DLN: 93493072005400 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)  $\blacktriangleright$  Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019 D Employer identification number **B** Check if applicable The Silver Institute Inc ☐ Address change 23-7108453 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminate E Telephone number ☐ Amended return Number and street (or P O box if mail is not delivered to street address) Room/suite 1400 I Street NW □ Application pending (202) 835-0185 City or town, state or province, country, and ZIP or foreign postal code Washington, DC  $\,$  20005 **G** Gross receipts \$ 1,956,741 Name and address of principal officer H(a) Is this a group return for □Yes ☑No subordinates? 1400 I Street NW 550 H(b) Are all subordinates Washington, DC 20005 ☐ Yes ☐No included? Tax-exempt status 501(c)(3)  $\checkmark$ 501(c) ( 6 ) **◀** (insert no ) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ▶ www silverinstitute org L Year of formation 1971 M State of legal domicile NY **K** Form of organization lacktriangle Corporation lacktriangle Trust lacktriangle Association lacktriangle Other lacktriangle1 Briefly describe the organization's mission or most significant activities The Silver Institute's purpose is that of promoting the welfare of the silver industry by increasing the knowledge of and demand for silver products across all end users The Silver Institute had 23 members as of year end 2019 Activities & Governance Check this box ▶ 🔲 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 0 Total number of individuals employed in calendar year 2019 (Part V, line 2a) Total number of volunteers (estimate if necessary) . . . 7a 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 . 7b b Net unrelated business taxable income from Form 990-T, line 39 **Prior Year** Current Year 8 Contributions and grants (Part VIII, line 1h) . . 9 Program service revenue (Part VIII, line 2g) . . 1,498,071 1,956,263 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 1,035 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 1,499,106 1,956,741 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3). 0 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 0 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 1,597,122 1,812,299 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 1,597,122 1,812,299 19 Revenue less expenses Subtract line 18 from line 12 . -98.016 144,442 Net Assets or Fund Balances End of Year **Beginning of Current Year** 20 Total assets (Part X, line 16) . 142,517 286,959 21 Total liabilities (Part X, line 26) . 22 Net assets or fund balances Subtract line 21 from line 20 286,959 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 2020-03-12 Signature of officer Sign Here Michael DiRienzo Executive Director Type or print name and title Date Print/Type preparer's name Preparer's signature Check 🗹 ıf P00339848 Paid self-employed Firm's EIN ▶ 45-0531412 Preparer Use Only Firm's address ▶ 331 N PITT ST Phone no (703) 283-0879 ALEXANDRIA, VA 223142508 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2019) Cat No 11282Y

Form	1 990 (2019)				Page <b>2</b>
Pa	statement	of Program Service Acc	complishments		
	Check if Sche	edule O contains a response or	note to any line in this Part III .		🗆
1	Briefly describe the	organization's mission	·		
		ose is that of promoting the we filver Institute had 23 member	elfare of the silver industry by incr is as of year end 2019	easing the knowledge of and dem	nand for silver products
2	-	,	gram services during the year whi		□Yes ☑No
	•	ese new services on Schedule			
3	•		gnificant changes in how it conduc	ts. any program	
	-				☐ Yes ☑ No
		ese changes on Schedule O			
4	Section 501(c)(3) ar		nplishments for each of its three la required to report the amount of ervice reported		
4a	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	See Additional Data	, (		, ( +	,
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	\
40	See Additional Data	) (Expenses \$	including grants or \$	) (Reveilue \$	,
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	See Additional Data				
4d	Other program servi	ces (Describe in Schedule O )			_
	(Expenses \$	ıncludıng	grants of \$	) (Revenue \$	)
4e	Total program ser	vice expenses ►			

12a

12b

13

14a

14b

15

16

17

18

19

20a

20b

21

No

Nο

Nο

Nο

Nο

Nο

Nο

Nο

Nο

Nο

No

No

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Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Nο 1 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . Nο Νo Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 🛸 . 5 Yes 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? If "Yes," complete No 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 Nο the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," No 

- 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 Nο 9 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, No
- permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V . . . . . . . . . . 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
- Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Nο 11a
- Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total No assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII . . . . . . . . . . 11b
- Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its Nο 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 No 11d
- e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e
- 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)? If "Yes," complete Schedule D, Part X 11f Nο
- 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

**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

Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

14a Did the organization maintain an office, employees, or agents outside of the United States? . . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) . . . . .

**20a** Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* . . . . .

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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Par	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		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? If "Yes," complete Schedule L, 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
8.	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
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
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
2	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
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
4	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
5a	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		
6	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
1 =	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable   1a   4		Yes	No

1b

**b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

Yes

**1**c

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Pa	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		
	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	-
	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)	_	<del> </del>
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
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
	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?	6а	No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	<u> </u>
	Organizations that may receive deductible contributions under section 170(c).	_	
	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?		<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	<u> </u>
a	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	<b>Sponsoring organizations maintaining donor advised funds.</b> 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	
10	Section 501(c)(7) organizations. Enter		
а	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		
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders		
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )		
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.		
	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>
	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		
	Enter the amount of reserves on hand	142	No
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
15	If the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess	270	
	parachute payment(s) during the year?	15	No
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	No

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Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 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	" respo	onse to i	lines
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  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	
Ь	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	
Ь	Each committee with authority to act on behalf of the governing body?	<b>8</b> b	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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code		
			Yes	No
	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		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
Ь	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? If "Yes," describe in Schedule O how this was done	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	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		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		
Se	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed▶			
18				

 $\square$  Own website  $\square$  Another's website  $\square$  Upon request  $\square$  Other (explain in Schedule O)

19

20

policy, and financial statements available to the public during the tax year

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

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest

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Part VII	Compensation of Officer and Independent Contra	•	Truste	es,	Key	<b>E</b> n	nploy	ees	, Highest Comp	ensated Employ	yees,
	Check if Schedule O contains a	response or no	te to an	y line	ın t	thıs	Part VI	١.			<u> </u>
Section	A. Officers, Directors, Tru	stees, Key E	mploy	ees,	, an	ıd F	lighe	st C	Compensated En	nployees	
year ● Lıst all	e this table for all persons require of the organization's current of	icers, directors,	· , trustee	es (wh	neth	er ır	ndıvıdu		, -		-
	ation Enter -0- in columns (D), ( of the organization's <b>current</b> key	,, , ,						finit	ion of "Ivoy omnlovo	0.11	
• List the who receive	organization's <b>current</b> high d reportable compensation (Box and any related organizations	est compensate	d emplo	yees	(oth	her t	than ar	n off	icer, director, truste	e or key employee)	)
	of the organization's <b>former</b> office e compensation from the organiz						pensat	ed e	employees who rece	ived more than \$10	00,000
	of the organization's <b>former dire</b> i, more than \$10,000 of reportab										e
See instruct	ions for the order in which to list	the persons ab	ove								
☑ Check t	his box if neither the organizatio	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	
	(A) Name and title	(B) Average hours per week (list any hours	Position than o	on (do one bo	(C) o no ox, u n of	) t cho unles ficer	eck moss pers	ore son	(D) Reportable compensation from the organization	(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	(W-2/1099- MISC)	(W-2/1099- MISC)	organization and related organizations
See Addition	al Data Table										

☑ Check this box if neither the organizatio	n nor any relate	d organ	iizatio	on co	omp	ensate	d ar	y current officer, di	rector, or trustee	
<b>(A)</b> Name and title	(B) Average hours per week (list any hours		ne bo	ox, ι n of	t che inles ficer	s pers and a	on	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	indradual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	organization and related organizations
See Additional Data Table										
									_	
	-									Form <b>990</b> (2019)

Form 990 (2019) Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (C) (D) (E) (F) Name and title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation director/trustee) any hours organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensated employee Office Individual trustee organizations Ŀ MISC) MISC) related Institutional director below dotted organizations employee line) Trustee

See Additional Data Table						
1b Sub-Total				•		'
c Total from continuation sheets to Pa	art VII, Section	Α		▶		

1b	Sub-Total						•				
С	Total from continuation sheets to Pa	art VII, Section	Α				▶ [				
d	Total (add lines 1b and 1c)						<b>&gt;</b>				
2	Total number of individuals (including	but not limited	to thos	e liste	ed a	bove	e) who	rece	eived more than \$10	00,000	

Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on

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

services rendered to the organization? If "Yes," complete Schedule J for such person . . .

(A)

Name and business address

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

from the organization Report compensation for the calendar year ending with or within the organization's tax year

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

of reportable compensation from the organization > 0

Section B. Independent Contractors

compensation from the organization ▶ 2

line 1a? If "Yes," complete Schedule J for such individual .

3

4

5

KSG LLC

individual .

1400 I Street NW Suite 550 Washington, DC 20005

Michael Barlerin Associates

420 E 51st Street 5E NY, NY 10022

1b Sub-Total				•		
c Total from continuation sheets to Pa	art VII, Section	Α		▶□		
d Total (add lines 1b and 1c)				▶		

1b Sub-Total			•	<b>*</b>		•

Yes

3

4

5

(B)

Description of services

Management Fees

Silver Promotion

No

Nο

Nο

Nο

498,000

190,000

(C)

Compensation

Form 990 (2019)

Part	VIII	Statement	of F	Revenue						rage <b>3</b>
					respo	onse or note to any	y line in this Part VIII (A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D)  Revenue  excluded from
								function revenue	revenue	tax under sections 512 - 514
s	1	a Federated campa	igns		1a					
ants		<b>b</b> Membership dues	s .	. [	<b>1</b> b					
0 m		c Fundraising even	ts .	j	1c					
fs, r A		d Related organiza	tions	s	1d					
<u>≣</u>		e Government grants	(con	tributions)	1e					
ns, Sir		f All other contributio	ns, g	ııfts, grants,						
atio er		and similar amounts above	s not	included [	1f					
들		g Noncash contributio lines 1a - 1f \$	ns in	cluded in						
Contributions, Gifts, Grants and Other Similar Amounts			4 - 4	_ [	<b>1</b> g					
S E		<b>h Total.</b> Add lines	Ta-I	т	•	<del>-</del>	0			
	_	Mambarahin Duas 8.	۸	cmonte		Business Code	1,795,922	1,795,922		
a.	28	Membership Dues & A	Asses	sments			1,, 35,322	1,, 30,322		
ını	b	Miscellaneous					214	214		
Program Service Revenue		D.H					160,127	160,127		
10.6	C	Publications					100,127	190,127		
Ş.	_									
E S	C	¹								
ogra	e	•								
ΔŤ	_									
		All other program								
	_	Total. Add lines 2				1,956,263	_			
		Investment income similar amounts)		iuaing aivia			47	8		478
	4	Income from invest	men	nt of tax-exe	mpt b	ond proceeds	· <u> </u>	0		
	5	Royalties	_				<u> </u>	0		
				(ı) Rea	al	(II) Personal	4			
	6a	Gross rents	6a							
	b	Less rental expenses	6b							
	c	Rental income					$\dashv$			
		or (loss)	6с							
	•	d Net rental income	or					0		
	_	Constant of the constant of th		(ı) Secur	ities	(II) Other	4			
	/ ā	Gross amount from sales of assets other	7a							
		than inventory								
	b	Less cost or other basis and	7b							
		sales expenses					_			
	С	Gain or (loss)	7с							
	•	d Net gain or (loss)	•				_	0		
Ð	8a	Gross income from fu	ındra	ısıng events of						
eun		(not including \$ contributions reported	d on	line 1c)						
lev		See Part IV, line 18			8a					
7.		b Less direct expen c Net income or (los			8b			0		
Other Revenue	•	c Net Income or (los	S) II	om fundrais	ing ev	ents <b>&gt;</b>	_			
	9a	Gross income from	gam	ing activities						
	_	See Part IV, line 19			9a		_			
		Less direct expen			9b	105		0		
	•	c Net Income or (los	is) II	oni ganning	activit	les <b>▶</b>				
	10	aGross sales of inve	ento	ry, less						
		returns and allowa			10a		_			
		Less cost of good			10b			o		
	_	Net income or (los Miscellaneo			invent	Business Code				
	11	La								
	ŀ	b					1	1		
	(	c					1	1		
		d All other revenue					1	1		
	•	e <b>Total.</b> Add lines 1	1a-1	11d		•		0		
	12	<b>2 Total revenue.</b> S	ee ır	nstructions						
							1,956,74	1,956,263	7	478 Form <b>990</b> (2019)

Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must co	omplete all columns	All other organization	ons must complete col	umn (A)
Check if Schedule O contains a response or note to an		_		
o not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0	·		·
Grants and other assistance to domestic individuals See	0			
Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0			
Benefits paid to or for members	0			
Compensation of current officers, directors, trustees, and key employees	0			
Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
Other salaries and wages	0			
Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	0			
Other employee benefits	0			
Payroll taxes	0			
Fees for services (non-employees)				
a Management	498,000			
Legal	0			
Accounting	7,800			
Lobbying	0			
Professional fundraising services See Part IV, line 17	0			
Investment management fees	0			
Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0			
Advertising and promotion	0			
Office expenses	17,655			
Information technology	0			
Royalties	0			
Occupancy	0			
Travel	0			
Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
Conferences, conventions, and meetings	30,029			
Interest	0			
Payments to affiliates	0			
Depreciation, depletion, and amortization	0			
Insurance	0			
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 Silver Promotion Service	569,809			
<b>b</b> World Silver Survey	322,433			
c Market Reports	97,500			
d Sustainability Initiative	88,220			
e All other expenses	180,853			
Total functional expenses. Add lines 1 through 24e	1,812,299	0	0	
i 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)				

			Beginning of year		End of year
	1	Cash-non-interest-bearing	142,517	1	286,959
	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 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		5	0
	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$ ), and persons described in section $4958(c)(3)(B)$		6	0
S	7	Notes and loans receivable, net		7	0
et	8	Inventories for sale or use		8	0
Š	9	Prepaid expenses and deferred charges		9	0

10c

11

12

13

14

15

16

17 18

19

20

21

22 23

24 25

26

27

28

29

30

31

32

33

142,517

142,517

142,517

142,517

0

0

0

0

0

286,959

286,959

286,959

286.959

Form 990 (2019)

10a

10b

10a Land, buildings, and equipment cost or other 11 12 13 14 15 16 17 18

19

20

21

23

24

26

27

28

31

32

33

Liabilities 22

Fund Balances

ō 29

Assets 30 basis Complete Part VI of Schedule D

Investments—publicly traded securities .

Other assets See Part IV, line 11 . . .

Accounts payable and accrued expenses

Investments—other securities See Part IV, line 11 .

Investments—program-related See Part IV, line 11 .

or family member of any of these persons . . .

and other liabilities not included on lines 17 - 24)

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

**Total assets.** Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Organizations that follow FASB ASC 958, check here ▶

Organizations that do not follow FASB ASC 958, check here ▶

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

b Less accumulated depreciation

Intangible assets . . .

Grants payable .

Deferred revenue . .

Tax-exempt bond liabilities .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions

complete lines 29 through 33.

Total net assets or fund balances

Form	990 (2019)				Page <b>12</b>
Pai	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1	,956,741
2	Total expenses (must equal Part IX, column (A), line 25)	2		1	,812,299
3	Revenue less expenses Subtract line 2 from line 1	3			144,442
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			142,517
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 33, column (B))	10			286,959
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
	Accounting method used to prepare the Form 990  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O  Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	No No
Za	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	Za		NO
	☐ 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	basıs,			
	☑ 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			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii Audit Act and OMB Circular A-133?	ngle	3a		No
Ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requiaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	red	3b		

## **Additional Data**

regulators and governing bodies on silver

**Software ID:** 19009920 Software Version: 2019v5.0

The Silver Institutes Industrial Program provides for technical and industrial conferences which the Institute either sponsors or participates. The Program also educates

**EIN:** 23-7108453

Name: The Silver Institute Inc.

Form 990 (2019) Form 990, Part III, Line 4a:

### Form 990, Part III, Line 4b:

highlight trends in the silver marketplace and fostering research of silver related applications

The Silver Institute's General Program provides a variety of services benefiting the industry including development of a Silver Promotion Service, an industry program to

boost demand for sterling silver newelry, increasing awareness and education about silver through the Silver Institute's web site, press releases and newsletters that

### Form 990, Part III, Line 4c:

the positive benefits of silver. The Silver Institute put in place a monitoring program to work with members and regulators regarding the use of silver in nanotechnology and

The Silver Institute's Industrial Program provides a forum for research to stimulate new and significant industry uses of silver and education of regulators and the public on

as a general microbial

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	formulated	anu					,		(W. 2/1000 (W. 2/1000	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Chirag Thakkar Director	0 00	×						0	0	0
Fernando Alanıs Dırector	0 00	×						0	0	0
Bradford Cooke Vice President	0 00	×		х				0	0	0
Ben Van Kerkwijk Director	0 00	×						0	0	0
Phillips Baker Jr Director	0 00	×						0	0	0
Victor Gobitz	0 00									

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Director	
Phillips Baker Jr	
Director	
Victor Gobitz	Γ

Director

Director

Director

Director

Director

Terry Hanlon

Erman Donmez

Ounesh Reebye

Octavio Alvidrez Ortega

and Independent Contractors

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) from the organization organizations

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Director

Director

Director

Director

Director

Director

Paul Healey

Michael Mesaric

Tony Williams

David Madge

Keith Neumeyer

	any nours	and	a dir	ecto	r/tr	ustee)	'	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Ignacio Bustamante	0 00									
-		×						0	0	0
Director	0 00									
Kevin Hall	0 00									
		Х						0	0	0
Director	0 00									_
Chiaki Kaneko	0 00									
		X						0	0	0
Director	0 00									
Stephen Orr	0 00									
otophen on		X						0	0	0

Chiaki Kaneko	0 00	×			0	
Director	0 00	`			Ŭ	
Stephen Orr	0 00	×			0	
Director	0 00				Ů	
Mitchell Krebs	0 00	×			0	

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and Independent Contractors (A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other

week (list

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

person is both an officer

from the

from related

compensation from the

0

0

	any hours						)	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Mike Clark	0 00									
Director		×						0	0	0
Director	0 00									
Michael Steinmann	0 00									
		×		X				0	0	0
President	0 00									
John Lamb	0 00									
Som Lamb		×						0	0	0
Director	0 00									
Carlos Quiroga	0 00									
Carros Quiroga				×				0	0	0
Asst Treasurer	0 00									

30 00

0 00

0 00

Michael DiRienzo

Exec Dir & Secy

Joe Ungers

Treasurer

**SCHEDULE C** 

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

DLN: 93493072005400

Department of the Treasury Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

EZ)

(Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

• 5	Section 501(c) (other than section 5	501(c)(3)) organizations Complete Parts	I-A and C below	Do not complete Part I-B	
	Section 527 organizations Complete organization answered "Yes" or	te Part I-A only n Form 990, Part IV, Line 4, or Form 9	ዓበ-F7 Part VI lin	e 47 (Lohhving Activities	s) then
		t have filed Form 5768 (election under s			
• 9	Section 501(c)(3) organizations that	t have NOT filed Form 5768 (election un	ider section 501(h	)) Complete Part II-B Do	not complete Part II-A
		n Form 990, Part IV, Line 5 (Proxy Tax	() (see separate in	nstructions) or Form 990	-EZ, Part V, line 35c
	oxy Tax) (see separate instruction Section 501(c)(4), (5), or (6) organiz				
	me of the organization	zations Complete Fait III		Employer ider	ntification number
	e Silver Institute Inc				
_				23-7108453	
ĊΙ	rt I-A Complete if the orga	nization is exempt under sectio	n 501(c) or is	a section 527 organi	zation.
1	Provide a description of the organ "political campaign activities")	nization's direct and indirect political can	npaign activities in	Part IV (see instructions t	for definition of
2	Political campaign activity expend	litures (see instructions)		<b>&gt;</b>	\$
3	Volunteer hours for political camp				
Par	rt I-B Complete if the orga	nization is exempt under sectio	n 501(c)(3).		
1	Enter the amount of any excise ta	ax incurred by the organization under se	ction 4955	<b>&gt;</b>	\$
2	Enter the amount of any excise ta	ax incurred by organization managers ur	nder section 4955	<b>&gt;</b>	\$
3	If the organization incurred a sect	tion 4955 tax, did it file Form 4720 for t	hıs year?		☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV				
Par	rt I-C Complete if the orga	nization is exempt under sectio	n 501(c), exce	pt section 501(c)(3)	).
1	Enter the amount directly expend	ed by the filing organization for section	527 exempt funct	on activities	\$
2	Enter the amount of the filing org function activities	anization's funds contributed to other or	rganizations for se	ction 527 exempt ▶	\$
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and or	Form 1120-POL,	line 17b ►	\$
4	Did the filing organization file For	m 1120-POL for this year?			☐ Yes 🗹 No
5	organization made payments For of political contributions received	employer identification number (EIN) of reach organization listed, enter the amo that were promptly and directly delivere ee (PAC) If additional space is needed,	ount paid from the ed to a separate po	filing organization's funds olitical organization, such	Also enter the amount
	(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					
1					
5					
5					
or P	Paperwork Reduction Act Notice, see	the instructions for Form 990 or 990-EZ.	Cat	No 50084S Schedule C (	(Form 990 or 990-EZ) 2019

activity

Volunteers?

1

(b)

Amount

(a)

Yes | No

### Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? b Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 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 Were substantially all (90% or more) dues received nondeductible by members? 1 Nο 1 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Yes Did the organization agree to carry over lobbying and political expenditures from the prior year? Nο Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B 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." Dues, assessments and similar amounts from members 1 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). 2a Current year Carryover from last year 2b c Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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 expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) 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

Explanation

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

Return Reference

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

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

efile GRAPHIC	print - D	O NO	T PROCES	S As	Filed Data -		DLN: 93493072005400							
Schedule L			Tran	sacti	ons with Ir	ntereste	d Persor	าร			OI	MB No	1545	-0047
(Form 990 or 990-	-EZ)   ► Co	mplet	te if the orga	anizatior	answered "Yes	s" on Form 9	90, Part IV, I	ines 2	25a, 2	25b, 26	5,	2019		
			27, 28a,		28c, or Form 99 ach to Form 99			40Ь.				<b>4</b> U	<b>/</b>	J
Department of the Trea	I	▶G	io to <u>www.ii</u>	rs.gov/F	orm990 for inst	ructions and	the latest in	forma	tion.		(	) Open		
Internal Revenue Service Name of the organic								l Fi	mnlo	yer ide	ntifica	Insp ation n		
The Silver Institute									•	-		1011 11	чии	C1
Part I Exces	ss Ronofit	Tran	sactions (	section 50	)1(c)(3), section !	501(c)(4) and	d section 501/a			8453	e only	\		
			•		n Form 990, Part		•		-			,		
1 (a)	Name of di	squali	fied person	(1	) Relationship be		lified person ai	nd		escript		(d) Corrected?		
					organization			tr	ansactı	on	Y	es	No	
				-				_						
				+										
					managers or dis			year ı	under 	_	ր \$ ——			
3 Enter the an	nount of tax,	, if any	y, on line 2, a	above, rei	mbursed by the o	rganızatıon .					\$			
Part II Loa	ns to and	/or F	From Inter	ested P	ersons									
Com	plete if the	organı	ization answe	red "Yes"	on Form 990-EZ	, Part V, line 3	38a, or Form 99	90, Pa	rt IV,	line 26	, or if	the org	anıza	tion
(a) Name of			n Form 990,		e 5, 6, or 22 In to or from the	(e) Original	(f) Balance	(a)	) In		h)		1 W/r	tten
interested person	with organiz	zation	of loan		ganization?	principal	due		ult?	Appro	ved by	red by agreement? d or		
						amount				1	rd or nittee?			
				То	From	1		Yes	No	Yes	No	Yes		No
Total					)	<b>\$</b>				•	•			
				_	erested Perso									
(a) Name of Interes			nızatıon an ) Relatıonshır		Yes" on Form 9			of 200	ctone		(a) Du		£ 200	atanaa
(a) Name of inter-	ested persor		erested perso			or assistance	(d) Type	OI ass	Stant	.	(e) Pu	rpose c	n ass	ıstance
			organizat	ion										
		+			+		1							
		+					+							
		1												
For Paperwork Red	uction Act No	tice, s	ee the Instru	ctions for	Form 990 or 990-L	EZ. C	at No 50056A		Sc	nedule i	L (Form	990 or	990-	EZ) 2019

(1) 130 EEC	Shared Officer	+70,000	rianagement i ee	110

**Explanation** 

Schedule I (Form 990 or 990-F7) 2019

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

Part V

Supplemental Information

Return Reference

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SCHEDUL (Form 990 or EZ)	r 990-EZ estions on ation. on.	OMB No 1545-0047 2019 Open to Public Inspection	
ฟล <del>หาย</del> BF the of g The Silver Institute 990 Schedule	cation number		
Return Reference	Explanation		
Form 990, Part VI, Line 3 Description of Delegated Duties to Management Company	KSG, LLC provides association management services in connection with the impleme Institute	ntation and administration	on of The Silver

Return Reference	Explanation
Form 990, Part VI, Line 6 Explanation of Classes of Members or Shareholder	The Silver Institute draws its membership from across the breadth of the silver industry This includes leading silver mining houses, refiners, bullion suppliers, manufacturers of silver products and wholesalers of silver investment products

Return Reference

The Form 990 is made available upon request to the Board of Directors for their review. Th

Part VI, Line e Form 990 is reviewed in detail by the Institute's Executive Director e Form 990 is reviewed in detail by the Institute's Executive Director 11b Form 990 Review Process

Return Reference	Explanation
Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	The Silver Institute does not have any employees The Silver Institute is managed under co ntract 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.

Return Reference	Explanation
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	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.