ABOUT THE COMPENSATION OF THE INSTITUTE PRESIDENT, RECOMMENDED CHANGES WERE PRESENTED TO AND APPROVED BY THE SALK BOARD OF TRUSTEES AT THE EXECUTIVE SESSION OF THE APRIL 19, 2024 BOARD OF TRUSTEES MEETING.

Return Reference - Identifier	Explanation	
FORM 990, PART VI, LINE 17 - STATES WITH WHICH A COPY OF THIS FORM 990 IS REQUIRED TO BE FILED	CO, CT, DC, FL, GA, HI, IL, KS, KY, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, TX, 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: GERALD JOYCE, PH.D. - PRESIDENT/PROFESSOR; REUBEN SHAW, PH.D. - PROFESSOR; JANELLE AYRES, PH.D. - PROFESSOR; WOLFGANG BUSCH, PH.D. - PROFESSOR; TATYANA SHARPEE, PH.D. - PROFESSOR.	
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	- 7,222
	CHANGE IN VALUE OF DEFERRED GIFTS	- 146,836
	ROUNDING	- 396

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

2023

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)							

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	1a	✓
b Gift, grant, or capital contribution to related organization(s)	1b	✓
c Gift, grant, or capital contribution from related organization(s)	1c	✓
d Loans or loan guarantees to or for related organization(s)	1d	✓
e Loans or loan guarantees by related organization(s)	1e	✓
f Dividends from related organization(s)	1f	✓
g Sale of assets to related organization(s)	1g	✓
h Purchase of assets from related organization(s)	1h	✓
i Exchange of assets with related organization(s)	1i	✓
j Lease of facilities, equipment, or other assets to related organization(s)	1j	✓
k Lease of facilities, equipment, or other assets from related organization(s)	1k	✓
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	✓
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	✓
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	✓
o Sharing of paid employees with related organization(s)	1o	✓
p Reimbursement paid to related organization(s) for expenses	1p	✓
q Reimbursement paid by related organization(s) for expenses	1q	✓
r Other transfer of cash or property to related organization(s)	1r	✓
s Other transfer of cash or property from related organization(s)	1s	✓

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	41,143	100.00	✓	
(2) CHARITABLE REMAINDER TRUSTS (4)	SUPPORT	CA	N/A	TRUST					