** PUBLIC DISCLOSURE COPY **

Extended to July 15, 2024

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.

Open to Public

Inspection

Department of the Treasury

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

2023 A For the 2022 calendar year, or tax year beginning SEP 1, 2022 and ending AUG 31, Check if C Name of organization D Employer identification number Address Mercatus Center, Inc. 54-1436224 Doing business as Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return 3434 Washington Blvd, 4th Floor 703-993-4930 48,124,532. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Arlington, VA 22201-4508 H(a) Is this a group return Applica-F Name and address of principal officer: Gary Leff for subordinates? Yes X No pending same as C above H(b) Are all subordinates included? Yes I Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or 527 If "No." attach a list. See instructions www.mercatus.org H(c) Group exemption number Association K Form of organization: X Corporation Trust Other L Year of formation: 1987 M State of legal domicile: VA Part I Summary Briefly describe the organization's mission or most significant activities: To bridge the gap between Governance academic research and public policy problems. if the organization discontinued its operations or disposed of more than 25% of its net assets. 12 Number of voting members of the governing body (Part VI, line 1a) 9 Number of independent voting members of the governing body (Part VI, line 1b) Activities & 219 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 6 Total number of volunteers (estimate if necessary) 0 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7b Prior Year Current Year 49,537,054. 45,540,249. 8 Contributions and grants (Part VIII, line 1h) Revenue 312,700. 9 Program service revenue (Part VIII, line 2g) 153,426. 122,581. 1,230,208. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 293,449. 363,735. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 50,106,510. 47,446,892. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 11,459,282. 12,417,727. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 20,538,479. 21,351,126. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 80,000. 16a Professional fundraising fees (Part IX, column (A), line 11e) 1,990,967. b Total fundraising expenses (Part IX, column (D), line 25) 13,088,962. 15,401,776. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 49,250,629. 45,086,723. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 5,019,787. -1,803,737. 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 10 43,899,623. 43,118,804. 20 Total assets (Part X, line 16) 4,530,547. 5,523,818. 21 Total liabilities (Part X, line 26) 39,369,076. 37,594,986. 22 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. DW Signature of officer Sign Gary Leff, Treasurer and CFO Here Type or print name and title Print/Type preparer's name 02/23/24 P00639819 Paid Lori A. Collingsworth Firm's EIN 58-2676261 Rogers & Company FLLC Preparer Firm's name Firm's address 8300 Boone Boulevard, Suite 600 Use Only Vienna, VA 22182 Phone no. (703) 893-0300 X Yes No May the IRS discuss this return with the preparer shown above? See instructions

Га	Check if Schedule O contains a response or note to any line in this Part III
_	
1	Briefly describe the organization's mission: The Center educates students and is an organization that uses sound
	interdisciplinary research and application in the humane sciences that
	integrates theory and practice to develop insights and tools that can
	sustainably advance a free, prosperous, and civil society.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
4-	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$\frac{18,044,637.}{\text{including grants of \$}}\$ \frac{9,010,879.}{\text{ports}}\$ (Revenue \$\frac{172,000.}{\text{of and faculty}}\$)
	activities at George Mason University and elsewhere to advance and
	apply a research agenda for understanding institutions and change or
	broadly advance a free and prosperous society.
41-	(Code:)(Expenses \$ 14,015,129. including grants of \$ 2,531,975.) (Revenue \$ 32,899.)
4b	(Code:)(Expenses \$ 14,015,129. including grants of \$ 2,531,975.) (Revenue \$ 32,899.) Applied Research - Conduct economic research of consequence that makes
	sense of public policy problems and puts forward solutions that
	maximize individual freedom and prosperity.
40	(Code:) (Expenses \$ 7,668,668 • including grants of \$ 856,123 •) (Revenue \$ 105,771 •)
70	Student Programs - Support Graduate Students at George Mason University
	and elsewhere training future scholars and decision-makers to advance
	and apply a research agenda for understanding institutions and change.
	Other program convices (Describe on Schodule O.)
4d	Other program services (Describe on Schedule O.) (Expenses \$ 6,187,613 • including grants of \$ 18,750 •) (Revenue \$ 2,030 •)
	Total program service expenses 45,916,047.
	Form 990 (2022)

Form 990 (2022) Mercatus Center, Inc. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			٠,,
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			,
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
_	as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	Part VI	11a	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	Ha		
~	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
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		х
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? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
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)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	77	Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
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		v	
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
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	45	х	
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15	- 22	
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	х	
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		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
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	X	
23200	3 12-13-22	Form	990	(2022)

Form 990 (2022) Mercatus Center, Inc. Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
Б	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Cohodula I Dout I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		
20	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		х
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? If "Yes," complete Schedule L, Part III	27		х
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		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Х	
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			3,7
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			X
0.4	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	24		Х
25.0	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		<u> </u>
b	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?	335		
00	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
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	Х	
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 543			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		v	
	(gambling) winnings to prize winners?	1c	X	I

Mercatus Center, Inc. Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				Yes	No					
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	210								
	filed for the calendar year ending with or within the year covered by this return	219		v						
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b 3a	X	Х					
	Did the organization have unrelated business gross income of \$1,000 or more during the year?									
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O									
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a									
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?									
D	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts.	nto (EDAD)								
50	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х					
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b		X					
	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 have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the organization have annual gross receipts the greater than \$100,000, and did the greater than \$100,000, a									
-	any contributions that were not tax deductible as charitable contributions?		6a		Х					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions									
	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	Х						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was re	quired								
	to file Form 8282?		7c		X					
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 contra	ct?	7e		X					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8		7g							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by t									
_			8							
9	Sponsoring organizations maintaining donor advised funds.		00							
a	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9a 9b							
10	Section 501(c)(7) organizations. Enter:		90							
	Initiation fees and capital contributions included on Part VIII, line 12	1								
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b									
11	Section 501(c)(12) organizations. Enter:									
а	Gross income from members or shareholders 11a									
	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 104	?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
а	Is the organization licensed to issue qualified health plans in more than one state?		13a							
	Note: See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1								
	organization is licensed to issue qualified health plans 13b									
	Enter the amount of reserves on hand		44-		X					
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		- 25					
ъ 15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration		14b							
.5	excess parachute payment(s) during the year?		15		Х					
	If "Yes," see the instructions and file Form 4720, Schedule N.		.0							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment inc	ome?	16		Х					
	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activitie	es								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17							
	If "Yes," complete Form 6069.									

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI				X					
Sec	tion 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	12								
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.									
b	Enter the number of voting members included on line 1a, above, who are independent	9								
2										
_	officer, director, trustee, or key employee?		2		Х					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	······	_							
•	of officers, directors, trustees, or key employees to a management company or other person?		3		х					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	Г	4		X					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	г	5		X					
6	Did the organization have members or stockholders?		6		X					
_	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or	·····	\dashv							
7a			7a		x					
	more members of the governing body?	······	/a							
b			-		x					
_	persons other than the governing body?	·····	7b							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			Х						
a	The governing body?		8a	X	_					
b	Each committee with authority to act on behalf of the governing body?	······	8b							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the				- V					
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
		г		Yes	No					
	Did the organization have local chapters, branches, or affiliates?	······	10a		X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		77					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the for	m?	11a		X					
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			77						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		12b	X						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	on Schedule O how this was done		12c	X						
13	Did the organization have a written whistleblower policy?		13	Х						
14	Did the organization have a written document retention and destruction policy?		14	X						
15	Did the process for determining compensation of the following persons include a review and approval by independent									
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official		15a	X						
b	Other officers or key employees of the organization		15b	X						
	If "Yes" to line 15a or 15b, describe the process 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		X					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
	exempt status with respect to such arrangements?		16b							
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed AL, AR, CA, FL, HI, IL, KS, KY	, ME	, MD	, MA	,MI					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 50									
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website X Upon request Other (explain on Schedule O)									
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest poli	cy, and	d finar	ncial						
	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									
	The Center - 703-993-4930									
	3434 Washington Blvd, 4th Floor, Arlington, VA 22201-4508									

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization ne	or any related	orga	aniza	ation	cor	npei	nsa	ted any current officer, o	director, or trustee.	
(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	(do	Position (do not about more than a		one	Reportable	Reportable	Estimated		
	hours per	box, unl		not check more than one , unless person is both an cer and a director/trustee)			h an	compensation	compensation	amount of
	week	⊢	cer an	ia a a	irecto	or/trus	tee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruste	ll trus		ee/	mpen		1099-NEC)	1033 (420)	and related
	below	dualt	Institutional trustee	_	Key employee	st co	ie ie	.5551.257		organizations
	line)	Indivi	Instit	Officer	Key e	Highest compensated employee	Form			
(1) Daniel Rothschild	40.00									
Executive Director				Х				502,950.	0.	32,694.
(2) Daniel Butler	40.00								_	
Senior Director of Development						Х		334,365.	0.	16,498.
(3) Veronique De Rugy	40.00								_	
Senior Research Fellow						Х		301,734.	0.	20,790.
(4) Eileen Norcross	40.00									
VP of Policy Research						Х		270,287.	0.	27,598.
(5) Jennifer Zambone	40.00			l				050 050		40 000
Secretary & COO	4.0			Х				250,850.	0.	10,827.
(6) Patrick McLaughlin	40.00									
Director of Policy Analytics						Х		233,350.	0.	10,735.
(7) Alden Abbott	40.00									=
Senior Research Fellow						Х		230,882.	0.	735.
(8) Tyler Cowen	1.00	l		l				005 000		
Chairman	4.0	Х		Х				225,000.	0.	0.
(9) Virgil Henry Storr	40.00	١						010 504	•	
Director/ VP Academic & Student Prog	0000	Х						218,784.	0.	14.
(10) Gary Leff	20.00							107 000	0	00 000
Treasurer & CFO	1 00			Х				187,000.	0.	20,932.
(11) Donald Boudreaux	1.00	,,						06 000	0	0
Director	1 00	Х					_	86,800.	0.	0.
(12) Richard Fink	1.00	X						0.	0.	0.
Director	1.00	^					_	0.	0.	0.
(13) Vernon Smith	1.00	X						0.	0.	0.
Director (14) Brian Hooks	1.00	^						0.	0.	0.
Director	1.00	X						0.	0.	0.
(15) Emily Chamlee-Wright	1.00	Δ					_	0.	0.	<u> </u>
Director	1.00	x						0.	0.	0.
(16) Edwin Meese	1.00								0.	J •
Director		x						0.	0.	0.
(17) Manuel Johnson	1.00				\vdash				•	<u></u>
Director		x						0.	0.	0.
–			1					1		

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)	(B) (C)						(D)	(E)	(F)
Name and title	Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)		Reportable compensation from	Reportable compensation from related	Estimated amount of other			
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) Salen Churi	1.00									
Director	1	Х						0.	0.	0.
(19) Samuel Bowman Director	1.00	x						0.	0.	0.
(20) Katherine Boyle	1.00									
Director		Х						0.	0.	0.
1b Subtotal								2,842,002.	0.	140,823.
c Total from continuation sheets to Part V								2,842,002.	0.	0. 140,823.
d Total (add lines 1b and 1c)								•		140,043.
Total number of individuals (including but r compensation from the organization	ioi ilmitea to tr	iose	iiste	eu ai	DOVE	e) Wr	io re	eceived more than \$100	,000 of reportable	63

compensation from the organization

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Bluespark LLC, 7610 Falls of Neuse		
Rd.Suite 100, Raleigh, NC 27615	Consulting services	342,460.
·	Cloud-based online	
Floor, San Francisco, CA 94105	software services	193,133.
AVUniversal LLC	Audio visual	
311 Sunset Park Drive, Herndon, VA 20170	equipment services	165,690.
Marriott International	Event venue/	_
P.O. Box 402642, Atlanta, GA 30384	services	153,165.
<u>-</u>	Academic Lectures	_
10343 Commonwealth Blvd, Fairfax, VA 22032	and Research Discuss	128,350.
2 Total number of independent contractors (including but not limited to those liste	d above) who received more than	
\$100,000 of compensation from the organization		

54-1436224 Mercatus Center, Inc. Page 9 Form 990 (2022) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) Revenuè éxcluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 45,540,249. 1f 181,209. g Noncash contributions included in lines 1a-1f 1g |\$ h Total. Add lines 1a-1f 45,540,249 **Business Code** Program Service Revenue 2 a Educational programs 611710 312,700. 312,700. С f All other program service revenue 312,700. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 1,263,863 1,263,863. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 309,413 6 a Gross rents **b** Less: rental expenses ... 6b 309,413. c Rental income or (loss) 309,413, 309,413. d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 642,725. 1,260. 7a **b** Less: cost or other basis Other Revenue 676,626. 1,014 and sales expenses 7b -33,901. 246. c Gain or (loss) _____ 7c -33,655. -33,655. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities **10 a** Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11 a Credit card rewards 900099 54,322 54,322.

b

d All other revenue

Total revenue. See instructions

e Total. Add lines 11a-11d

54,322

312,700.

47,446,892.

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).

Sect	Check if Schedule O contains a response or note to any line in this Part IX								
_									
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses				
1	Grants and other assistance to domestic organizations								
	and domestic governments. See Part IV, line 21	6,757,210.	6,757,210.						
2	Grants and other assistance to domestic	4 470 044							
	individuals. See Part IV, line 22	1,478,244.	1,478,244.						
3	Grants and other assistance to foreign								
	organizations, foreign governments, and foreign		4 100 000						
	individuals. See Part IV, lines 15 and 16	4,182,273.	4,182,273.						
4	Benefits paid to or for members								
5	Compensation of current officers, directors,	1 400 200	200 050	EOC 11E	EOC 11E				
	trustees, and key employees	1,490,288.	298,058.	596,115.	596,115.				
6	Compensation not included above to disqualified								
	persons (as defined under section 4958(f)(1)) and	20 (50	22 060	7 700					
	persons described in section 4958(c)(3)(B)	30,658.		7,798.	E12 E40				
7	Other salaries and wages	17,290,387.	16,554,893.	221,954.	513,540.				
8	Pension plan accruals and contributions (include								
^	section 401(k) and 403(b) employer contributions)	1,266,137.	1,182,497.	29,873.	53,767.				
9	Other employee benefits	1,273,656.		69,709.	71,687.				
10	Payroll taxes	1,2/3,030.	1,132,200•	09,109.	/ 1 , 00 / •				
11	Fees for services (nonemployees):								
	Management	63,890.	51,483.	43.	12,364.				
	Legal	20,804.	31,403.	20,804.	12,504.				
	Accounting	20,004.		20,004.					
	Lobbying Professional fundraising services. See Part IV, line 17	80,000.			80,000.				
f	Investment management fees	11,021.		11,021.	00,000				
	Other. (If line 11g amount exceeds 10% of line 25,								
9	column (A), amount, list line 11g expenses on Sch O.)	6,113,063.	5,775,266.	57,760.	280,037.				
12	Advertising and promotion	235,694.	235,327.	147.	220.				
13	Office expenses	1,347,537.	1,079,251.	30,138.	238,148.				
14	Information technology	1,108,744.	941,040.	134,225.	33,479.				
15	Royalties		,						
16	Occupancy	1,534,884.	1,431,802.	41,335.	61,747.				
17	Travel	3,457,142.	3,416,332.	31,541.	9,269.				
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	1,083,893.	1,074,666.	6,786.	2,441.				
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	295,423.	275,582.	7,956.	11,885.				
23	Insurance	69,235.		69,235.					
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)								
а	List rental	27,181.	1,295.		25,886.				
b	Memberships	24,828.	17,837.	6,948.	43.				
С	Property taxes	8,437.	7,871.	227.	339.				
d									
е	All other expenses								
25	Total functional expenses. Add lines 1 through 24e	49,250,629.	45,916,047.	1,343,615.	1,990,967.				
26	Joint costs. Complete this line only if the organization								
	reported in column (B) joint costs from a combined								
	educational campaign and fundraising solicitation.								
	Check here if following SOP 98-2 (ASC 958-720)								
	0 10 10 00				Earm 990 (2022)				

Га	ιλ	Dalance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			14,723,036.	1	11,621,093.
	2	Savings and temporary cash investments			26,017,195.	2	27,763,585.
	3	Pledges and grants receivable, net			250,000.	3	406,250.
	4	Accounts receivable, net			23,387.	4	235,458.
	5	Loans and other receivables from any current or	forme	officer, director,			
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of thes	ons		5		
	6	Loans and other receivables from other disquali	fied pe	rsons (as defined			
		under section 4958(f)(1)), and persons described				6	
sts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			737,023.	9	885,417.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		1,659,967.	164 445		504 055
	b	Less: accumulated depreciation		1,158,612.	461,115.	10c	501,355.
	11	Investments - publicly traded securities			1,687,867.	11	1,705,646.
	12	Investments - other securities. See Part IV, line	1			12	
	13	Investments - program-related. See Part IV, line		_		13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11	42 000 602	15	42 440 004		
	16	Total assets. Add lines 1 through 15 (must equ			43,899,623.	16	43,118,804.
	17	Accounts payable and accrued expenses	1,368,326.	17	2,188,407.		
	18	Grants payable	2,870,376.	18	3,046,903.		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
ies	22	Loans and other payables to any current or forn					
ij		trustee, key employee, creator or founder, subs					
Liabilities		controlled entity or family member of any of these				22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate		_		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	17-24)	. Complete Part X	291,845.	0.5	288,508.
		of Schedule D			4,530,547.	25	5,523,818.
	26	Total liabilities. Add lines 17 through 25		77	4,550,547.	26	3,323,010.
es		Organizations that follow FASB ASC 958, che	ck ner	e A			
JI C	07	and complete lines 27, 28, 32, and 33.			23,165,573.	27	21,777,415.
3al	27				16,203,503.	28	15,817,571.
βE	28	Net assets with donor restrictions			10,203,303	20	13,017,371.
Ξ			30, CH	eck nere			
9	20	and complete lines 29 through 33.				20	
ets	29	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or ed				29 30	
Ass	30 31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances	32				39,369,076.	32	37,594,986.
Z	33	Total net assets or fund balances			43,899,623.	33	43,118,804.
	J	TOTAL HADHILLES AND THE ASSELS/TUTTU DAIAFICES			10,000,020	JJ	Torm 990 (2022)

Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)		47,44					
2	Total expenses (must equal Part IX, column (A), line 25)	2	49,25	0,6	29.			
3	Revenue less expenses. Subtract line 2 from line 1 3 -1							
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 39							
5	Net unrealized gains (losses) on investments	5	2	9,6	47.			
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10	37,59	4,9	86.			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII				X			
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	X				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,						
	consolidated basis, or both:							
	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	e audit,						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the							
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		За		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required							
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b					

Form **990** (2022)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Mercatus Center, Inc.

Employer identification number

54-1436224 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	30,278,963.	71,316,366.	49,704,276.	49,537,054.	45,540,249.	246,376,908.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4	Total. Add lines 1 through 3	30,278,963.	71,316,366.	49,704,276.	49,537,054.	45,540,249.	246,376,908.		
5	The portion of total contributions								
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11,								
	column (f)						56,639,017.		
	Public support. Subtract line 5 from line 4.						189,737,891.		
	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
7	Amounts from line 4	30,278,963.	71,316,366.	49,704,276.	49,537,054.	45,540,249.	246,376,908.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources \dots	367,427.	380,155.	355,505.	380,772.	1,573,276.	3,057,135.		
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)								
11	Total support. Add lines 7 through 10						249,434,043.		
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	875,922.		
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)			
_	organization, check this box and stor						<u></u>		
	ction C. Computation of Publ						76 07		
	Public support percentage for 2022 (14	76.07 %		
15	Public support percentage from 2021					15	75.73 %		
16a	33 1/3% support test - 2022. If the o								
	stop here. The organization qualifies								
b	33 1/3% support test - 2021. If the								
4-	and stop here. The organization qual								
17a	10% -facts-and-circumstances tes	•					•		
	and if the organization meets the fact			=	·	_			
	meets the facts-and-circumstances to	_	•	* * * * * * * * * * * * * * * * * * * *	-				
b	10% -facts-and-circumstances tes	-					IU% Or		
	more, and if the organization meets the				•				
40	organization meets the facts-and-circ								
18	Private foundation. If the organization	n dia not check a	box on line 13, 16	a, 160, 1/a, or 1/k	o, cneck this box a	na see instruction:	s 📖		

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

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

Section A. Public Support	below, please con	ipiete Fart II.)				
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and	, ,		, ,	, ,		,,
membership fees received. (Do not						
include any "unusual grants.")						
Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons b Amounts included on lines 2 and 3 received	;					
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses						
acquired after June 30, 1075						
Add lines 10a and 10b						
regularly carried on 12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part VI.)					+	
Total support. (Add lines 9, 10c, 11, and 12.)First 5 years. If the Form 990 is for		first seems thing	fourth or fifth to:	Voor oo o cootier	F01(a)(2) argani	tion
•	.ne organization s i	iirst, second, triird,	, iourtii, or iiitii tax	year as a section	50 r(c)(s) organizat	tion,
check this box and stop here Section C. Computation of Pub	lic Support Pe	ercentage				
			oolumn (f))		15	0/
15 Public support percentage for 2022					 	%
16 Public support percentage from 202 Section D. Computation of Investigation					16	%
· · · · · · · · · · · · · · · · · · ·		<u>~</u> _			147	
17 Investment income percentage for 2					17	%
18 Investment income percentage from					18	<u> </u>
19a 33 1/3% support tests - 2022. If th	-					1 / Is not
more than 33 1/3%, check this box b 33 1/3% support tests - 2021. If the						and
line 18 is not more than 33 1/3%, ch	neck this box and s	top here. The orga	anization qualifies a	as a publicly supp	orted organization	
20 Private foundation. If the organizat						

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

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

,		Yes	No
	1		
	•		
	2		
	3a		
	3b		
	3с		
	4a		
	70		
	4b		
	4c		
	5a		
	Эa		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	-		
	Oh.		
	9b		
	9с		
	10a		
	iva		
	10b		
dule	A (Forr	n 990)	2022

Pa	rt IV Supporting Organizations _(continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	_		
<u>Caa</u>	supervised, or controlled the supporting organization.	2		Щ_
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
Sac	the supported organization(s). etion D. All Type III Supporting Organizations	1	ш	<u> </u>
500	Tion D. All Type III Supporting Organizations		V	Na
4	Did the examination provide to each of its supported examinations, by the last day of the fifth month of the		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a	_		
•	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions))-		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	structio	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b	\sqcup	
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а				
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Sche	dule A (Form 990) 2022 Mercatus Center, Inc.			54-1436224 Page 6
Pai		ng Orga	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust o	n Nov. 20, 1970 (explain	n in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	t complet	te Sections A through E	<u>=. </u>
Sect	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on C - Distributable Amount			Current Year

emergency temporary reduction (see instructions). Uneck here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

1 Adjusted net income for prior year (from Section A, line 8, column A)

Minimum asset amount for prior year (from Section B, line 8, column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

Schedule A (Form 990) 2022

2 Enter 0.85 of line 1.

Enter greater of line 2 or line 3.

Income tax imposed in prior year

3

1

2

3 4

5

6

Pa	t V Type III Non-Functionally Integrated 50	9(a)(3) Supporting Orga	anizations _(continued)			
Section D - Distributions Current Year						
1	Amounts paid to supported organizations to accomplish ex	kempt purposes	1			
2	Amounts paid to perform activity that directly furthers exer	npt purposes of supported				
	organizations, in excess of income from activity		2			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organization	s 3			
4	Amounts paid to acquire exempt-use assets					
5	Qualified set-aside amounts (prior IRS approval required - p	5				
6	Other distributions (describe in Part VI). See instructions.		6			
7	Total annual distributions. Add lines 1 through 6.		7			
8	Distributions to attentive supported organizations to which					
	(provide details in Part VI). See instructions.	8				
9	Distributable amount for 2022 from Section C, line 6	9				
10	Line 8 amount divided by line 9 amount		10			
		(i)	(ii)	(iii)		

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

Schedule A (Form 990) 2022

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service

Name of the organization

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

Mercatus Center, Inc.

Employer identification number

M	Mercatus Center, Inc.	54-1436224					
Organization type (check	cone):						
Filers of:	Section:						
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Note: Only a section 501(n is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special I	Rule. See instructions.					
General Rule							
	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor.						
Special Rules							
sections 509(a)(1 contributor, durir	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (EZ, line 1. Complete Parts I and II.	and that received from any one					
contributor, durir literary, or educa	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.						
year, contribution is checked, enter purpose. Don't c	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
-	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B ne 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-F						

 $\ \, \text{LHA} \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2022)

Name of organization Employer identification number

Mercatus Center, Inc.

54-1436224

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1		\$14,061,388.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2		\$ 8,704,500.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
3		\$ 7,772,200.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
4	Name, audress, and ZIF + 4	\$3,022,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
5		\$ <u>1,000,000</u> .	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		

Name of organization Employer identification number

Mercatus Center, Inc.

54-1436224

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\ \ 			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
-		 \$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		\ \ \$			

Name of organization Employer identification number Mercatus Center, Inc. 54-1436224

	from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, ch	naritable, etc., contributions of \$1,000 or	section 501(c)(7), (8), or (10) that total more than \$1,000 for the try. For organizations less for the year. (Enter this info. once.)		
No. om rt I	Use duplicate copies of Part III if additional s (b) Purpose of gift	pace is needed.	(d) Description of how gift is held		
_					
-		(e) Transfer of git	ft		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee		
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
t I —					
		(e) Transfer of git	ft		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee		
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
<u> </u>	(2) 1 31 posso 21 g.11	(6) 656 6. g	(a) Description of the section of th		
_		(e) Transfer of gif	ft		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee		
No. om ort I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
_					
	(e) Transfer of gift				

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public

Inspection

Name of the organization

Mercatus Center, Inc.

Employer identification number 54-1436224

Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o		
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).	
	Preservation of land for public use (for example, recrea	tion or education) Preservation of	f a historically important land area
	Protection of natural habitat	Preservation of	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after July 25,2006, and not on a	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel		
	year		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	ation easements during the year
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		Yes
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial staten	nents that describes the
	organization's accounting for conservation easements.		
Pai	t III Organizations Maintaining Collections of		other Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement	and balance sheet works
	of art, historical treasures, or other similar assets held for public	olic exhibition, education, or research in f	urtherance of public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these iter	ns.
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and	balance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furt	herance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art, historical treatment	asures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under FASB A	SC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		\$

	t III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures, d	or Othe	r Similar A	ssets(continu	ed)
3	Using the organization's acquisition, accession	on, and other record	ls, chec	k any of the	following tha	t make si	gnificant use	of its	
	collection items (check all that apply):								
а	Public exhibition	d		Loan or exc	hange progra	am			
b	Scholarly research	е		Other					
С	c Preservation for future generations								
4	Provide a description of the organization's co	llections and explain	n how th	ney further t	he organizati	on's exem	npt purpose ir	n Part XIII.	
5	During the year, did the organization solicit or								
	to be sold to raise funds rather than to be ma	intained as part of t	he orga	nization's co	ollection?			Yes	☐ No
Pai	t IV Escrow and Custodial Arrang							rt IV, line 9, or	
	reported an amount on Form 990, Par	t X, line 21.							
1a	Is the organization an agent, trustee, custodia	an or other intermed	diary for	contribution	ns or other as	sets not i	ncluded		
	on Form 990, Part X?							Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a								
								Amount	
С	Beginning balance						1c		
	Additions during the year								
	Distributions during the year								
f	Ending balance								
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for	escrow or c	ustodial acco	ount liabilit	y?	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	kplanatio	on has been	provided on	Part XIII			
Pai	t V Endowment Funds. Complete if	the organization an	swered	"Yes" on Fo	orm 990, Part	t IV, line 10).		
	·	(a) Current year	(b) F	rior year	(c) Two year	rs back (d) Three years	back (e) Four ye	ears back
1a	Beginning of year balance								
	Contributions								
	Net investment earnings, gains, and losses								
	Grants or scholarships								
	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
	End of year balance								
2	Provide the estimated percentage of the curre	ent year end balanc	e (line 1	g, column (a	a)) held as:			•	
а	Board designated or quasi-endowment	•	%		"				
	Permanent endowment	%	_						
С	Term endowment 9								
	The percentages on lines 2a, 2b, and 2c shou	ıld equal 100%.							
За	Are there endowment funds not in the posses	ssion of the organiza	ation tha	at are held a	and administe	ered for the	е		
	organization by:	· ·						Y	es No
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations								
b	If "Yes" on line 3a(ii), are the related organizate	tions listed as requir	red on S	chedule R?				3b	
4	Describe in Part XIII the intended uses of the								
Pai	t VI Land, Buildings, and Equipm								
	Complete if the organization answered	l "Yes" on Form 990), Part I	/, line 11a. S	See Form 990), Part X, I	ne 10.		
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) Acc	cumulated	(d) Book v	/alue
	,	basis (investr			(other)	depi	eciation		
1a	Land								
	Buildings								
	Leasehold improvements			64	3,055.	5	98,331.		,724.
	Equipment			1,01	6,912.	5	60,281.		,631.
	Other								
	. Add lines 1a through 1e. (Column (d) must ed		X. colur	nn (B). line 1	10c.)			501	,355.

Schedule D (Form 990) 2022

Jonicadic D	(1 01111 000) 2022	
Dart VIII	Investments	Othor Socuritio

Part VII Investments - Other Securities.		
Complete if the organization answered "Yes"	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		

Part IX Other Assets.

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

(9)

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Charitable gift annuities	206,241.
(3) Due to affiliate	82,267.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	288,508.

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

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Attach to Form 990.

OMB No. 1545-0047
2022

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization **Employer identification number** Mercatus Center, Inc. 54-1436224 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) (a) Region (b) Number of (c) Number of (d) Activities conducted in the region (f) Total émployees, expenditures offices (by type) (such as, fundraising, prois a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region Central America and Data Collection and the Caribbean 1 Program Services Research Services 18,064. East Asia and the Authorship and Editorial Pacific 2 Services Program Services 1,500. Authorship, Scholarly Europe (Including Peer Review, Editorial Iceland and Services, Participation Greenland) and Discussion 54,414. 2.4 Program Services Middle East and North Africa Editorial services 1 Program Services 200. Authorship, Scholarly Peer Review, Editorial Services, Participation North America and Discussion 8 Program Services 16,950. Russia and Neighboring States -Ukraine Program Services Editorial services 600. Conference engagement services and editorial 4 services 10,900. South America Program Services Authorship, Editorial Services, Conference Engagement and South Asia 19 Discussion Facilitation 292,503. Program Services 3 a Subtotal 0 60 395,131. **b** Total from continuation 4,183,560. sheets to Part I c Totals (add lines 3a 4,578,691. and 3b)

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

See Part V for Column (e) descriptions

Schedule F (Form 990) 2022

Schedule F (Form 990)	Mercatus			54-143622	4 Page 1
Part I Continuation	on of Activitie	es per Regio	n. (Schedule F (Form 990), Part I, line 3	3)	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to	(e) If activity listed in (d) is a program service, describe specific type	(f) Total expenditures for region
		region	recipients located in the region)	of service(s) in region	
				naitii.li	
				Editiorial services, conference engagement	
Sub-Saharan Africa		3	Program Services	services	1,287
					,
Central America and			Grants to recipients		
the Caribbean	O C	0	located in the region		63,000.
East Asia and the			Grants to recipients		
Pacific	0	0	located in the region		54,000.
Europe (Including			Grants to recipients		
Iceland & Greenland)	l o	0	located in the region		1,278,000.
· · ·					
Middle East and			Grants to recipients		
North Africa	, o	0	located in the region		15,000.
			Grants to recipients		
North America	O	0	located in the region		299,956.
Russia and					
Neighboring States -			Grants to recipients		
Ukraine	d	0	located in the region		422,397.
			Grants to recipients		
South Asia	C	0	located in the region		1,723,920.
			Grants to recipients		
Sub-Saharan Africa	0	0	located in the region		326,000.
Totals	.	3			4,183,560.

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
		Central America						
		and the Caribbean						
		-Guatemala	Research Grant	20,000.	Wire/EFT/Check	0.		
		East Asia and the						
		Pacific						
			Research Grant	30,000.	,Wire/EFT/Check	0.		
				,				
		Europe -Austria	Research Grant	100 000	Wire/EFT/Check	0.		
		Larope Haberra	Research Grane	100,000.	, HIIO, EI I, GREGA	3.		
		Europe -Denmark	Research Grant	15 000	.Wire/EFT/Check	0.		
		Larope Benmark	Research Grane	13,000	, witch in the cheek			
		Europe -Ireland	Research Grant	25 000	.Wire/EFT/Check	0.		
		Europe - Treland	Research Grant	25,000.	,wire/EFT/Check	0.		
		Europe						
		-Luxembourg	Research Grant	75,000.	Wire/EFT/Check	0.		
		Europe -United						
		Kingdom	Research Grant	109,000.	Wire/EFT/Check	0.		
		Europe -United						
		Kingdom	Research Grant	100,000.	Wire/EFT/Check	0.		

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

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Scheddle i (Form 990					, <u> </u>			1 age Z
	tion of Grants and Other	Assistance to Organiz	ations or Entities Outside th	e United States.	. (Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organiza	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
						assistance	assistance	appraisal, other)
		Europe -United	Descensh Greent	100 000	Mino/RRM/Obook	0		
		Kingdom	Research Grant	100,000.	Wire/EFT/Check	0.		
		Europe -United						
		Kingdom	Research Grant	100 000	 Wire/EFT/Check	0.		
		ringuom	Research Grane	100,000.	, HIIO, EI I, GIIGGII	•		
		Europe -United						
		_ Kingdom	Research Grant	50,000.	Wire/EFT/Check	0.		
				,				
		Europe -United						
		Kingdom	Research Grant	50,000.	Wire/EFT/Check	0.		
		Europe -United						
		Kingdom	Research Grant	20,000.	Wire/EFT/Check	0.		
		Europe -United						
		Kingdom	Research Grant	10,000.	Wire/EFT/Check	0.		
		Europe -United						
		Europe -United Kingdom	Research Grant	10 000	Wire/EFT/Check	0.		
		KINGUOM	Research Grant	10,000.	WITE/EFT/CHECK	0.		
		North America						
		-Canada	Research Grant	10.000.	 Wire/EFT/Check	0.		
						-		
		North America						
		-Canada	Research Grant	7,500.	Wire/EFT/Check	0.		

Part II Continuation of	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	e United States.	(Schedule F (Form 9	90), Part II, line	1)	_
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
		Russia and						
		Neighboring States – Ukraine	Research Grant	50,000.	Wire/EFT/Check	0.		
		Russia and		,				
		Neighboring						
		States - Ukraine	Research Grant	50,000.	Wire/EFT/Check	0.		
		Russia and						
		Neighboring States – Ukraine	Research Grant	50,000.	Wire/EFT/Check	0.		
		Russia and						
		Neighboring						
		States - Ukraine	Research Grant	50,000.	Wire/EFT/Check	0.		
		Russia and						
		Neighboring States – Ukraine	Research Grant	50,000.	Wire/EFT/Check	0.		
		Russia and						
		Neighboring			. ,,			
		States - Ukraine	Research Grant	20,000.	Wire/EFT/Check	0.		+
		South Asia -						
		Bangladesh	Research Grant	59,000.	Wire/EFT/Check	0.		
		South Asia -				_		
		India	Research Grant	125,000.	Wire/EFT/Check	0.		
		South Asia -						
		India	Research Grant	120,000.	Wire/EFT/Check	0.		

	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		Court Daile						
		South Asia - India	Research Grant	104 000.	Wire/EFT/Check	0.		
				201,000.				
		South Asia -		100 000	(DDM (G) 1			
		India	Research Grant	100,000.	Wire/EFT/Check	0.		
		South Asia -						
		India	Research Grant	100,000.	Wire/EFT/Check	0.		
		South Asia -						
		India	Research Grant	80,000.	Wire/EFT/Check	0.		
		Court Date						
		South Asia - India	Research Grant	65 000.	Wire/EFT/Check	0.		
				,				
		South Asia -		FF 000	(DDM (G) 1			
		India	Research Grant	55,000.	Wire/EFT/Check	0.		
		South Asia -						
		India	Research Grant	50,000.	Wire/EFT/Check	0.		
		South Asia -						
		India	Research Grant	40,000.	Wire/EFT/Check	0.		
		South Asia -						
		India	Research Grant	35 000	Wire/EFT/Check	0.		

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Part II	Continuation o	t Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	. (Schedule F (Form 9			1
1 (a) Name	e of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of	(e) Amount	(f) Manner of	(g) Amount of non-cash	(h) Description of non-cash	(i) Method of valuation (book, FMV,
		and Lin (ii applicable)		grant	or cash grant	cash disbursement	assistance	assistance	appraisal, other)
			South Asia -						
				Research Grant	30 000	Wire/EFT/Check	0.		
						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
			South Asia -						
			India	Research Grant	30 000	 Wire/EFT/Check	0.		
			I	Research Grane	30,000.	WITC/ HI I/ CHCCK			
			Couth Agia						
			South Asia -	D	25 000	Miles - / DDM / Glele	0		
			India	Research Grant	25,000.	Wire/EFT/Check	0.		
			l						
			South Asia -	_			_		
			India	Research Grant	25,000.	Wire/EFT/Check	0.		
			South Asia -						
			India	Research Grant	25,000.	Wire/EFT/Check	0.		
			South Asia -						
			India	Research Grant	25,000.	Wire/EFT/Check	0.		
			South Asia -						
			India	Research Grant	25,000.	Wire/EFT/Check	0.		
			South Asia -						
				Research Grant	20,000.	Wire/EFT/Check	0.		
					,				
			South Asia -						
				Research Grant	20 000.	Wire/EFT/Check	0.		
					,	,,	<u>ر</u>		i

	(1 01111 9 9 0)		ous comcer,						r age z
Part II	Continuation o	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name	e of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			South Asia -						
			India	Research Grant	8,000.	Wire/EFT/Check	0.		
			Sub-Saharan						
				Research Grant	8 000	Wire/EFT/Check	0.		
			Allica benegal	Research Grant	0,000.	WITE/EFT/CHECK	· ·		
			Sub-Saharan						
			Africa - South						
			Africa	Research Grant	16,000.	Wire/EFT/Check	0.		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed. (c) Number of (f) Amount of (g) Description of (d) Amount of (e) Manner of (h) Method of (a) Type of grant or assistance (b) Region valuation recipients cash grant cash disbursement noncash noncash assistance (book, FMV, appraisal, other) assistance Central America and the Caribbean 43,000.Wire/EFT/Check Research grants 0 East Asia and the Research grants Pacific 24,000.Wire/EFT/Check 0 Europe (Including Iceland & Research grants Greenland) 514,000.Wire/EFT/Check 0 Middle East and North Africa 14,000.Wire/EFT/Check 0. Research grants North America 282,456.Wire/EFT/Check Research grants 0. Russia and Neighboring States 152,397.Wire/EFT/Check Research grants 0. South Asia 557,920.Wire/EFT/Check Research grants 0. Sub-Saharan Africa Research grants 24 302,000.Wire/EFT/Check 0

l	Part	IV Foreign Forms
	1	Was the organization a U.S. transferor of property to a foreign corporation

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

Schedule F (Form 990) 2022

Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Part I, Line 2:

Faculty awards are given to those Center faculty members who actively engage in original research. In addition, grants were made to support research at other universities that advance the mission of the center and for promising projects to meaningfully improving society through the Emergent Ventures program. Research projects are expected to result in scholarly journal articles, book manuscripts, monographs, or other quality products.

Part I, line 3:

Foreign expenses are directly tracked and accounted for on the accrual method of accounting used for books.

Part I, Line 3, Column (e):

Region: Europe (Including Iceland and Greenland)

(e) Specific Types of Services in Region: Authorship, Scholarly Peer

Review, Editorial Services, Participation and Discussion Facilitation

Services, Media Production and Visual Arts Services, Educational

Curriculum Development and Course Mapping

Region: North America

(e) Specific Types of Services in Region: Authorship, Scholarly Peer

Review, Editorial Services, Participation and Discussion Facilitation

Services, Product Design and Management Services

Region: South Asia

(e) Specific Types of Services in Region: Authorship, Editorial

54-1436224

SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Employer identification number Name of the organization Mercatus Center, Inc. 54-1436224 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. e X Solicitation of non-government grants a X Mail solicitations X Internet and email solicitations f Solicitation of government grants X Phone solicitations g X Special fundraising events **d** X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X No Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Advanced Advocacy, LLC - 1750 Yes No K Street NW, Suite 1200 Х 1,201,000 80,000 1,121,000. See Part IV 1,201,000. 80,000, 1,121,000. 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

See Part IV for continuations

Schedule G (Form 990) 2022

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events (add col. (a) through col. (c)) (event type) (total number) (event type) Revenue 1 Gross receipts 2 Less: Contributions **3** Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Part III | Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? _____ Yes ____ No **b** If "Yes," explain:

Schedule G (Form 990) 2022

Sch	nedule G (Form 990) 2022 Mercatus Center, Inc. 54-1	436	224	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	□ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?		Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:			
;	a The organization's facility	13a		%
	b An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🔲	Yes	☐ No
	b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ but If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	daning manager compensation ψ			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	☐ No
-	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
_	organization's own exempt activities during the tax year \$			
Pá	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	ırt III, li	nes 9,	9b, 10b,
Sc	chedule G, Part I, Line 2b, List of Ten Highest Paid Fundraiser	îs:		
	.) Name of Fundraiser: Advanced Advocacy, LLC			
<u>\-</u>				
<u>(</u> j	.) Address of Fundraiser:			
<u>17</u>	750 K Street NW, Suite 1200, Washington, DC 20006			
I,	Line 2b, Column ii- Activity			
De	eveloped and facilitated relationships between prospective fund	ling	<u></u>	
pa	artners and Mercatus. Connected existing partners to Mercatus			

SCHEDULE I (Form 990)

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

OMB No. 1545-0047

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

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Mercatus	Center,	Inc.					54-1436224
Part I General Information on Grants a							
 Does the organization maintain records criteria used to award the grants or assi Describe in Part IV the organization's pro 	stance?						tion X Yes No
Part II Grants and Other Assistance to recipient that received more than	_				anization answered "	Yes" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Essential Impact Inc. 255 Eureka St							
San Francisco, CA 94114	93-2593106	501(c)(3)	1,000,000.	0.			Research Grants
Kyiv School of Economics 2403 Avenue X Brooklyn New York, NY 11235	52-2264611	501(c)(3)	1,000,000.	0.			Research and Education Grants
George Mason University 4400 University Drive, MSN 1A3 Fairfax, VA 22030-4444	54-0836354	501(c)(3)	764,235.	0.			Student development/education grant
Ukraine Defense Fund, Inc. 5950 Mayfield Rd Num 1099 Cleveland, OH 44124	88-1334436	501(c)(3)	500,000.	0.			Research Grants
Caribbean Progress Studies Institute, Inc 21262 Prado Circle - Huntington Beach, CA 92648	92-2750682	501(c)(3)	343,000.	0.			Research Grants
Cornell University 1300 York Avenue Box 314 New York, NY 10065	15-0532082		332,113.	0.			Research and Education
2 Enter total number of section 501(c)(3) a 3 Enter total number of other organization	and government o	rganizations listed in th	ne line 1 table			1	47.

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

Schedule I (Form 990) 2022

Page 1

Part II Continuation of Grants and Other	Addictance to Be			Overnments (Con		1	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
George Mason University Foundation							Student
4400 University Drive, MSN 1A3							development/education
Fairfax, VA 22030-4444	54-1603842	501(c)(3)	166,000.	0.			grant
AITWG							
1122 Kenilworth Drive #201							
Towson, MD 21204	27-6601178	501(c)(3)	142,000.	0.			Research Grants
Idaho State University							
921 S 8th Ave							Research and Education
Pocatello, ID 83209	82-6000924	501(c)(3)	124,829.	0.			Grants
,			,				
Aavishkaar USA							
1350 Rosemary Ct							
Hastings, MN 55033	83-1234824	501(c)(3)	100,000.	0.			Research Grants
Dartmouth College							
7 Lebanon Street, Suite 302							Research and Education
Hanover, NH 03755	02-0222111	501(c)(3)	100,000.	0.			Grants
manover, Mr 03733	02 0222111	501(0)(3)	100,000.	••			Station
ReadTrellis, Inc.							
1 Irving Place U16C							
New York, NY 10003	92-2740499		100,000.	0.			Research Grants
Capitol Court Ventures							
507 Capitol Court NE							
Washington, DC 20002	92-0758079		100,000.	0.			Research Grants
washington, be 20002	32 0730073		100,000.	· ·			Research Granes
University of California Berkeley							
1608 Fourth Street, Suite 201							Research and Education
Berkeley, CA 94720-1101	94-6002123	501(c)(3)	83,000.	0.			Grants
Council for Christian Colleges and							
Universities - 321 8th Street NE -	F0 1048100	F01/->/2>	00.000	_			Danasah Ga
Washington DC, DC 20002	52-1247182	bnT(c)(3)	80,000.	0.			Research Grants

Schedule I (Form 990)

Schedule I (Form 990) Mercatus Part II Continuation of Grants and Other	Center, 1		e and Domostic C	iovernments (Sch	edule I (Form 900) Do		4-1436224 Page
Part II Continuation of Grants and Other			s and Domestic G	overnments (Sch	edule i (Form 990), Pa 	Irt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Tabua Wankina Waisanaika							
Johns Hopkins University							Research and Education
3910 Keswick Road, N4327-B Baltimore, MD 21211	52-0595110	501(c)(3)	72,000.	0.			Grants
Baltimore, MD 21211	52-0595110	501(0)(3)	72,000.	· ·			Granes
Rutgers University Foundation 335 George Street New Brunswick, NJ 08901	23-7318742	501(c)(3)	70,000.	0.			Research and Education Grants
University of Kentucky Research							
Foundation - 109 Kinkead Hall -							Research and Education
Lexington, KY 40506-0057	61-6033693	501(c)(3)	68,900.	0.			Grants
Nomos AI, Inc.							
34 Colonial Drive							Research and Education
Riverhead, NY 11901	92-0631342		65,000.	0.			Grants
New York University							
105 East 17th Street, 3rd Floor							Research and Education
New York, NY 10003	13-5562308	501(c)(3)	64,449.	0.			Grants
Airbound							
5617 Kirkwood Place North							
Seattle, WA 98103	88-0637684		61,000.	0.			Research Grants
Neighborly Faith, Inc.							
4113 Pleasant Grove Church Road							
Raleigh, NC 27613	84-2410078	501(c)(3)	60,000.	0.			Research Grants
Internet Activism Inc							
1209 North Orange Street							_
Wilmington, DE 19801	92-0772822	501(c)(3)	60,000.	0.			Research Grants
The Curious Maverick							
1545 Farmer Place							

Research Grants

Santa Clara, CA 95051

50,000.

0.

92-1730034

(g) Description of

non-cash assistance

(b) EIN

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(c) IRC section

if applicable

(a) Name and address of

organization or government

436	224	Page 1
(h) P	urpose of gran r assistance	t
arch	Grants	
arch	Grants	

					appraisal, strict)		
Seren Labs LLC							
1403 Concordia Ave							
Austin, TX 78722	64-4289044		50,000.	0.			Research Grants
The day of the state of the sta							
VMind Technologies, Inc							
5152 Falling Creek Lane	25 262226		50.000				L
Birmingham, AL 35235	35-2698226		50,000.	0.			Research Grants
Gelles Inc							
1826 Bara Rd.							
Glendale, CA 91208	88-3058943		50,000.	0.			Research Grants
Giendale, CA 91200	00-3030343		30,000.	0.			Research Grants
Speculative Technologies/ Parpa							
Inc 223 Birch Ave - Princeton,							
NJ 08542	87-2825132	501(c)(3)	50,000.	0.			Research Grants
	07 2023132	301(0)(3)	30,000.	•			negearen eraneg
New Kite Data Labs Inc.							
700 Bolinwood Dr #42E							
Chapel Hill, NC 27514	88-0719162	501(c)(3)	50,000.	0.			Research Grants
<u></u>	00 0713101		33,333.	-			102042011 0241102
The Miami Native Inc							
524 Hampton Lane							
Key Biscayne, FL 33149	38-4243504		50,000.	0.			Research Grants
			, , , , , ,				
Rhodus, Inc.							
447 Broadway, 2nd Floor Suite #197							
New York, NY 10013	30-1314078		50,000.	0.			Research Grants
			,				
ComplyAI							
759 S Stuart Ave							
Elmhurst, IL 60126	92-3520651		50,000.	0.			Research Grants
Duke University							
PO Box 104132							Research and Education
Durham, NC 27708	56-0532129	501(c)(3)	48,000.	0.			Grants
	•	•			•	•	Schedule I (Form 99
							,
232241			48				

(d) Amount of

cash grant

(e) Amount of

noncash

assistance

(f) Method of

valuation

(book, FMV,

appraisal, other)

Schedule I (Form 990) Mercatus	Center, 1	inc.				5	4-1436224 Page 1
Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Human Flourishing Program, Harvard University - 1033 Massachusetts Ave. 3rd Floor - Cambridge, MA 02138	04-2103580	501(c)(3)	40,880.	0.			Research and Education Grants
Art of the Rural 960 West King Street Winona, MN 55987	46-3974768	501(c)(3)	40,000.	0.			Research Grants
Radian Placematters Inc. 3264 Larimer Street Unit D Denver, CO 80205	46-4277283	501(c)(3)	39,757.	0.			Research Grants
UNC-Chapel Hill 104 Airport Drive, Suite 2200 Campus Box 1350 - Chapel Hill, NC 27599-1350	56-6001393	501(c)(3)	38,500.	0.		1	Research and Education Grants
Braver Angels 733 Third Avenue, 16th Floor New York, NY 10017	13-3400377	501(c)(3)	35,000.	0.			Research Grants
Center for Building in North America - 629 Grand St., Apt. 3B - Brooklyn, NY 11211	88-3531896	501(c)(3)	32,000.	0.			Research Grants
University Of North Carolina At Charlotte - 9201 University City Boulevard - Charlotte, NC 28223	56-0791228	501(c)(3)	30,000.	0.		1	Research and Education Grants
vibecamp LLC 222 Fox Run Exton, PA 19341	87-3841151		30,000.	0.			Research Grants
Beacon Center of Tennessee							

Research Grants

1200 Clinton Street #205 Nashville, TN 37203

25,000.

0.

20-1808567 501(c)(3)

Schedule I (Form 990) Mercatus Part II Continuation of Grants and Other			ns and Domestic G	iovernments (Sch	edule I (Form 990), Pa		4-1436224 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
500 Startups Incubator, LLC 3478 Buskirk Ave, Suite 100 Pleasant Hill, CA 94523	27-3177881		25,000.	0.			Research Grants
Nucleate Bio 88 Gordon St. #401 Brighton, MA 02135	86-3225994	501(c)(3)	25,000.	0.			Research Grants
10 Academy 1450 El Camino Real Suite 208 Santa Clara, CA 95050	86-3368596	501(c)(3)	25,000.	0.			Research Grants
Catholic University of America 620 Michigan Ave NE Washington, DC 20064	53-0196583	501(c)(3)	25,000.	0.			Research and Education Grants
Talent Market 1633 Connecticut Ave NW STE 300 Washington, DC 20009	52-1928321	501(c)(3)	25,000.	0.			Research Grants
Sentience Institute 165 Broadway, Fl 23rd New York, NY 10006	82-2537926	501(c)(3)	25,000.	0.			Research Grants
HousingForward Virginia 203 North Robinson Street Richmond, VA 23220	20-0631947	501(c)(3)	25,000.	0.			Research Grants
International Center for Law and Economics - 1104 NW 15th Ave. Ste. 300 - Portland, OR 97209	52-2363626	501(c)(3)	25,000.	0.			Research Grants
Federation of American Scientists 1112 16th Street NW, Suite 600							

Research Grants

Washington, DC 20036

20,000.

23-7185827 501(c)(3)

Part II Continuation of Grants and Other	Assistance to Do	mestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Western Carolina University							
460 HFR Administration Building							Research and Education
Cullowhee, NC 28723	56-6001440	501(c)(3)	20,000.	0.			Grants
			, -	-			
University of Denver							
2199 S. University Boulevard							Research and Education
Denver, CO 80210	84-0404231	501(c)(3)	20,000.	0.			Grants
Plymouth Street, Inc.							
1841 Market St				_			_
San Francisco, CA 94103	88-4107959		20,000.	0.			Research Grants
Mediacom Inc							
4512 Windom Pl NW							
Washington, DC 20016	52-1741962		20,000.	0.			Research Grants
washington, be 20010	32 1741302		20,000.	••			Research Granes
American Governance Foundation,							
Inc 548 Market Street, Suite							
43905 - San Francisco, CA 94104	82-3895681	501(c)(3)	20,000.	0.			Research Grants
The Florida State University			,				
Foundation, Inc 325 West							
College Avenue - Tallahassee, FL							Research and Education
32301-1403	59-6152180	501(c)(3)	18,000.	0.			Grants
Wabash College							
301 W. Wabash Avenue							Research and Education
Crawfordsville, IN 47933	35-0868202	501(c)(3)	17,500.	0.			Grants
University of Illinois Boundary							
University of Illinois Foundation							Research and Education
1305 West Green Street	37-6006007	501/a)/3)	16 467	0.			
Urbana, IL 61801	37-000007	501(c)(3)	16,467.	٠.			Grants
GLC Empowerment Center							
7625 S. Evans Ave.							
Chicago, IL 60619	84-4471887	501(c)(3)	15,000.	0.			Research Grants

Schedule I (Form 990)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Canary Academy Online Inc.							
PO Box 4427							
Midlothian, VA 23112	86-2197578	501(c)(3)	15,000.	0.			Research Grants
Emittance Inc.							
806 Lyon St.							
San Francisco, CA 94115	92-1994150		15,000.	0.			Research Grants
Rochester Institute of Technology							
7 Lomb Memorial Drive							Research and Education
Rochester, NY 14623-5603	16-0743140	501(c)(3)	11,111.	0.			Grants
Vaca Canton for the Chudu of							
Knee Center for the Study of Occupational Regulation - PO Box							
6201 - Morgantown, WV 26506	46-4827656	501(a)(4)	10,000.	0.			Research Grants
ozor - Morgantown, WV 20500	40-4027030	501(0)(4)	10,000.	0.			Research Glancs
Biotein Inc							
7 Wildon Road							
Wellesley, MA 02482	87-1775509		10,000.	0.			Research Grants
Pink Inference, Co.							
8424 Lincoln Dr							
Huntington Woods, MI 48070	93-2233150		10,000.	0.			Research Grants
Danagoa Worldwido Moghnologica							
Panacea Worldwide Technologies, Inc - 58 Plympton Street, Unit 323							
- Cambridge, MA 02138	86-2098257		10,000.	0.			Research Grants
	30 2030237		10,000.	<u> </u>			
FormToFile, Inc dba TrovBase							
, 1502 Bittersweet Drive							
Saint Anne, IL 60964	61-2005932		7,000.	0.			Research Grants
			-				

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
tudent development/education grants	2	1,772.	0.	N/A	N/A
esearch Grants	79	1,476,472.	0.	N/A	N/A

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

Part I, Line 2:

Faculty awards are given to those Center faculty members who actively
engage in original research. In addition, grants were made to support
research at other universities that advance the mission of the center and
for promising projects to meaningfully improving society through the
Emergent Ventures program. Research projects are expected to result in
scholarly journal articles, book manuscripts, monographs, or other quality
products.

Part IV Supplemental Information
Schedule I, Part I, Line 1(h):
Grants were given to the George Mason University for the following
purposes: to provide general support for the mission and activities of
the George Mason University Foundation; to provide support for research
by faculty members in economics; to support student tuition in the
Department of Economics; to support student stipends in the Department
of Economics; and for summer support and course buyouts for faculty
members in economics.

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

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

Mercatus Center, Inc.

 $Employer\ identification\ number\\ 54-1436224$

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year did any parago listed on Form 000 Part VIII. Section A. line 1s, with respect to the filing			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
9	Receive a severance payment or change-of-control payment?	4a		х
h	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
C	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
Ĭ	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			37
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			37
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2022

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) Daniel Rothschild	(i)	242,950.	260,000.	0.	0.	32,694.	535,644.	0.	
Executive Director	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) Daniel Butler	(i)	204,365.	130,000.	0.	0.	16,498.	350,863.	0.	
Senior Director of Development	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) Veronique De Rugy	(i)	216,734.	85,000.	0.	0.	20,790.	322,524.	0.	
Senior Research Fellow	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) Eileen Norcross	(i)	205,287.	65,000.	0.	0.	27,598.	297,885.	0.	
VP of Policy Research	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) Jennifer Zambone	(i)	190,850.	60,000.	0.	0.	10,827.	261,677.	0.	
Secretary & COO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) Patrick McLaughlin	(i)	198,350.	35,000.	0.	0.	10,735.	244,085.	0.	
Director of Policy Analytics	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) Alden Abbott	(i)	215,882.	15,000.	0.	0.	735.	231,617.	0.	
Senior Research Fellow	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) Tyler Cowen	(i)	225,000.	0.	0.	0.	0.	225,000.	0.	
Chairman	(ii)	0.	0.	0.	0.	0.	0.	0.	
(9) Virgil Henry Storr	(i)	77,500.	141,284.	0.	0.	14.	218,798.	0.	
Director/ VP Academic & Student Prog	(ii)	0.	0.	0.	0.	0.	0.	0.	
(10) Gary Leff	(i)	137,000.	50,000.	0.	0.	20,932.	207,932.	0.	
Treasurer & CFO	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

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

SCHEDULE L

Department of the Treasury

Internal Revenue Service

(Form 990)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open To Public Inspection

		Iercatus	Center,	Inc	٠.							rident		on nu	ımber
Part	_		ctions (section 5		•							• •			
	Complete if the o		nswered "Yes" on				e 25a or 25t	o, or	Form 990-EZ, P	art V,	line 40	Ob.	1, 0		
1 (a) Name of disqualified person		person (b	Relationship bet person and o			lified	(0	c) De	escription of tran	sactio	on		· · ·		cted?
			person and o	- garnz									Y	es	No
													+	_	
													+	\dashv	
													+	\dashv	
	ter the amount of tax i	-	•	•		•	•	•	•						
3 En	ter the amount of tax,	if any, on line	2, above, reimburs	sea by	the or	ganizatio	n				\$				
Part	II Loans to and	d/or From I	nterested Per	sons											
			nswered "Yes" on			, Part V,	line 38a or I	Form	n 990, Part IV, lir	ne 26;	or if th	ne orga	ınizati	on	
	· ·	-	90, Part X, line 5,						, ,						
	(a) Name of	(b) Relationsh			an to or		Original	(f	Balance due) In	(h) App by boa	oroved ard or	(i) V	/ritten
in	iterested person	with organization	on of loan		ization?	princip	al amount			defa	ault?	cómm	ittee?	agree	ment?
				То	From					Yes	No	Yes	No	Yes	No
											-				-
											+				1
											<u> </u>				_
T-4-1							Φ.								
Total Part	III Grants or As	sistance B	enefiting Inte	reste	d Pe	rsons	\$								
			nswered "Yes" on				e 27.								
(a	a) Name of interested p		(b) Relationship				Amount of		(d) Type	of		(e)	Purp	ose o	f
			interested pers	son an		as	sistance		assistan	се		6	assista	ance	
			the organiza	ation											
											+				
											\dashv				
											\dashv				
						<u> </u>									

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

Schedule L (Form 990) 2022

Part IV Business Transactions Involv	ring Interested Persons.				
Complete if the organization answered	I "Yes" on Form 990, Part IV, line 28a, 2	8b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	òrganiz	aring of zation's nues?
Nona Storr	See Part V	20,000.	See Part V	res	No X
Dowt VI Complemental Information					
Part V Supplemental Information. Provide additional information for resp	onses to questions on Schedule L (see	instructions).			
Sch L, Part IV, Business T	ransactions Involvi	ng Interest	ed Persons:		
(a) Name of Person: Nona S	Storr				
(b) Relationship Between 1	Interested Person an	d Organizat	ion: Family	7	
member of director					
(d) Description of Transac	ction: Received hono	rarium for	participati	.ng	
			<u> </u>		
in the Hayek Program Hurri	icane Dorian recover	y project			

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Mercatus Center, Inc.

Employer identification number 54-1436224

Pai	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu		_	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	10	181,209.	Fair market	va	1ue	
10	Securities - Closely held stock			,				
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (Bitcoin)	X	1	0.	FMV (less t	han	\$1)
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organiz	ation during	g the tax year for o	contributions				
	for which the organization completed Form 828	3, Part V, D	Oonee Acknowledg	gement 29				
							Yes	No
30a	During the year, did the organization receive by	contribution	on any property rep	ported in Part I, lines 1 throu	gh 28, that it			
	must hold for at least 3 years from the date of t	he initial co	ntribution, and wh	ich isn't required to be used	for			
	exempt purposes for the entire holding period?					30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	olicy that re	equires the review	of any nonstandard contribu	itions?	31		Х
32a	Does the organization hire or use third parties of	or related or	ganizations to soli	cit, process, or sell noncash				_
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of propert	y for which column (a) is che	cked,			
	describe in Part II.							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

Schedule M	l (Form 990) 2022	Mercatus	Center,	Inc.	54-1436224	Page 2
Part II	Supplemental	I Information. t I, column (b), the	Provide the info	rmation required by Part I, lines 30b,	32b, and 33, and whether the organiza ed, or a combination of both. Also com	ation

SCHEDULE O (Form 990)

Department of the Treasury

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 Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public

Open to Public Inspection

Internal Revenue Service

Name of the organization

Mercatus Center, Inc.

 $\begin{array}{c} \text{Employer identification number} \\ 54-1436224 \end{array}$

Form 990, Part III, Line 4d, Other Program Services:

Communications - Improves the effectiveness of Mercatus outreach
efforts, raises its public profile, and promotes its research and ideas
to media and opinion shapers.

Expenses \$ 3,578,837. including grants of \$ 6,250. Revenue \$ 2,030.

Outreach - Brings education in economic ideas to key decision-makers in the public policy process.

Expenses \$ 1,361,973. including grants of \$ 6,250. Revenue \$ 0.

Public Affairs - Seeks to inform alumni, faculty, and supporters about
the efforts of the Center and build communication that develops a
network of individuals interested in liberty.

Expenses \$ 1,246,803. including grants of \$ 6,250. Revenue \$ 0.

Form 990, Part VI, Section B, line 11b:

A draft of the Form 990 is prepared by the independent accountants and provided to the Chairman of the Board for review prior to filing.

Form 990, Part VI, Section B, Line 12c:

Conflicts and potential conflicts of interest are described in the Center's Employee Manual, which is distributed to all employees. Disclosure is required contemporaneously with any potential conflicts and employees are regularly reminded of the obligation.

Form 990, Part VI, Section B, Line 15:

Name of the organization Mercatus Center, Inc.	Employer identification number 54-1436224
Officer compensation is set annually by a vote of the Exe	cutive Committee
of the Board of Directors. Decisions are documented by the	e Executive
Committee and provided to the organization. The committee	e considers
employee performance, their knowledge of non-profit pract	ices, and
comparability data.	
Form 990, Part VI, Line 17, List of States receiving copy	of Form 990:
AL, AR, CA, FL, HI, IL, KS, KY, ME, MD, MA, MI, MN, NJ, NM, NY, OR, RI, SC,	TN, UT, VA, WV, MS, NH
Form 990 Part VI Soction C. Line 19.	
Form 990, Part VI, Section C, Line 19:	
The Organization's makes its financial statements and gov	
available upon request to those deemed to have a bona fid	le business purpose
which advances the exempt purpose of the organization.	
Form 990, Part IX, Line 11g, Other Fees:	
General Contract Services:	
Program service expenses	1,272,972.
Management and general expenses	57,268.
Fundraising expenses	279,303.
Total expenses	1,609,543.
Honoraria, Fellowships, Sponsorships & Awards:	
Program service expenses	4,349,712.
Management and general expenses	0.
Fundraising expenses	0.
Total expenses	4,349,712.

Photography, Production, & Film:

Name of the organization Mercatus Center, Inc.	Employer identification number 54-1436224
Program service expenses	125,652.
Management and general expenses	0.
Fundraising expenses	0.
Total expenses	125,652.
Temporary Help:	
Program service expenses	17,030.
Management and general expenses	492.
Fundraising expenses	734.
Total expenses	18,256.
Peer Reviews:	
Program service expenses	9,900.
Management and general expenses	0.
Fundraising expenses	0.
Total expenses	9,900.
Total Other Fees on Form 990, Part IX, line 11g, Col A	6,113,063.
Form 990, Part XII, Line 2c:	
The Center's Board of Directors assumes responsibility fo	or oversight of
the audit, including selection of independent accountants	. This process
is consistent with prior years.	

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or print 54-1436224 Mercatus Center, Inc. File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 3434 Washington Blvd, 4th Floor return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. Arlington, VA 22201-4508 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Code Is For Is For Code Form 990 or Form 990-EZ 01 Form 1041-A 80 Form 4720 (other than individual) Form 4720 (individual) 03 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) The Center - 3434 Washington Blvd, 4th Floor - The books are in the care of ► Arlington, VA 22201-4508 Telephone No. ► 703-993-4930 Fax No. ▶ (703) 993-4935 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this __l. If it is for part of the group, check this box ▶ ____ and attach a list with the names and TINs of all members the extension is for. July 15, 2024 I request an automatic 6-month extension of time until , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ▶ ☐ calendar year ► X tax year beginning SEP 1, 2022 , and ending AUG 31, 2023 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return L Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За **b** If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

using EFTPS (Electronic Federal Tax Payment System). See instructions.

Form **8868** (Rev. 1-2022)

instructions.