efile Public Visual Render ObjectId: 202310869349300441 - Submission: 2023-03-27 TIN: 23-7108453 OMB No. 1545-0047

Form **990**

Return of Organization Exempt From Income Tax

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

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

	nent of the Treasury Revenue Service	Go to <u>www.irs.gov/Form990</u> for instructions and the	iatest informa	ation.		Inspection
A F	or the 2022 c	l alendar year, or tax year beginning 01-01-2022 $$, and ending 12-3:	1-2022			
O Ad	ck if applicable: dress change me change	C Name of organization The Silver Institute Inc		D Employer 23-71084.		fication number
O Ini	tial return	Doing business as				
O Amended return O Application pending		Number and street (or P.O. box if mail is not delivered to street address) Room/sui 1400 I Street NW 550	ite	E Telephone r (202) 835		
_		City or town, state or province, country, and ZIP or foreign postal code Washington, DC 20005		G Gross recei	pts \$ 1	.,270,066
		F Name and address of principal officer: 1400 I Street NW 550	suboro	a group retur linates? subordinates		☐Yes ✓No
I Tax-exempt status: ☐ 501(c)(3) 501(c) (6) (insert no.) ☐ 4947(a)(1) or ☐ 527						Yes No instructions.
J W	ebsite: 🕨 ww	w.silverinstitute.org	rice) Group	exemption no	ımber	•
K Forn	n of organization	: ✓ Corporation ☐ Trust ☐ Association ☐ Other ►	L Year of forma	tion: 1971 M	1 State	of legal domicile: NY
Activities & Governance	2 Check th 3 Number of 4 Number of 5 Total num	is box of independent voting members of the governing body (Part VI, line 1a)			3 4 5 6	23 23 0
4		elated business revenue from Part VIII, column (C), line 12			7a	0
	b Net unre	lated business taxable income from Form 990-T, Part I, line 11		r Year	7b	Current Year
	8 Contribut	cions and grants (Part VIII, line 1h)		Ji Teai		0
Revenue		service revenue (Part VIII, line 2g)		1,368,169	9	1,269,939
eve	10 Investme	ent income (Part VIII, column (A), lines 3, 4, and 7d)		12:	3	127
ш.	11 Other rev	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				0
	12 Total rev	enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,368,29	2	1,270,066	
		nd similar amounts paid (Part IX, column (A), lines 1–3)				0
		paid to or for members (Part IX, column (A), line 4)				0
Expenses		other compensation, employee benefits (Part IX, column (A), lines 5–10) anal fundraising fees (Part IX, column (A), line 11e)				0
8		Total fundraising expenses (Part IX, column (D), line 25) 0				
ă		penses (Part IX, column (A), lines 11a–11d, 11f–24e)		1,438,448	8	1,231,875
		enses. Add lines 13–17 (must equal Part IX, column (A), line 25)		1,438,448		1,231,875
	•	less expenses. Subtract line 18 from line 12		-70,150	6	38,191
Net Assets or Fund Balances			Beginning (of Current Yea	r	End of Year
sse) 3ala	20 Total ass	ets (Part X, line 16)		259,12	2	297,313
nd A	21 Total liab	ilities (Part X, line 26)				0
žĨ	22 Net asset	ts or fund balances. Subtract line 21 from line 20		259,12	2	297,313

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

	I.						2023-03-27				
Sign	Sig	gnature of officer					Date				
Here	- IL	chael DiRienzo Ex	ecutive Director								
	Ту	pe or print name a	and title								
Paid	H	Print/Type prep	parer's name	Preparer's signature		Date	Check if self-employed	PTIN P0033984	48		
-	parer	Firm's name	KOSCIW & ASSOCIA	ITES LLC			Firm's EIN 4	5-0531412	2		
Use	Only	Firm's address	▶331 N PITT ST				Phone no. (703) 283-0879	9		
			ALEXANDRIA, VA 2	2314							
May t	he IRS disc	cuss this return	with the preparer sh	nown above? (see instru	ctions)			. 🗸	Yes	□No	
For F	aperwork	Reduction Ac	t Notice, see the s	eparate instructions.		Cat.	No. 11282Y		Fo	rm 99	0 (2021)
				_	_						
				Pag	e 2 ———						
Form	990 (2021)									Page 2
Pa	rt III St	atement of F	Program Service	Accomplishments							
			O contains a respon ization's mission:	se or note to any line in	this Part III .						
1 The S	,	-		ne welfare of the silver	industry by incre	easing the kn	owledge of and	demand	for sil	ver nro	ducts
				mbers as of year end 2				demana	101 311	ver pro	
2	Did the or	ganization unde	ertake any significan	t program services duri	ng the vear whic	h were not li	sted on				
_		orm 990 or 990	, ,							es 🔽	No
	If "Yes," d	escribe these n	ew services on Sche	dule O.							
3	Did the or	ganization ceas	e conducting, or ma	ke significant changes i	n how it conduct	ts, any progra	am		_		_
	services?									Yes	🗾 No
	If "Yes," d	escribe these cl	nanges on Schedule	0.							
4	Section 50)1(c)(3) and 50		ccomplishments for each s are required to report reported.							
4a	(Code:) (Expenses \$	including	grants of \$) (Revenue \$)	
	Silver Instit	ute's web site, pre		riety of services benefiting t tters that highlight trends i umption.							
41-	(0.1		\ /= +) (D +				
46	participants	and the general p	oublic. World Silver Surv	including Survey, to bring timely and yey is read by the breadth open ced and is the most quoted	of the silver industr	y, as well as th					arkets,
4c	(Code: The Silver I	nstitute also has r) (Expenses \$ narket development pro	including grams in Mexico, Peru and	grants of \$ China. The Institut	te issues Marke) (Revenue \$	n various a	snects) of silver	-
				or often appears in the med					эрсссэ	or silver	
4d	Other pro-	•	Describe in Schedule includ	e O.) ding grants of \$) (Revenue	\$)		
4e	• •	gram service		g g.ae o. q) (.tere.iue	<u> </u>		,		
	•		•						F	orm 99	0 (2021)
				Pag	e 3 ———						
Form	990 (2021))									Page 3
Pa	rt IV Ch	ecklist of Re	equired Schedul	es							
								_		Yes	No
1	Is the organization		bed in section 501(c	(3) or 4947(a)(1) (oth	er than a private	e foundation)	? If "Yes," com	plete	1		No
2				edule B, Schedule of Co	ntributors? See i	nstructions		 	2		No
3	Did the or	ganization enga	ige in direct or indire	ect political campaign a			position to cand	idates			No
	for public	office? If "Yes,"	complete Schedule	C, Part I 📆 🔒					3		<u> </u>
4	Section 5	01(c)(3) orga	nizations. Did the	organization engage in	lobbying activitie	es, or have a	section 501(h)				

/ 13/2	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	1	
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? If "Yes," complete Schedule C, Part III \mathfrak{B} .	5	Yes	
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,</i> Part I	6		No
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		No
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		No
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? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X , as applicable.			
а	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		No
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		No
С	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? If "Yes," complete Schedule D, Part VIII	11c		No
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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
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		No
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		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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? If "Yes," complete Schedule F, Parts I and IV	14b		No
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</i> "Yes," complete Schedule F, Parts II and IV	15		No
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? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes,"</i> complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
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? If "Yes," complete Schedule I, Parts I and II	21		No
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Part IV Checklist of Required Schedules (continued)

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No

22	No
23	No

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of

1012	4, 2.20 TW			
	the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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,</i> Part 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? If "Yes," complete Schedule L, Part II	26		No
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</i> ,Part III	27		No
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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
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		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		No
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	Yes	
Pai	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	. ;	Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 3			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable . 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
	Page 5	F	orm 99	0 (2021)
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Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	2b		<u> </u>

	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	
	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)? If "Yes," enter the name of the foreign country:	4a	No
	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	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
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	No
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).		
а	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		
е	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.		
а	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	
LO	Section 501(c)(7) organizations. Enter:		
	Initiation fees and capital contributions included on Part VIII, line 12 10a		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
L1			
	Gross income from members or shareholders		
D	against amounts due or received from them.)		
L2a	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.		
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.		
	Is the organization licensed to issue qualified health plans in more than one state?	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		
	Enter the amount of reserves on hand		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	
L 5	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?	15	No
L6	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	No
	If "Yes," complete Form 4720, Schedule O.	J	
L7	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator 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	

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Pa	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "N lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI		onse to	~
Se	ction 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 23			
	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 in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 23			
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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3	Yes	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
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	Yes	
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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 in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	2.)	
	The second of th		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
	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		No
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		No
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i>	12c		
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15b		No
	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		No
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		
	ection C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Form 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 in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: Michael DiRienzo 1400 I Street NW Washington, DC 20005 (202) 835-0185			

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

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, 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, or 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) (B) (C) (D) (E)										(F)
(A) Name and title	(B) Average hours per week (list any hours for related	pers and	an on on is	o not e bot bot ecto	che x, u n an or/tr	nless office ustee	er)	Reportable compensation from the organization (W- 2/1099-	Reportable compensation from related organizations (W-2/1099-	Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC/1099- NEC)	MISC/1099- NEC)	related organizations
(1) Jason XU	0.25									
Director	0.00	Х						0	0	0
(2) Alberto Morales	0.25									
Director	0.00	Х						0	0	0
(3) Rui Feng	0.25									
Director	0.00	Х						U	U	0
(4) Ben Van Kerkwijk	0.25	Х						0	0	0
Director	0.00	^							O	U
(5) Phillips Baker Jr	0.25	V		х				0	0	0
Vice President	0.00	Х		^					O	0
(6) Shawn Khunkhun	0.25	Х						0	0	0
Director	0.00	^						O	0	0
(7) Rafael Rebollar	0.25	Х						0	0	0
Director	0.00	^							0	O
(8) Octavio Alvidrez Ortega	0.25							0	0	
Director	0.00	Х							U	0
(9) Patrick Drouin	0.25							0	0	0
Director	0.00	Х							O	0
(10) Terry Hanlon	0.25									
Director	0.00	Х						0	0	0
(11) Hitoshi Kosai Director	0.25	Х						0	0	0
(12) Ignacio Bustamante	0.25									
President	0.00	Х		Х				0	0	0
	0.00 0.25		\vdash							

(13) David Stein	۷،۷۵	V			I		0	0
Director	0.00	^				U	Ü	U
(14) Chiaki Kaneko	0.25	Х				0	0	0
Director	0.00					U	Ü	0
(15) Dale Andres	0.25	.,						
Director	0.00	^				0	U	0
(16) Mitchell Krebs	0.25	Х				0	0	0
Director	0.00					U	0	0
(17) David Madge	0.25	V				0	0	0
Director	0.00	Х					U	0

Form **990** (2021)

– Page 8 *–*

Form 990 (2021) Page **8**

(A) Name and title	(B) Average hours per week (list any hours	er than one box, unless person ist is both an officer and a director/trustee) compensation from the organization (W-							(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099- MISC/1099- NEC)	(W-2/1099- MISC/1099- NEC)	organization and related organizations
(18) George Paspalas	0.25	V						0	0	0
Director	0.00	X						0	Ü	Ü
(19) Paul Healey	0.25							_	_	
Director	0.00	X						0	0	C
(20) Michael Mesaric	0.25							_	_	
Director	0.00	X						0	0	C
(21) David Wolfin	0.25									
Director	0.00	X						0	0	0
(22) Michael Konnert	0.25									
Director	0.00	X						0	0	0
(23) Michael DiRienzo	30.00									
Exec Dir & Secy	0.00	X		Х				0	0	0
(24) Paul Kaulesar	0.25									
Director	0.00	X						0	0	0
(25) Michael Steinmann	0.25									
Director	0.00	X						0	0	0
(26) David Stein	0.25									
Director	0.00	X						0	0	0
(27) Jeffrey Melody	0.25									
Asst Treasurer	0.00			Х				0	0	C
(28) Carlos Quiroga	0.25									
Treasurer	0.00			Х				0	0	0
1b Sub-Total)	-				

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 ▶ 0

	U 1		Yes	. No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensate	d employee on	res	NO
	line 1a? If "Yes," complete Schedule J for such individual		3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation fro organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual			
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or inc	dividual for	4	No
	services rendered to the organization? If "Yes," complete Schedule J for such person		5	No
<u>S</u>	Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more that	n \$100 000 of comp	ensation	
_	from the organization. Report compensation for the calendar year ending with or within the organization	on's tax year.		
	(A) Name and business address Des	(B) scription of services		(C) pensation
KSG	G LLC Manageme	ent Fees		514,000
Wash	00 I Street NW Suite 550 shington, DC 20005 Research			315,666
	L Abbey House 74/76 St John St			,,,,,,
	ndon, Europe EC1M 4DT			
2	Total number of independent contractors (including but not limited to those listed above) who received n	nore than \$100.000	of	
	compensation from the organization > 2			(2024)
			Form \$	990 (2021)
	Page 9			
Form	rm 990 (2021)			D 0
	Part VIII Statement of Revenue			Page 9
	Check if Schedule O contains a response or note to any line in this Part VIII			. 🗆
	(A) (B) Total revenue Related or	(C) Unrelated		(D) Venue
	exempt	business	exclud	led from er sections
	function revenue	revenue		- 514
grants,	g derated campaigns 1a			
gra	derated campaigns			
S	, e			
Contributions, giff	ndraising events 1c			
ibutio	lated organizations 1d			
Contr	vernment grants (contributions) 1e			
f				
	Noncash contributions included in			
	lines 1a - 1f:\$ 1g			
h	h Total. Add lines 1a-1f			
┪	Business Code			
	2a Membership Dues & Assessments 1,048,759 1,048,759	9		
9	Publications 221,180 221,18	l nl		
σονοί	• Publications 221,180 221,180			
jou	Publications 221,180 221,180			
Sor	1 Se			
9	5	1		

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Form 990 (2021) Page **10**

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).

https://projects.propublica.org/nonprofits/organizations/237108453/202310869349300441/full

Check if Schedule O contains a response or note to any line in this Part IX. (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. Total expenses general expenses expenses expenses 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . 2 Grants and other assistance to domestic individuals. See Part IV, line 22 . **3** Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 **4** Benefits paid to or for members 0 Compensation of current officers, directors, trustees, and 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in **7** Other salaries and wages Pension plan accruals and contributions (include section 0 401(k) and 403(b) employer contributions) . . . **9** Other employee benefits **10** Payroll taxes **11** Fees for services (non-employees): 514,000 a Management . . . 0 **b** Legal . 9,500 **c** Accounting 0 **d** Lobbying e Professional fundraising services. See Part IV, line 17 0 n **f** Investment management fees . g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) **12** Advertising and promotion 0 11.464 **13** Office expenses . . . 0 **14** Information technology . 0 15 Rovalties . 0 **16** Occupancy 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . 30,434 **19** Conferences, conventions, and meetings . . . **20** Interest **21** Payments to affiliates 0 **22** Depreciation, depletion, and amortization . . 0 23 Insurance . 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a World Silver Survey 347,602 83,200 **b** Market Reports 45.000 c Marketing d Technical Monitoring 42,460 e All other expenses 148,215 25 Total functional expenses. Add lines 1 through 24e 1,231,875 0 0 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 ▶ ☐ if following SOP 98-2 (ASC 958-720).

Form 990 (2021)

raye 11

Form 990 (2021)	Page 11
Form 990 (2021)	Page

Pa	art X	Balance Sheet	a to any line in this D. LIV			
		Check if Schedule O contains a response or not	e to any line in this Part IX	(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		259,122	1	297,313
	2	Savings and temporary cash investments .	-		2	0
	3	Pledges and grants receivable, net		3	0	
	4	Accounts receivable, net		4	0	
	5	Loans and other receivables from any current of		-		
		trustee, key employee, creator or founder, subs controlled entity or family member of any of the	tantial contributor, or 35% ese persons		5	0
	6	Loans and other receivables from other disquali section $4958(f)(1)$), and persons described in so			6	0
2	7	Notes and loans receivable, net		7	0	
Assets	8	Inventories for sale or use			8	0
Asi	9	Prepaid expenses and deferred charges			9	0
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation	10b		10c	0
	11	Investments—publicly traded securities .			11	0
	12	Investments—other securities. See Part IV, line	11		12	0
	13	Investments—program-related. See Part IV, line	11		13	0
	14	Intangible assets			14	0
	15	Other assets. See Part IV, line 11			15	0
	16	Total assets. Add lines 1 through 15 (must eq	ual line 33)	259,122	16	297,313
	17	Accounts payable and accrued expenses			17	
	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
S	21	Escrow or custodial account liability. Complete F		21		
Liabilities	22	Loans and other payables to any current or forn employee, creator or founder, substantial contri or family member of any of these persons .		22		
=======================================	23	Secured mortgages and notes payable to unrela	ted third parties		23	
	24	Unsecured notes and loans payable to unrelated	·		24	
		Other liabilities (including federal income tax, pa	·		25	
	25	and other liabilities not included on lines 17 - 24 Complete Part X of Schedule D		25		
	26	Total liabilities. Add lines 17 through 25 .		0	26	0
Assets or Fund Balances		Organizations that follow FASB ASC 958, cl complete lines 27, 28, 32, and 33.	neck here 🕨 🗹 and			
ala	27	Net assets without donor restrictions		259,122	27	297,313
1 B	28	Net assets with donor restrictions			28	
Func		Organizations that do not follow FASB ASC complete lines 29 through 33.	958, check here ▶ □ and			
9	29	Capital stock or trust principal, or current funds			29	
ets	30	Paid-in or capital surplus, or land, building or ed	uipment fund		30	
SS	31	Retained earnings, endowment, accumulated in	come, or other funds		31	
t A	32	Total net assets or fund balances		259,122	32	297,313
Net	33	Total liabilities and net assets/fund balances .		259,122	33	297,313
			·		•	Form 990 (2021)
			Page 12 ————			
orn	1 <u>99</u> 0	(2021)				Page 12
Pa	art XI	Reconcilliation of Net Assets				
		Check if Schedule O contains a response or n	ote to any line in this Part XI			U

/13/2	4, 2:26 AM Silver Institute Inc - Full Filing- Nonprofit Explorer - ProPubl	ica			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1	,270,066
2	Total expenses (must equal Part IX, column (A), line 25)	2		1	,231,875
3	Revenue less expenses. Subtract line 2 from line 1	3			38,191
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			259,122
5	Net unrealized gains (losses) on investments	5			
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 in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10			297,313
Par	TXII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual 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?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both: $\frac{1}{2}$	basis,			
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.			
_					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Audit Act and OMB Circular A-133?	ngie	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ired	3b		
			F	orm 99	0 (2021)
orm	990 (2021)				
	ditional Data		Returi	ı to Fo	rm
	Software ID: 22015553				
	Software Version: 2022v5.0				
orn	n 990, Special Condition Description:				
	Special Condition Description				

efile Public Visual Render

ObjectId: 202310869349300441 - Submission: 2023-03-27

TIN: 23-7108453

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

2021

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			►Go to <u>www.irs.</u>	<u>gov/Form990</u>	for instructions an	d the latest in	formation.	Insp	ection
• S	ection 501(c)(3) org Section 501(c) (other	ganization er than sed	s: Complete Parts ction 501(c)(3)) org	I-A and B. Do no anizations: Con	or Form 990-EZ, Pa ot complete Part I-C. nplete Parts I-A and 0	•		L Activities), th	ien
f the S S f the Prox	organization ans section 501(c)(3) or section 501(c)(3) or organization ans sy Tax) (see separ	wered "Yerganization rganization rganization wered "Yerate instru	ns that have filed F ns that have NOT f es" on Form 990,	Part IV, Line 4, orm 5768 (electiled Form 5768 Part IV, Line 5	or Form 990-EZ, Pation under section 50 (election under section (Proxy Tax) (see se	1(h)): Complete on 501(h)): Com	Part II-A. Do not co plete Part II-B. Do ions) or Form 990-	omplete Part I not complete -EZ, Part V, Ii	Part II-A. ne 35c
	ne of the organizat Silver Institute Inc	ion					23-7108453	ntification nu	ımber
Parl	I-A Complet	e if the	organization is	exempt und	ler section 501(d	c) or is a sect	tion 527 organi	ization.	
1	"political campaig	n activitie	s."		political campaign ac			for definition o	of
2	Political campaign	n activity e	xpenditures. See ii	nstructions			▶	\$	
3		or political	campaign activitie	s. See instruction	ons				
Part	I-B Complet	e if the	organization is	exempt und	ler section 501(d	:)(3).			
1	Enter the amount	of any ex	cise tax incurred b	y the organizati	on under section 495	5	▶	\$	
2		•		, -	nanagers under secti			\$	
3	If the organization	n incurred	a section 4955 tax	, did it file Form	n 4720 for this year?			☐ Yes	☐ No
4a								☐ Yes	□ No
b	If "Yes," describe								
				-	ler section 501(c				
1 2	Enter the amount	of the filin	ng organization's fu	unds contributed	for section 527 exend to other organizatio	ns for section 5	27 exempt	\$\$ \$	
3	Total exempt fund	ction exper	nditures. Add lines	1 and 2. Enter	here and on Form 11	20-POL, line 17l	b	¢	
4	·					•		→ Yes	✓ No
5	organization mad of political contrib	e payment outions rec	ts. For each organizeived that were pr	zation listed, en omptly and dire	per (EIN) of all section ter the amount paid ctly delivered to a se is needed, provide in	from the filing o parate political	organization's funds organization, such a	. Also enter th	
(a) l	Name		(b) Address		(c) EIN		d) Amount paid fro		mount of
							filing organization's runds. If none, ente -0	received a and direc to a sepa organizat	contributions and promptly tly delivered rate political ion. If none, er -0
1									
2									
3									
4									
5									
5									
or Pa	aperwork Reduction	Act Notice	e, see the instructio	ns for Form 990.		Cat. No. 500)84S S o	chedule C (For	m 990) 2021

Schedule C (Form 990) 2021

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

Page 2

	36CUUII 301(II/):					
A	Check if the filing organization belongs to an		in Part IV each	affiliated group m	iember's name	e, address, EIN,
В	expenses, and share of excess lobbying Check if the filing organization checked box A	- '	rovisions annly			
<u> </u>		·	очысна арргу.		(a) Filing	(b) Affiliated group
	Limits on Lobbying (The term "expenditures" means	g Expenditures s amounts paid or incu	ırred.)	or	ganization's totals	totals
	Total lobbying expenditures to influence public opinion					
b	Total lobbying expenditures to influence a legislative	, ,,				+
c	Total lobbying expenditures (add lines 1a and 1b)	, , , , , , , , , , , , , , , , , , , ,				
d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (add lines 1c and	•				
f	Lobbying nontaxable amount. Enter the amount fron columns.	n the following table in b	oth			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxa	ble amount is:			
	Not over \$500,000	20% of the amount on line	1e.	<u> </u>		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the 6	excess over \$500,00	00.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the 6				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the ex	cess over \$1,500,0	00.		
	Over \$17,000,000	\$1,000,000.				
_	Grassroots nontaxable amount (enter 25% of line 1f					T
g h	Subtract line 1q from line 1a. If zero or less, enter -					
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					☐ Yes ☐ No
	section 4911 tax for this year?					O res O No
	(Some organizations that made a columns below. See t		tions for line	s 2a through		
			Tear Average	renou		
	Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
с	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					
					Schedule (C (Form 990) 2021
		Dana 2				
		Page 3 -				
Cob	odulo C (Form 000) 2021					
	edule C (Form 990) 2021 art II-B Complete if the organization is o	exempt under section	on 501(c)(3)	and has NOT	filed	Page 3
	Form 5768 (election under sect				(a)	
For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying						(b)
acti	vity.				Yes N	o Amount
1	During the year, did the filing organization attempt including any attempt to influence public opinion or					
a	Volunteers?					
b	Paid staff or management (include compensation in			.i)?		
c	Media advertisements?					
d	Mailings to members, legislators, or the public? Publications, or published or broadcast statements					
e	i upiicacions, or pupiisheu or producast statements				1 1	

instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990) 2021

Additional Data

Return to Form

Software ID: 22015553 Software Version: 2022v5.0

2/13/24, 2:26 AM Silver Institute Inc - Full Filing- Nonprofit Explorer - ProPublica efile Public Visual Render ObjectId: 202310869349300441 - Submission: 2023-03-27 TIN: 23-7108453 OMB No. 1545-0047 Schedule L Transactions with Interested Persons (Form 990) Complete if the organization answered "Yes" on Form 990, Part IV, lines 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. Department of the Treasury ▶Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization **Employer identification number** The Silver Institute Inc 23-7108453 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. (b) Relationship between disqualified person and (c) Description of (a) Name of disqualified person (d) Corrected? 1 organization transaction No Yes Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section **3** Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . 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 (f) Balance (b) Relationship (i) Written (a) Name of (c) Purpose (d) Loan to or from the (e) Original **(g)** In (h) interested person with organization of loan organization? principal due default? Approved by agreement? board or amount committee? From Yes No Yes No Yes No Total **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 (c) Amount of assistance (d) Type of assistance (e) Purpose of assistance interested person and the organization For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 50056A Schedule L (Form 990) 2021 Page 2 Schedule L (Form 990) 2021 Page 2 **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 (c) Amount of (d) Description of transaction (e) Sharing between interested transaction of person and the organization's organization revenues? Yes No (1) KSG LLC Shared Officer 514,000 Management Fee No

Supplemental Information

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

Return Reference Explanation

Schedule L (Form 990) 2021

Additional Data Return to Form

Software ID: 22015553 **Software Version:** 2022v5.0

efile Public Visual Render

ObjectId: 202310869349300441 - Submission: 2023-03-27

TIN: 23-7108453

OMB No. 1545-0047

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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

• Attach to Form 990 or 990-EZ.

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

Name of the organization The Silver Institute Inc Employer identification number

	23-7108453					
Return Reference	Explanation					
Form 990, Part VI, Section A, Line 3	KSG,LLC provides association management services in connection with the implementation and administration of The Silver Institute.					
Form 990, Part VI, Section A, Line 6	The Silver Institute draws its membership from across the breadth of the silver industry. This includes leading silver mining hous refiners, bullion suppliers, manufacturers of silver products and wholesalers of silver investment products	ses,				
Form 990, Part VI, Section B, Line 11b	The Form 990 is made available upon request to the Board of Directors for their review. The Form 990 is reviewed in detail by the Institute's Executive Director.	he				
Form 990, Part VI, Section B, Line 15a	The Silver Institute does not have any employees. The Silver Institute is managed under contract by KSG, LLC. The Silver Institute's Executive Director is an employee of and is paid by KSG LLC. The management fee is determined by the Silver Institute's Executive Committee annually.					
Form 990, Part VI, Section C, Line 19	The organization structure of the Silver Institute is described on its web site. Financial statements and detailed governing documents are available upon written request. The Form 990 is available upon request and is available from the GuideStar web site.)				
Form 990, Part IX, Line 24e	Bank Fees: Column (A) - Total = \$1075; Column (B) - Program Services = \$0; Column (C) - Management & General = \$0; Column (D) - Fundraising = \$0					
Form 990, Part IX, Line 24e	Carbon Footprint Study: Column (A) - Total = \$21153; Column (B) - Program Services = \$0; Column (C) - Management & General So; Column (D) - Fundraising = \$0	ral =				
Form 990, Part IX, Line 24e	General Public Relations: Column (A) - Total = \$16115; Column (B) - Program Services = \$0; Column (C) - Management & General = \$0; Column (D) - Fundraising = \$0					
Form 990, Part IX, Line 24e	Membership Services: Column (A) - Total = \$1704; Column (B) - Program Services = \$0; Column (C) - Management & General = \$0; Column (D) - Fundraising = \$0					
Form 990, Part IX, Line 24e	Newsletter: Column (A) - Total = \$17748; Column (B) - Program Services = \$0; Column (C) - Management & General = \$0; Column (D) - Fundraising = \$0	umn				
Form 990, Part IX, Line 24e	Podcasts/webinars: Column (A) - Total = \$540; Column (B) - Program Services = \$0; Column (C) - Management & General = \$0 Column (D) - Fundraising = \$0	Э;				
Form 990, Part IX, Line 24e	Press Release: Column (A) - Total = \$13753; Column (B) - Program Services = \$0; Column (C) - Management & General = \$0; Column (D) - Fundraising = \$0					
Form 990, Part IX, Line 24e	Silver Industrial Conference: Column (A) - Total = \$6840; Column (B) - Program Services = \$0; Column (C) - Management & General = \$0; Column (D) - Fundraising = \$0					
Form 990, Part IX, Line 24e	Silver Promotion Service: Column (A) - Total = \$26462; Column (B) - Program Services = \$0; Column (C) - Management & Gen = \$0; Column (D) - Fundraising = \$0	ieral				
Form 990, Part IX, Line 24e	Social Media Campaign: Column (A) - Total = \$35477; Column (B) - Program Services = \$0; Column (C) - Management & General = \$0; Column (D) - Fundraising = \$0					
Form 990, Part IX, Line	Web Site Support: Column (A) - Total = \$7348; Column (B) - Program Services = \$0; Column (C) - Management & General = \$0 Column (D) - Fundraising = \$0	Э;				
ne://projecte.pr	ropublica org/popprofits/organizations/237108453/202310869349300441/full	1				

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

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Schedule O (Form 990) 2021

Additional Data Return to Form

Software ID: 22015553 **Software Version:** 2022v5.0