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** PUBLIC DISCLOSURE COPY **

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.

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



Department of the Treasury Internal Revenue Service

A	For th	e 2018 calendar year, or tax year beginning and ending		
Ba	Check if applicab	e: C Name of organization	D Employer identifi	cation number
	Addre	R STREET INSTITUTE		
	Name		26-3	477125
	Initial	Number and street (or P.O. box if mail is not delivered to street address) Room/s	uite E Telephone numbe	r
	Final			525-5717
	termir ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	10,586,090.
	Amen return	ded WASHINGTON, DC 20005	H(a) Is this a group re	eturn
	Applie tion	F Name and address of principal officer: ELIAS ROTHENBERG-LEHRE	R for subordinates	
	pendi	^{ng} SAME AS C ABOVE	H(b) Are all subordinates in	ncluded? Yes No
1 1	Tax-ex		527 If "No," attach a	list. (see instructions)
		te: VWW.RSTREET.ORG	H(c) Group exemption	
			'ear of formation: 2008	State of legal domicile: DC
Pa	art I	Summary	1	
e	1	Briefly describe the organization's mission or most significant activities: SEE PART	III, LINE I.	
Governance				
/err		Check this box Lift the organization discontinued its operations or disposed of r		ssets.
ĝ		Number of voting members of the governing body (Part VI, line 1a)		9
Š		Number of independent voting members of the governing body (Part VI, line 1b)		76
Activities &		Total number of individuals employed in calendar year 2018 (Part V, line 2a)		9
ž		Total number of volunteers (estimate if necessary)		0.
Ă		Net unrelated business taxable income from Form 990-T, line 38		14,290.
			Prior Year	Current Year
•	8	Contributions and grants (Part VIII, line 1h)	8,262,264.	10,548,402.
nu		Program service revenue (Part VIII, line 2g)	0.	0.
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,231.	657.
£		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	125,525.	37,031.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,389,020.	10,586,090.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	371,543.	173,000.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
es		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,320,403.	6,683,662.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
ă		Total fundraising expenses (Part IX, column (D), line 25) 164,103.		0 485 810
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,161,357.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,853,303.	9,332,381.
<u> </u>	19	Revenue less expenses. Subtract line 18 from line 12	1,535,717.	1,253,709.
Net Assets or Fund Balances			Beginning of Current Year 5,324,052.	End of Year
Sse Bala	20	Total assets (Part X, line 16)	741,950.	6,658,153. 822,342.
let A	21	Total liabilities (Part X, line 26)	4,582,102.	5,835,811.
	22 art II	Net assets or fund balances. Subtract line 21 from line 20	4,304,104.	,000,011.
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements and to the hest of m	v knowledge and belief, it is
onu	or point	ando or porjary, r doolaro maer navo ovarintoa and rotarn, including accompanying schedules and sa		y moviougo and bollor, it is

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer ELIAS ROTHENBERG-LEHRER, PRESIDENT Type or print name and title	Date
Paid	Print/Type preparer's name RICHARD J. LOCASTRO, CPA	
Preparer	Firm's name 🕨 GELMAN, ROSENBERG & FREEDMAN	Firm's EIN 52-1392008
Use Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N	
	BETHESDA, MD 20814-2930	Phone no. (301) 951-9090
May the II	AS discuss this return with the preparer shown above? (see instructions)	X Yes No
832001 12-3	1-18 LHA For Paperwork Reduction Act Notice, see the separate instructions.	Form 990 (2018)
S	EE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT C	ONTINUATION

orm	990 (2018) R STREET INSTITUTE	26-3477125	Page
Pai	t III Statement of Program Service Accomplishments		_
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	X
1	Briefly describe the organization's mission:		
	THE R STREET INSTITUTE IS A NONPROFIT, NONPARTISAN, E RESEARCH ORGANIZATION ("THINK TANK"). OUR MISSION IS		
	POLICY RESEARCH AND OUTREACH TO PROMOTE FREE MARKETS		
	EFFECTIVE GOVERNMENT. (CONTINUED ON SCHEDULE O)	AND DIMITED,	
2	Did the organization undertake any significant program services during the year which were not listed on t		
-	prior Form 990 or 990-EZ?	XYes	s 🗆 N
	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 serv	ices?	s XI
	If "Yes," describe these changes on Schedule O.		
1	Describe the organization's program service accomplishments for each of its three largest program service	es, as measured by expense	es.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	o others, the total expenses	, and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 1,566,339. including grants of \$ 7,500.)	(Revenue \$	
	CRIMINAL JUSTICE AND CIVIL LIBERTIES:		
	THE CRIMINAL JUSTICE POLICY PROGRAM PRODUCES RESEARCH		RY OI
	PUBLIC POLICY RELATED TO ALL STAGES OF THE JUSTICE SY		
	INCLUDES POLICING, PRE-TRIAL POLICY, SENTENCING, INCA		
	JUVENILE JUSTICE AND REENTRY. WE WORK ACROSS THE IDEC		
	TO PROVIDE POLICYMAKERS WITH REFORMS THAT PRIORITIZE		, DU
	PROCESS, INDIVIDUAL LIBERTY AND FISCAL RESPONSIBILITY	•	
	WE ENGAGE WITH CENTER-RIGHT STAKEHOLDERS AT THE FEDER		
	LEVELS TO SHOW HOW JUSTICE REFORMS ARE CONSISTENT WIT		E
	PRINCIPLES AND TO IMPROVE THE EFFICACY OF THE JUSTICE		<u> </u>
	EFFORTS INCLUDE A PUSH TO IMPROVE THE ECONOMIC PROSPE		
1b	1 531 769	(Revenue \$	
	GOVERNANCE :		
	THE GOVERNANCE PROJECT AIMS TO ASSESS AND IMPROVE THE	STATE OF	
	AMERICA'S NATIONAL SYSTEM OF SELF-GOVERNANCE, WITH PA	ARTICULAR ATTE	NTIO
	TO CONGRESS. IT PRODUCES RESEARCH PAPERS AND POPULAR		
	NATIONAL LEGISLATURE AND OUR SEPARATION-OF-POWERS SYS		
	ALSO CO-DIRECTS THE LEGISLATIVE BRANCH CAPACITY WORKI		NEW
	AMERICA AND MEETS WITH CONGRESSIONAL STAFF AND MEMBER		
	CONGRESSIONAL AND GENERAL GOVERNMENT REFORM ISSUES. 7		
	PROPOSES WAYS TO STRENGTHEN CONGRESS AND EMPOWER LEGITHEIR POWER AS THE FIRST BRANCH OF GOVERNMENT.	SLATORS TO TAI	KE U.
	THEIR POWER AS THE FIRST BRANCH OF GOVERNMENT.		
4c	(Code:)(Expenses \$ 1,283,242. including grants of \$ 33,500.)	(Povopuo ^{\$}	
	TECHNOLOGY AND INNOVATION:		
	THE TECHNOLOGY AND INNOVATION POLICY PROGRAM CONDUCTS	RESEARCH AND	
	ADVOCACY AROUND THE PUBLIC POLICY FRAMEWORKS THAT GOV	/ERN BOTH	
	ESTABLISHED AND EMERGING TECHNOLOGIES. WE EMBRACE "PE	ERMISSION LESS	
	INNOVATION, " WHICH SEEKS TO LIMIT RESTRICTIONS ON INN	JOVATION UNDER	MOS
	CIRCUMSTANCES.		
	WE ALSO WORK ON TELECOMMUNICATIONS POLICY, EXAMINING		
	COMPETITION BETWEEN DIGITAL ECOSYSTEMS, HOW TO FACILI		
	DEPLOYMENT AND HOW TO FURTHER THE ALLOCATION OF SPECT		
	RESULT, WE WERE HEAVILY CITED IN THE FEDERAL COMMUNIC	CATION COMMISS	ION'
	RESTORING INTERNET FREEDOM ORDER IN 2017.		
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ 4,154,210 · including grants of \$ 132,000 ·) (Revenue \$)	
4e	Total program service expenses ► 8,535,553.		000 ++
			990 (20
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 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		X
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	х	
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 Revenue Procedure 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?			
	If "Yes," complete Schedule D, Part IV			X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or 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.			
2	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a	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	114		<u> </u>
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			x
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
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		X
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?			37
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
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	140		
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	10		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
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		X
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		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
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	
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 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		x
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	x	
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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
9	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		X
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		x
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	24		x
50	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	33a		
D.	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
86	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37		- 23
	Note. All Form 990 filers are required to complete Schedule O	38	x	
Par	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		<u> </u>	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 38			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
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Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)								
			Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return 2a 76		v						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х						
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	0-	х						
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b	X						
	If "Yes," has it filed a Form 990-T for this year? <i>If</i> " <i>No</i> " <i>to line 3b, provide an explanation in Schedule O</i>	30	- 23						
Ha	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x					
b	If "Yes," enter the name of the foreign country:	τu							
~	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
с									
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit								
	any contributions that were not tax deductible as charitable contributions?	6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		 					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			x					
	to file Form 8282?								
	d If "Yes," indicate the number of Forms 8282 filed during the year 7d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7								
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?								
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f 7g		X					
-	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?								
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h							
Ŭ	sponsoring organization have excess business holdings at any time during the year? N/A	8							
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b							
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12 10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11	Section 501(c)(12) organizations. Enter:								
	Gross income from members or shareholders 11a								
b	Gross income from other sources (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	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. Is the organization licensed to issue qualified health plans in more than one state?	13a							
а	Note. See the instructions for additional information the organization must report on Schedule O.	134							
h	Enter the amount of reserves the organization is required to maintain by the states in which the								
D	organization is licensed to issue qualified health plans 13b								
с	Enter the amount of reserves on hand 13c								
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X					
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b		<u> </u>					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		Х					
	If "Yes," see instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х					
	If "Yes," complete Form 4720, Schedule O.								
		-	000	(0010)					

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Form **990** (2018)

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Form 990 (2018)

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

Х

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 in Schedule O. See instructions.

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		9						
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.									
b	Enter the number of voting members included in line 1a, above, who are independent	1b		9						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship									
	officer, director, trustee, or key employee?			2		X				
3	Did the organization delegate control over management duties customarily performed by or under the					x				
	of officers, directors, or trustees, or key employees to a management company or other person?									
4										
5	Did the organization become aware during the year of a significant diversion of the organization's as			5		X X				
6	Did the organization have members or stockholders?			6		<u> </u>				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a			_		x				
la la	more members of the governing body?			7a						
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, s			76		x				
8	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the ye			7b		- 21				
			•	8a	х					
a h	The governing body?			8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea			00						
5	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		x				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R									
	(/		Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х				
	If "Yes," did the organization have written policies and procedures governing the activities of such c									
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	dy befo	re filing the form?	11a	Х					
b	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	e to con	flicts?	12b	X					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y									
	in Schedule O how this was done			12c	X					
13	Did the organization have a written whistleblower policy?			13	X					
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 approv		ndependent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				v					
	The organization's CEO, Executive Director, or top management official			15a	X	x				
b	Other officers or key employees of the organization			15b						
10-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).									
168	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange			16a		х				
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua			10a						
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga		-							
	exempt status with respect to such arrangements?			16b						
Sec	tion C. Disclosure			100						
17	List the states with which a copy of this Form 990 is required to be filed AR , NC , SC , AL , C	CA,N	Y,VA,PA,G	A,FL						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A if applicable), 990, and					able				
	for public inspection. Indicate how you made these available. Check all that apply.									
	X Own website X Another's website X Upon request Other (explain	n in Scl	nedule O)							
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	onflict o	of interest policy, a	nd finan	cial					
	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 bo	ooks ar	nd records 🕨							
	JOI WASHINGTON - 202-525-5717									
	1212 NEW YORK AVENUE NW SUITE 900, WASHINGTON, DC	20	005							
832006	12-31-18			Form	1 990	(2018)				
	б									

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Part VII	Compensation of Officers,	Directors, 1	Frustees, I	Key Employees,	Highest (Compensated
	Employees, and Independe	ent Contract	tors			

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

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)	(C)		(D)	(E)	(F)				
Name and Title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unle	ss pe d a d	rson	is bot	h an	compensation	compensation	amount of
	week					l aus		from	from related	other
	(list any hours for	Individual trustee or director						the organization	organizations (W-2/1099-MISC)	compensation from the
	related	e or d	stee			Isated		(W-2/1099-MISC)	(1099-10130)	organization
	organizations	truste	al trus		yee	mper		()		and related
	below	idual	In stitutional trustee	er	Key employee	Highest compensated employee	ler			organizations
	line)	Indiv	Insti	Officer	Key (High emp	Former			
(1) MARNI SOUPCOFF	0.50									
BOARD CHAIR		Х		Х				0.	0.	0.
(2) TEVI TROY	0.50									
BOARD MEMBER		Х						0.	0.	0.
(3) MICHAEL COHEN	0.50									
BOARD MEMBER		Х						0.	0.	0.
(4) ROBERT WATKINS	0.50									
BOARD MEMBER		Х						0.	0.	0.
(5) ROBERT INGLIS	0.50							_	_	_
BOARD MEMBER		Х						0.	0.	0.
(6) RYAN ALEXAMDER	0.50							_	_	_
BOARD MEMBER		х						0.	0.	0.
(7) PABLO CARRILLO	0.50									_
BOARD MEMBER		х						0.	0.	0.
(8) ELIZABETH FRAZEE	0.50									
BOARD MEMBER		х						0.	0.	0.
(9) RYAN CALO	0.50									
BOARD MEMBER		X						0.	0.	0.
(10) ELI LEHRER	40.00							0.4.4 0.0.5		
PRESIDENT & BOARD VICE CHAIR				х				241,835.	0.	21,940.
(11) ERICA SCHODER	40.00							404 055		4 9 9 7 9
VICE PRESIDENT & CORPORATE TREASURER				Х				184,255.	0.	13,979.
(12) KEVIN KOSAR	40.00									c
VICE PRESIDENT OF POLICY	40.00					X		185,472.	0.	6,894.
(13) DAVID CAMERON SMITH	40.00							100 000	0	00 000
VP OF IMPL. & GEN. COUN. (END 10/18)	10.00					X		180,660.	0.	22,002.
(14) IAN ADAMS	40.00							154 065	0	0 0 0 0
ASSOC. VICE PRES., STATE AFFAIRS	10.00					X		154,265.	0.	9,962.
(15) CHARLES DUAN	40.00					37		141 050	0	22 261
DIRECTOR TECHNOLOGY & INN. POLICY	40.00					X		141,058.	0.	22,361.
(16) JAMES WALLNER	40.00	-						144 000	^	10 624
SENIOR FELLOW, GOVERNANCE		<u> </u>	<u> </u>			X	<u> </u>	144,898.	0.	19,634.
		-								

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Form 990 (2018)

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	()	INSTITU	JTI	Ξ						26-3	477	125	Pa	ige 8
Par	t VII Section A. Officers, Directors, Trus		ploy	ees			ghe	st C		es (continued)				
	(A) Name and title	(B) Average hours per week	box	not c , unle	ss pe	ition ^{more} rson	than is bot pr/trus	h an	(D) Reportable compensation from	(E) Reportable compensatic from related	on	Est am	(F) imate ount o 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)	organization (W-2/1099-MIS		orga and	oensat om the nizati relate nizatio	e on ed
1b	Sub-total	l	L	L		L	L		1,232,443.		0.	116	5,7	
d	Total from continuation sheets to Part VI Total (add lines 1b and 1c)								0. 1,232,443.		0.	116	5,7	0. 72.
2	Total number of individuals (including but n compensation from the organization	ot limited to th	iose	liste	ed al	bove	e) wł	no re	eceived more than \$100),000 of reportab	le			13
3	Did the organization list any former officer,				-	•	•		•				Yes	No X
4	line 1a? <i>If "Yes," complete Schedule J for s</i> For any individual listed on line 1a, is the su and related organizations greater than \$150	im of reportab	le co	omp	ensa	atior	n and	d otl		the organization		3	x	
5	Did any person listed on line 1a receive or a rendered to the organization? <i>If "Yes," com</i>	accrue comper	nsat	ion f	rom	any	/ unr	elat	ted organization or indiv	idual for services	;	5		X
Sec 1	tion B. Independent Contractors Complete this table for your five highest co	mpensated inc	depe	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of con	npens	ation fr	om	
	the organization. Report compensation for (A)	the calendar y	ear	endi	ng v	vith	or w	ithir	n the organization's tax (B)	year.		(C))	
JAI	Name and business	address						-	Description of s		C	ompen		1
124	O SUNNYBROOK DRIVE, NA	APERVILI	ΞE,	,]	[L	6(054	10	SUPPORT			109),44	<u>40.</u>
2	Total number of independent contractors (i \$100,000 of compensation from the organiz	•	ot li	mite	d to		se lis 1	stec	d above) who received n	nore than			000	
												Form 9	9U (2	2018)

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Form 990 (2018) R STREE
Part VIII Statement of Revenue

R STREET INSTITUTE

		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts ts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues						
۲ و س		Fundraising events						
ifts ar A		Related organizations						
, Gilisi		Government grants (contribut						
Sil		All other contributions, gifts, gran						
her	•	similar amounts not included abo		10,548,402.				
ġĘ	~			10,010,102.				
n or n	-	Noncash contributions included in lines	-		10,548,402.			
<u> </u>		Total. Add lines 1a-1f		Business Code	10,540,402.			
0	0.0			Busiliess Code				
, ice	2 a							
Ser	b							
εş	C							
gra Re	d							
Program Service Revenue	e							
_		All other program service reve						
		Total. Add lines 2a-2f						
	3	Investment income (including			657.			657.
		other similar amounts)			057.			057.
	4	Income from investment of ta		· · ·				
	5	Royalties						
	•		(i) Real	(ii) Personal				
		Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
		Gain or (loss)						
		Net gain or (loss)		······ •				
nue	8 a	Gross income from fundraisin						
/en		including \$						
Re		contributions reported on line	-					
Other Revel		Part IV, line 18						
ŧ		Less: direct expenses						
		Net income or (loss) from fund	-	····· ►				
	9 a	Gross income from gaming ac						
		Part IV, line 19						
		Less: direct expenses						
		Net income or (loss) from gam		······ •				
	10 a	Gross sales of inventory, less	returns					
		and allowances						
		Less: cost of goods sold						
	С	Net income or (loss) from sale	es of inventory	🕨				
		Miscellaneous Revenu	ie	Business Code				
		MISCELLANEOUS		900099	27,774.			27,774.
	b	CREDIT CARD REWARDS		900099	9,257.			9,257.
	С							
		All other revenue						
		Total. Add lines 11a-11d			37,031.			
	12	Total revenue. See instructions		🕨	10,586,090.	0.	0	, .
83200	9 12-3	1-18						Form 990 (2018)

R STREET INSTITUTE

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).

Do	Check if Schedule O contains a response not include amounts reported on lines 6b,	se or note to any line in (A)	(B)	(C)	(D)
	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	173,000.	173,000.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
4	individuals. See Part IV, lines 15 and 16 Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	462,009.	191,684.	264,801.	5,524
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	E 202 20E	F 00C 700	101 (40	114 024
7	Other salaries and wages	5,303,305.	5,086,729.	101,642.	114,934
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	188,859.	179,264.	4,741.	4,854
9	Other employee benefits	286,927.	274,491.	6,763.	5,673
10	Payroll taxes	442,562.	404,693.	28,597.	9,272
11	Fees for services (non-employees):	,			
а	Management				
b	Legal	20,026.	14,683.	5,007.	336
	Accounting	72,467.	53,132.	18,119.	1,216
	Lobbying	20,778.	20,778.		
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees Other. (If line 11g amount exceeds 10% of line 25,				
g	column (A) amount, list line 11g expenses on Sch 0.)	534,532.	497,330.	34,863.	2 339
12	Advertising and promotion	10,564.	9,591.	912.	2,339
13	Office expenses	153,113.	118,670.	32,540.	1,903
14	Information technology	19,634.	19,634.		
15	Royalties				
16	Occupancy	427,635.	364,020.	55,285.	8,330
17	Travel	487,460.	471,837.	13,013.	2,610
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials Conferences, conventions, and meetings	380,257.	369,323.	7,922.	3,012
19 20	· · · · · · · · · · · · · · · · · · ·	500,257.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5,012
20	Payments to affiliates				
22	Depreciation, depletion, and amortization	83,714.	61,378.	20,931.	1,405
23	Insurance	29,404.	21,559.	7,352.	493
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	BOOKS & SUBSCRIPTIONS	123,148.	110,533.	11,827.	788
b	TRAINING & PROF. DEV'L	71,500.	59,015.	11,700.	785
с	REGISTRATION FEES	8,243.	6,808.	1,345.	90
d	DUES	8,142. 25,102.	7,693. 19,708.	421. 4,944.	28 450
	All other expenses	9,332,381.	8,535,553.	632,725.	164,103
25 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization	J, JJZ, JUI •	• • • • • • • • • • • • • • • • • • • •	054,145.	107,103
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
83201	0 12-31-18				Form 990 (2018

R STREET INSTITUTE

		Check if Schedule O contains a response or not	te to any line	in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			1,256,402.	1	2,713,622.
	2	Savings and temporary cash investments			1,229,527.	2	30,184.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			2,252,176.	4	3,373,372.
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensation					
		Part II of Schedule L		5			
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect					
S		employees' beneficiary organizations (see instr).		6			
Assets	7	Notes and loans receivable, net		F		7	
Ř	8	Inventories for sale or use				8	
	9				39,168.	9	95,538.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	493,055.			
	b	Less: accumulated depreciation	10b	91,307.	485,462.	10c	401,748.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	61,317.	15	43,689.		
	16	Total assets. Add lines 1 through 15 (must equ			5,324,052.	16	6,658,153.
	17	Accounts payable and accrued expenses	346,070.	17	334,435.		
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV of Sc	hedule D		21	
es	22	Loans and other payables to current and former	r officers, dir	ectors, trustees,			
iliti		key employees, highest compensated employee	es, and disq	ualified persons.			
Liabilities		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	-			23	
	24	Unsecured notes and loans payable to unrelate	d third partie	es		24	
	25	Other liabilities (including federal income tax, pa	yables to re	lated third			
		parties, and other liabilities not included on lines	s 17-24). Cor	nplete Part X of	205 000		400 000
		Schedule D			395,880.	25	487,907.
	26	Total liabilities. Add lines 17 through 25			741,950.	26	822,342.
		Organizations that follow SFAS 117 (ASC 958		re▶ 🖾 and			
Ses		complete lines 27 through 29, and lines 33 an					
ano	27	Unrestricted net assets			3,082,968.	27	2,065,956.
Bal	28	Temporarily restricted net assets			1,499,134.	28	3,769,855.
pu	29					29	
۲ ۲		Organizations that do not follow SFAS 117 (A	SC 958), ch	ieck here 🕨 📖			
s O		and complete lines 30 through 34.					
set	30	Capital stock or trust principal, or current funds				30	
As	31	Paid-in or capital surplus, or land, building, or ec				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in			4,582,102.	32	5,835,811.
_	33	Total net assets or fund balances			5,324,052.	33 34	6,658,153.
	34	Total liabilities and net assets/fund balances			5,524,052.	34	Form 990 (2018)

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Form	990 (2018) R STREET INSTITUTE	26-	3477125	Pa	ge 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,58		
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,33		
3	Revenue less expenses. Subtract line 2 from line 1	3	1,25		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,58	2,1	02.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	5,83	5,8	11.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
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	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	2		
	consolidated basis, or both:				
	X 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	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule C).		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit		
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	dit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2018)

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SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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
2018
Open to Public Inspection

Nan	ne of t	the organization ס פית	REET INSTI	ייזיייב					dentification number $6-3477125$
Pa	rt I	Reason for Public (molete th	is nart) Se	e instruction		0-34/1123
					-			5.	
1 1	l I I I I I I I I I I I I I I I I I I I	ization is not a private found A church, convention of ch							
							IJ(A)(I).		
2	H	A school described in sect					::)		
3	\square	A hospital or a cooperative						VIII) Entor	the beenitel's name
4		A medical research organiz city, and state:	cation operated in co	injunction with a nospita	l described	a in sectio	A)(1)(d)011 m	(III). Enter	the hospital's hame,
5		An organization operated for	or the benefit of a co	ollege or university owned	d or opera	ted by a g	overnmental	unit descrit	oed in
		section 170(b)(1)(A)(iv). (C				, ,			
6		A federal, state, or local gov	vernment or governr	mental unit described in	section 17	70(b)(1)(A)	(v).		
7	X	An organization that norma	ally receives a substa	antial part of its support f	rom a gov	ernmental	unit or from t	he general	public described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8		A community trust describe		(1)(A)(vi). (Complete Par	t II.)				
9		An agricultural research org				ed in conju	unction with a	land-grant	college
		or university or a non-land-g							
		university:						-	
10		An organization that norma	ally receives: (1) more	e than 33 1/3% of its sup	port from	contributi	ons, members	ship fees, a	and gross receipts from
		activities related to its exen	npt functions - subje	ct to certain exceptions,	and (2) no	o more tha	in 33 1/3% of	its suppor	t from gross investment
		income and unrelated busir	ness taxable income	e (less section 511 tax) fr	om busine	esses acqu	ired by the o	ganization	after June 30, 1975.
		See section 509(a)(2). (Cor	mplete Part III.)						
11		An organization organized a	and operated exclus	ively to test for public sa	afety. See	section 50	09(a)(4).		
12		An organization organized a	and operated exclus	ively for the benefit of, to	perform	the functio	ons of, or to c	arry out the	e purposes of one or
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section	5 09(a)(3). (Check the box in
		lines 12a through 12d that	describes the type of	of supporting organizatio	n and con	nplete lines	s 12e, 12f, an	d 12g.	
а		Type I. A supporting orga	anization operated, s	supervised, or controlled	by its sup	ported org	ganization(s),	typically by	/ giving
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or truste	es of the s	supporting
		organization. You must o	complete Part IV, Se	ections A and B.					
b		Type II. A supporting org	anization supervised	d or controlled in connec	tion with it	ts support	ed organizatio	on(s), by ha	aving
		control or management o	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or mana	age the sup	oported
		organization(s). You mus	t complete Part IV,	Sections A and C.					
С		Type III functionally inte	egrated. A supportin	g organization operated	in connec	tion with, a	and functiona	lly integrat	ed with,
		its supported organization	n(s) (see instructions	s). You must complete l	Part IV, Se	ections A,	D, and E.		
d		Type III non-functionally	y integrated. A supp	oorting organization oper	ated in co	nnection v	with its suppo	rted organ	ization(s)
		that is not functionally int	tegrated. The organiz	zation generally must sa	tisfy a dist	ribution re	quirement an	d an attent	iveness
		requirement (see instruct	tions). You must cor	nplete Part IV, Sections	A and D,	, and Part	V .		
е		Check this box if the orga	anization received a	written determination fro	om the IRS	that it is a	а Туре I, Туре	II, Type III	
		functionally integrated, or	r Type III non-functio	onally integrated support	ing organi:	zation.			
f	Ente	er the number of supported o	organizations						
g		vide the following information				<u> </u>			
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(IV) IS the orga in your governi	inization listed	(v) Amount of	,	(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see ir	istructions)	support (see instructions)
Tota	al								

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18 Schedule A (Form 990 or 990-EZ) 2018 13

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Schedule A (Form 990 or 990 EZ) 2018 R STREET INSTITUTE

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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2,832,801.	4,069,963.	5,887,086.	8,262,264.	10,548,402.	31,600,516.
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	2,832,801.	4,069,963.	5,887,086.	8,262,264.	10,548,402.	31,600,516.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						12,872,671.
6	Public support. Subtract line 5 from line 4.						18,727,845.
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4	2,832,801.	4,069,963.	5,887,086.	8,262,264.	10,548,402.	31,600,516.
	Gross income from interest,	_,	-,	-,	-,,	,,	
Ŭ	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	6,819.	68,724.	51,970.	1,231.	657.	129,401.
٥	Net income from unrelated business	0,010	0077210	5175700	1,2010	0071	123,1010
3	activities, whether or not the						
	,						
10	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	26,253.	26,261.	7 089	125,525.	37,031.	222,159.
	assets (Explain in Part VI.)	20,255.	20,201.	1,005.	123,525.	57,051.	31,952,076.
	-		(ma)			12	625.
	Gross receipts from related activities,		,	l fourth or fifth to			023.
13	First five years. If the Form 990 is for	-	first, second, trint	a, iourtri, or intri ta	ix year as a section	1 50 1(0)(3)	
Sec	organization, check this box and stop ction C. Computation of Publi	c Support Per	rcentage				
				aluma (f)		14	58.61 %
	Public support percentage for 2018 (li					14 15	64 40
	Public support percentage from 2017						,
108	33 1/3% support test - 2018. If the o	-					► X
	stop here. The organization qualifies a		0				
D	33 1/3% support test - 2017. If the o	-					
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fact			-	-	-	
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances test						
	more, and if the organization meets th				• •		
	organization meets the "facts-and-circ						
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	ı, 16b, 17a, or 17b			s

Schedule A (Form 990 or 990-EZ) 2018

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Schedule A (Form 990 or 990 EZ) 2018 R STREET INSTITUTE

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.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services 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						
k	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						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
	endar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
t	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is fo	r the organization':	s first, second, thi	rd, fourth, or fifth	tax year as a sectio	on 501(c)(3) org	ganization,
	check this box and stop here						▶∟
	ction C. Computation of Publ		-			<u> </u>	
	Public support percentage for 2018 (column (f))		15	%
	Public support percentage from 2017					16	%
	ction D. Computation of Inve					47	
	Investment income percentage for 20		'			17 18	%
	Investment income percentage from a 33 1/3% support tests - 2018. If the			on line 14 and lin			%
192	more than 33 1/3%, check this box a	-					
F	33 1/3% support tests - 2017. If the						
Ľ	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
	23 10-11-18	and not oneon a	<u></u>				n 990 or 990-EZ) 2018
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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

Yes No

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of 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* (*b*) *and* (*c*) *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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) 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 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **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 in 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 in 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 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.)

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			Yes	No
44	Lies the examination eccentral a gift or contribution from any of the following persons?		162	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 in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
-	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's 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 directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
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			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), 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	L 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 government entity (see inst	tructions	s).	
2	Activities Test. Answer (a) and (b) 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 in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	-		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
83202	5 10-11-18 Schedule A (Form 9	90 or 99	90-ЕZ)	2018
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Schedule A (Form 990 or 990-EZ) 2018 R STREET INSTITUTE

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

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

Sect	ion 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	ion 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 1-1/2% 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 .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	v integrate	ad Type III supporting or	nanization (see

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

Schedule A (Form 990 or 990-EZ) 2018

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Par	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _(continued)	
Secti	on D - Distributions	Current Year		
_1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exempt			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
_1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
C	From 2015			
d	From 2016			
e	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
b	Excess from 2015			
с	Excess from 2016			
d	Excess from 2017			
е	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

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Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one)

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Schedule of Contributors

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

OMB No. 1545-0047

2018

Employer identification number

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Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

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

General Rule

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

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Name of organization

Employer identification number

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Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	onal space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions Ty	ype of contribution
1		\$3,950,000. P N (Con	Person X Payroll I Ioncash I nplete Part II for cash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Ty	(d) ype of contribution
2		\$875,000. P N (Con	Person X Payroll Incash Incash Incash Contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Ty	(d) ype of contribution
3		\$700,326.	Person X Payroll I Ioncash I mplete Part II for cash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Ty	(d) ype of contribution
4		\$600,000. P N (Con	Person X Payroll I Ioncash I mplete Part II for cash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Ty	(d) ype of contribution
5		\$396,000. P N (Con	Person X Payroll I Ioncash I mplete Part II for cash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Ty	(d) ype of contribution
6		\$362,004.	Person X Payroll I Ioncash I mplete Part II for cash contributions.)
823452 11-08	Ið	Schedule B (Form 990, 9	990-EZ, or 990-PF) (2018)

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Name of organization

Employer identification number

R STREET INSTITUTE

26-3477125

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$325,000.	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
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
823452 11-08	2 19	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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Name of organization

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Employer identification number

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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
- =		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
— —		\$	

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a==				-	
	INSTITUTE	ono to overcripping dependent 1	26 - 347712		
fre	om any one contributor. Complete columns (a)	through (e) and the following line e	in section 501(c)(7), (8), or (10) that total more than \$1, entry. For organizations	JUU TOP	
co U:	mpleting Part III, enter the total of exclusively religious, c se duplicate copies of Part III if additional	naritable, etc., contributions of \$1,000 (or less for the year. (Enter this info. once.)		
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is	hold	
Part I				leiu	
—					
		(e) Transfer of g	gift		
			Deletionelin of two of even to two of two		
	Transferee's name, address, an		Relationship of transferor to transferee		
a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is	held	
		(e) Transfer of g			
		(e) Transfer of g	gnt		
	Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee		
<u> </u>					
<u> </u>					
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how aift is	(d) Description of how gift is held	
Part I				lielu	
		(e) Transfer of g	gift		
	Transferee's name, address, an	$d 7 \mathbf{P} \pm 4$	Relationship of transferor to transferee		
a) No. from		I			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is	held	
— —					
		(e) Transfer of g	gift		
			gift		
	Transferee's name, address, an		gift Relationship of transferor to transferee		
	Transferee's name, address, an				
	Transferee's name, address, ar				
	Transferee's name, address, ar				

SCHEDULE C			OMB No. 1545-0047					
(Form 990 or 990-EZ)			2018					
	Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.			Open to Public				
Department of the Treasury Internal Revenue Service					Inspection			
If the organization ans	wered "Yes," or	n Form 990, Part IV, line 3, or For	m 990-EZ, Part V, lii	ne 46 (Political Camp	baign Act	ivities), then		
 Section 501(c)(3) org 	ganizations: Con	nplete Parts I-A and B. Do not com	plete Part I-C.					
 Section 501(c) (othe 	 Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. 							
 Section 527 organization 	ations: Complete	e Part I-A only.						
		n Form 990, Part IV, line 4, or For						
 Section 501(c)(3) org 	ganizations that	have filed Form 5768 (election und	ler section 501(h)): C	omplete Part II-A. Do	not compl	lete Part II-B.		
 Section 501(c)(3) org 	ganizations that	have NOT filed Form 5768 (electio	n under section 501(h)): Complete Part II-E	3. Do not o	complete Part II-A.		
-		n Form 990, Part IV, line 5 (Proxy	Tax) (see separate i	instructions) or Form	ו 990-EZ,	Part V, line 35c (Proxy		
Tax) (see separate inst	ructions), then							
), or (6) organiza [.]	tions: Complete Part III.		<u> </u>				
Name of organization						r identification number		
		T INSTITUTE				26-3477125		
Part I-A Comple	ete if the org	anization is exempt unde	r section 501(c)	or is a section 5	27 orga	anization.		
1 Provide a description	on of the organiz	ation's direct and indirect political	campaign activities i	in Part IV.				
2 Political campaign	activity expendit	ures			.►\$			
3 Volunteer hours for	political campai	gn activities						
Part I-B Comple	ete if the org	janization is exempt unde	r section 501(c)	(3).				
1 Enter the amount o	f any excise tax	incurred by the organization unde	r section 4955		.►\$			
2 Enter the amount o	f any excise tax	incurred by organization manager	s under section 4955	5	.►\$			
3 If the organization i	ncurred a sectio	n 4955 tax, did it file Form 4720 fo	or this year?			Yes No		
4a Was a correction m	nade?					Yes No		
b If "Yes," describe in					FOALS			
-		anization is exempt unde				3).		
	• •	d by the filing organization for sect	-		▶\$			
		ization's funds contributed to othe	er organizations for se	ection 527	. .			
exempt function ac					▶\$			
-	-	. Add lines 1 and 2. Enter here an			. .			
					▶\$			
						Yes No		
		nployer identification number (EIN	-	-				
		tion listed, enter the amount paid						
		omptly and directly delivered to a			eparate s	egregated fund or a		
· · · · · · · · · · · · · · · · · · ·	. ,	additional space is needed, provic	1					
(a) Name	9	(b) Address	(c) EIN	(d) Amount paid f		(e) Amount of political		
				filing organizatio funds. If none, ente		ntributions received and promptly and directly		
				iulius. Il none, ente		delivered to a separate		
						political organization.		
						If none, enter -0		

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

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Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018 R	STREET INSTITUTE	26-3477125 Page 2
Part II-A Complete if the orga	nization is exempt under section 501(c)(3	and filed Form 5768 (election under

Fait	section 501(h)).			
A Che	eck 🕨 🔲 if the filing organization belon	gs to an affiliated group (and list in Part IV each affiliated	l group member's nam	e, address, EIN,
	expenses, and share of exces	ss lobbying expenditures).		
B Che	eck 🕨 🔲 if the filing organization check	ed box A and "limited control" provisions apply.		
		oying Expenditures leans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a ⁻	Total lobbying expenditures to influence pub	lic opinion (grass roots lobbying)	0.	
		gislative body (direct lobbying)	41,914.	
		d 1b)	41,914.	
			9,290,467.	
		es 1c and 1d)	9,332,381.	
		unt from the following table in both columns.	616,619.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Γ	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
(Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
(Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
(Over \$17,000,000	\$1,000,000.		
g (Grassroots nontaxable amount (enter 25% o	f line 1f)	154,155.	
h	Subtract line 1g from line 1a. If zero or less, e	enter -0-	0.	
i	Subtract line 1f from line 1c. If zero or less, e	nter -0-	0.	
		er line 1h or line 1i, did the organization file Form 4720		
		-		Yes No
		4-Year Averaging Period Under Section 501(h) a section 501(h) election do not have to complete all	of the five columns b	elow.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period										
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total					
2a Lobbying nontaxable amount	323,562.	395,534.	492,665.	616,619.	1,828,380.					
 b Lobbying ceiling amount (150% of line 2a, column(e)) 					2,742,570.					
c Total lobbying expenditures	12,057.	57,555.	35,084.	41,914.	146,610.					
d Grassroots nontaxable amount	80,891.	98,884.	123,166.	154,155.	457,096.					
e Grassroots ceiling amount (150% of line 2d, column (e))					685,644.					
f Grassroots lobbying expenditures	500.	20,000.			20,500.					

Schedule C (Form 990 or 990-EZ) 2018

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Schedule C (Form 990 or 990-EZ) 2018 R STREET INSTITUTE

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

f the lobbying activity. Yes No Amount 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Image: Comparison of the comparison of t	For e	h "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description)	(b)	
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	of the	olobbying activity.	Yes	Νο	Amo	ount
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Image: Comparison of the public of the publ		local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
d Mailings to members, legislators, or the public?	b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
f Grants to other organizations for lobbying purposes?	d	Mailings to members, legislators, or the public?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?	е	Publications, or published or broadcast statements?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	f	Grants to other organizations for lobbying purposes?				
	g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
j Total. Add lines 1c through 1i						
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b If "Yes," enter the amount of any tax incurred under section 4912		-				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		•				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section			on 501(c)(5). or se	ection	
501(c)(6).						
Yes No					Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?						
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3	_					
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section					ection	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."		501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				ne 3, is
1 Dues, assessments and similar amounts from members1	1	Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political						
expenses for which the section 527(f) tax was paid).						
a Current year 2a	а			2a		
b Carryover from last year 2b						
c Total						
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3	-					
 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess 						
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	•					
expenditure next year?				4		
5 Taxable amount of lobbying and political expenditures (see instructions) 5	5					
Part IV Supplemental Information	-				1	
rovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see			list); Part II-	A, lines 1 :	and 2 (see	

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

Schedule C (Form 990 or 990-EZ) 2018

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Department of the Treasury

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.



Interna	I Revenue Service	Go to www.irs.gov/Form9	90 for instructions and the latest information).	Inspection	
Name of the organization Employer identification 26-347712						
Pa	rt I Organiz	ations Maintaining Donor Advise	ed Funds or Other Similar Funds or A	Accounts	Complete if the	
	organizatio	on answered "Yes" on Form 990, Part IV, lir	ie 6.			
	-		(a) Donor advised funds	(b) Funds ar	nd other accounts	
1	Total number at e	end of year				
2		of contributions to (during year)				
3	Aggregate value of	of grants from (during year)				
4		at end of year				
5			writing that the assets held in donor advised fu	nds		
	are the organizati	on's property, subject to the organization's	exclusive legal control?		🖸 Yes 🛛 🗋 N	
6	Did the organizati	ion inform all grantees, donors, and donor a	advisors in writing that grant funds can be used	only		
	for charitable pur	poses and not for the benefit of the donor o	or donor advisor, or for any other purpose confe	erring		
	impermissible priv				🔄 Yes 🔄 N	
Pa	rt II Conserv	vation Easements. Complete if the or	ganization answered "Yes" on Form 990, Part ۱	V, line 7.		
1	Purpose(s) of con	servation easements held by the organizat	ion (check all that apply).			
		n of land for public use (e.g., recreation or e	education)	ly important	land area	
	Protection of	of natural habitat	Preservation of a certified h	nistoric struc	ture	
	Preservatio	n of open space				
2			fied conservation contribution in the form of a c			
	day of the tax yea				l at the End of the Tax Ye	
а				2a		
b				2b		
c			ructure included in (a)	2c		
d			after 7/25/06, and not on a historic structure			
~				2d		
3	year ►	rvation easements modified, transferred, re	leased, extinguished, or terminated by the orga	anization dun	ing the tax	
4		where property subject to conservation ea	sement is located			
5		ation have a written policy regarding the pe				
Ŭ			t holds?		Yes N	
6			handling of violations, and enforcing conserva-			
-					ine daming the year	
7		 ses incurred in monitoring, inspecting, han	dling of violations, and enforcing conservation e	easements di	uring the vear	
-	▶\$					
8	· · ·	rvation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(h)(4)	(B)(i)		
					🗌 Yes 🗌 N	
9	In Part XIII, descr	ibe how the organization reports conservat	ion easements in its revenue and expense state	ement, and b	alance sheet, and	
	include, if applica	ble, the text of the footnote to the organiza	tion's financial statements that describes the o	rganization's	accounting for	
	conservation ease	ements.		-	-	
Pai	rt III Organiz	ations Maintaining Collections o	f Art, Historical Treasures, or Other	Similar A	ssets.	
	Complete	if the organization answered "Yes" on Form	1 990, Part IV, line 8.			
1a	If the organization	n elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statement a	and balance	sheet works of art,	
	historical treasure	es, or other similar assets held for public ex	hibition, education, or research in furtherance o	of public serv	rice, provide, in Part XII	
		otnote to its financial statements that descr				
b	-		SC 958), to report in its revenue statement and			
	treasures, or othe	er similar assets held for public exhibition, e	ducation, or research in furtherance of public s	ervice, provid	de the following amoun	
	relating to these i					
2			asures, or other similar assets for financial gain	, provide		
		ounts required to be reported under SFAS 1				
b	Assets included in	n Form 990, Part X		🕨 💲		

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Schedule D (Form 990) 2018

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Part IIII Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued) 3 Using the organization acquisition, accession, and other records, check any of the following that are a significant use of its collection items a Public exhibition d Loan or exhange programs e Other	Sche	dule D (Form 990) 2018 R STREE	T INSTITUT	E				4	26-34	7712	5 Pa	age 2
clock all that apply: d Loan or exchange programs a Police exhibition d Data or exchange programs b Scholarly research e Other	Pai	t III Organizations Maintaining C	Collections of A	rt, Hist	torical Tr	easures, o	or Othe	er Simila	ar Asse	ts (contir	nued)	
a Public exhibition definition definition of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, do the organization is collections of art, historical trassures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" on Form 980, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Ta is the organization and other intermediary for contributions or other assets not included on Form 980, Part X, usites, custodial or order intermediary for contributions or other assets not included on Form 980, Part X, line 21. Ta is the organization and other intermediary for contributions or other assets not included on Form 980, Part X, line 21. Ta is the organization include an amount on Form 980, Part X, line 21, for escrow or custodial account lability? Contributions during the year C Beginning balance Additions during the year C Beginning of year balance (a) Current year (b) Prior year (c) Two years back (c) Three years back (c) Four years (c) Four years (c) Four years (c) Four years	3	Using the organization's acquisition, access	ion, and other record	ds, checl	k any of the	following that	at are a si	gnificant ι	use of its	collectio	n item	s
b Scholarly research e Other												
c Prevention for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solid for receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 18 Is the organization angent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Yes No b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount Yes No c Beginning balance 10 11 12 Dot the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No 2 Dot the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No 2 Dot the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No 2 Dot the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No 4 Anditonis during the year (a) Dror	а	Public exhibition	d	I []	Loan or exc	hange progra	ams					
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization's collection? Part W Escrow and Custodial Arrangements. Complete if the organization is collection? Part W escrow and a agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 900, Part X? Beginning balance Caliform and the organization and the organization answered "Ves" on Form 900, Part X, line 21. Amount Caliform and the service custodian or other intermediary for contributions or other assets not included on Form 900, Part X? Caliform and the year Caliform and the organization and the organization answered "Yes" on Form 900, Part X? Caliform and the year Caliform and the organization in the part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization incluses Caliform and the organization incluses Caliform year Caliform year Caliform and the organization and the organization answered "Yes" on Form 900, Part X, line 21. Canter year Caliform year is a collection on the organization answered "Yes" on Form 900, Part X, line 21. Canter year Caliform year is a collection on Form 900, Part X, line 21. Canter year Caliform year is a collection year is a collection year back. Canter year Caliform year balance Caliform year balance Caliform year Caliform year balance Caliform year balance Caliform year	b	Scholarly research	e		Other							
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets Ive No Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent in trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XP Ives No b If 'Yes,'' explain the arrangement in Part XIII and complete the following table: Amount It It Amount It It Amount It It It It Amount It It </th <th>с</th> <th>Preservation for future generations</th> <th></th>	с	Preservation for future generations										
To be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No Part IW Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Fom 990, Part N, line 9, or reported an amount on Form 990, Part X, line 21. Ta Is the organization an agent, fustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is the organization an agent, fustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is the organization an agent, fustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is the organization include an amount on Form 990, Part X, line 21. for escrow or custodial account liability? Ives No b If 'Yes', 'explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Image: part of the organization answered 'Yes' on Form 990, Part IV. line 10. Image: part of the organization and part of the organization answered 'Yes' on Form 990, Part IV. line 10. Part W Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV. line 10. Image: part of the organization and part of the organization and the part of the organization and part of the organization ande part of the organization ande part of t	4	4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.										
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X // Ine 21. Ves No b If "Yes," explain the arrangement in Part XIII and complete the following table: Image: Complete the following table: Image: Complete the following table: Amount c Beginning balance Image: Complete the following table: Image: Complete the following table: Amount c Buthbuttons during the year Image: Complete the following table: Image: Complete the following table: Amount c Beginning balance Image: Complete the following table: Image: Complete the following table: Amount c Beginning of year balance Image: Complete the explanation hanswered "Yes" on Form 990, Part IV, line 10. Image: Complete the explanation hanswered "Yes" on Form 990, Part IV, line 10. fa Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Fure years back (e) four years back d Grants or scholarships Image: Complete the organization answered "Yes" on Form 990, Part IV, line 10. Image: Complete the explanation hanswered for the organization for the organization for year balance Image: Commored the explanation hanswered the complete	5	During the year, did the organization solicit of	or receive donations	of art, hi	storical trea	sures, or oth	er similar	assets		-		-
reported an anount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? No b If 'Yes,' explain the arrangement in Part XIII and complete the following table: Amount 1d 1d 1d 1d 1d 1d 1d 1d 1d 2d Additions during the year 1d 1d 2d Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete If the organization inswered 'Yes' on Form 990, Part IV, line 10. Part V Endowment Funds. Complete If the organization answered 'Yes' on Form 990, Part IV, line 10. If the year back (e) Four years back is (e) Four												
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on Form 990, Part X? Yes No b If 'Yes,' explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1d d Additions during the year 1d e Distributions during the year 1d a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization inswered 'Yes' on Form 990, Part W, line 10. Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part W, line 10. (e) Four years back (e) Four years back (e) Four years back if a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (c) Three years back (e) Four years back if a Beginning of year balance (b) Ortrive years back if (c) Three years back if (c) Three years back if (c) Four years back if a drants or scholarships e Other expenditures for facilities and programs		· ·										
b If "Yes," explain the arrangement in Part XII and complete the following table:	1a									-		7
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Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance (b) Current year (c) Two years back (d) Three years back (e) Four years back b Contributions (c) Current year (c) Two years back (d) Three years back (e) Four years back c Net investment eamings, gains, and losses (c) Current year (c) Two years back (d) Three years back c Net investment eamings, gains, and losses (c) Current year (c) Two years back (d) Three years back c Net investment eamings, gains, and losses (c) Two years back (d) Three years back (e) Four years back d Other expenditures for facilities (c) Two years back (d) Three years back (e) Four years back g End of year balance (c) Two years back (c) Two years back (d) Three years back g End of year balance (c) Two years back (d) Three years back (e) Four years g End of year balance (c) Two years back		-						• • • • • • • • • • • • • • • • • • • •] NO
Ia Beginning of year balance (a) Current year (b) Prior year (c) Two years back									<u></u>]
1a Beginning of year balance	Fai								aara baak	(a) Four	Vooro	haak
b Contributions	4.	Designing of year balance	(a) Current year	(D) P	rior year	(C) TWU year	IS DACK	(a) Thee y	Ears Dack	(e) roui	years	DACK
c Net investment earnings, gains, and losses	la L											
d Grants or scholarships	D											
e Other expenditures for facilities and programs	ر ام											
and programs	u											
f Administrative expenses	е											
g End of year balance	4											
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶% b Permanent endowment ▶% c Temporarily restricted endowment ▶% mthe percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations 3a(i) (ii) ret here endowment solutions 3a(i) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3a(ii) 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value Description of property (a) Cost or other (b) Cost or other (c) Accumulated b Buildings	1											
a Board designated or quasi-endowment ▶% b Permanent endowment ▶% c Temporarily restricted endowment ▶% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:				l no (lino 1	a colump ()) hold as:						
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c Temporarily restricted endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) urrelated organizations 3a(i) 3a(i) (ii) urrelated organizations 3a(i) isteen the the the the organizations is the organization's endowment funds. Description of property (a) Cos	a b		%									
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by: (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment e Other e Other (b) Cost (c) Accumulated (c) Book value (c) Book value (c) Book value (c) Accumulated (c) Book value (c) Accumulated (c) Book value (c) Book value (c) Accumulated (c) Book value (c) Accumulated (c) Book value (c) Bo	39		-	ation the	at are held a	nd administe	ared for th	ne organiz	ation			
(i) unrelated organizations 3a(i) (ii) related organizations 3a(ii) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation b Buildings 5 c Leasehold improvements 395,880. 68,849. 327,031. d Equipment 35,650. 13,229. 22,421. e Other 61,525. 9,229. 52,296.	ou							ie organiz	acion	Ī	Yes	No
(ii) related organizations 3a(ii) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b Part VI Land, Buildings, and Equipment. 3b Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value Description of property (a) Cost or other (b) Cost or other (c) Accumulated b Buildings		-								3a(i)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land												
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Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land	4										I	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land	Pa		<u>v</u>									
Description of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1a Land				0, Part IN	/, line 11a. S	See Form 990), Part X,	line 10.				
b Buildings 395,880. 68,849. 327,031. c Leasehold improvements 35,650. 13,229. 22,421. e Other 61,525. 9,229. 52,296.			(a) Cost or o	other	(b) Cost	or other	(c) Ac	cumulate	d	(d) Boo	k value	<u>э</u>
b Buildings 395,880. 68,849. 327,031. c Leasehold improvements 35,650. 13,229. 22,421. e Other 61,525. 9,229. 52,296.	1a	Land	· · ·	,		· ·						
c Leasehold improvements 395,880. 68,849. 327,031. d Equipment 35,650. 13,229. 22,421. e Other 61,525. 9,229. 52,296.												
d Equipment 35,650. 13,229. 22,421. e Other 61,525. 9,229. 52,296.					39	5,880.		68,84	49.	32	7,0	31.
e Other 61,525. 9,229. 52,296.												

Schedule D (Form 990) 2018

832052 10-29-18

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(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)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	DEFERRED LEASEHOLD IMPROVEMENT	
(3)	ALLOWANCE	327,031.
(4)	DEFERRED RENT ABATEMENT	160,876.
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.) 🕨	487,907.

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2018

832053 10-29-18

Sche	dule D (Form 990) 2018 R STREET INSTITUTE		2	6 – 3	3477125 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statem	ents With Re			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1	Total revenue, gains, and other support per audited financial statements			1	10,586,090.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	10,586,090.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)				
с	Add lines 4a and 4b			1c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	10,586,090.
Pa	rt XII Reconciliation of Expenses per Audited Financial Stater		kpenses per R	etu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1	Total expenses and losses per audited financial statements			1	9,332,381.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			_
е	Add lines 2a through 2d		2	2e	0.
3	Subtract line 2e from line 1			3	9,332,381.
4				_	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
4 a					
-	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4a			
a	Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b	4a 4b		4c	0.
a b c 5	Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	4a 4b		4c 5	0. 9,332,381.

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

PART X, LINE 2:

FOR THE YEAR ENDED DECEMBER 31, 2018, R STREET HAS DOCUMENTED ITS

CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR

REPORTING UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT NO MATERIAL

UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN

THE FINANCIAL STATEMENTS.

832054 10-29-18

15061030 745960 28560

Schedule D (Form 990) 2018

SCHEDULE I (Form 990)	Go	Grants and Oth overnments, ar lete if the organizatio	nd Individua	ls in the Ŭn i ' on Form 990, Pa	ted States		OMB No. 1545-0047
Department of the Treasury Internal Revenue Service		Go to www.ir	Attach to For rs.gov/Form990 for		nation.		Open to Public Inspection
Name of the organization R STREET	INSTITUTI	2	•				Employer identification number 26-3477125
Part I General Information on Grants a	Ind Assistance						
 Does the organization maintain records criteria used to award the grants or assis Describe in Part IV the organization's pro- 	stance?						tion X Yes No
Part II Grants and Other Assistance to					anization answered	es" on Form 990, Parl	t IV, line 21, for any
recipient that received more than	i ´	n be duplicated if addit	tional space is need		(f) Mathad of	1	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
AMERICAN CONSUMER INSTITUTE 1701 PENNSYLVANIA AVE SUITE 300	20. 8601807	E01(0)(2)	CE 000				WRITE ON STATE & FEDERAL INSURANCE ISSUES AND PARTICIPATE IN ACTIVIES
WASHINGTON, DC 20006	20-8601897	501(C)(3)	65,000.	0.			IN TALLAHASSEE, FL CONSULTING FOR FINANCE.
JOHN LOCKE FOUNDATION 200 W. MORGAN STREET SUITE 200							INSURANCE AND TRADE TEAM ON LOCAL, STATE AND
RALEIGH, NC 27601	56-1656943	501(C)(3)	15,000.	0.			NATIONAL ISSUES
JAMES MADISON INSTITUTE 100 N. DUVAL STREEET TALLAHASSEE, FL 32301	59-2811908	501(C)(3)	52,000.	0.			EDUCATING THE PUBLIC ABOUT NEEDED PROPERTY INSURANCE REFORM
CENTER FOR DEMOCRACY & TECHNOLOGY 1401 K STREET NW, STE 200 WASHINGTON, DC 20005	52-1905358	501(C)(3)	33,500.	0.			CREATING THE RESEARCH IN ARTIFICIAL INTELLIGENCE NETWORK
 2 Enter total number of section 501(c)(3) a 3 Enter total number of other organization 			l ne line 1 table			1	4.

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

Schedule I (Form 990) (2018)

Page 2

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

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:

SUBGRANTS ARE MONITORED BY THE PROGRAM STAFF AND, DEPENDING ON THE

REQUIREMENTS IN EACH SUBGRANT AGREEMENT, FINAL AND/OR INTERIM NARRATIVE AND

FINANCIAL REPORTS ARE SUBMITTED BY SUBGRANTEE. THESE REPORTS ARE REVIEWED

AND APPROVED BY THE PROGRAM STAFF AND BY THE FINANCE DIRECTOR. AT A

MINIMUM, ALL SUBGRANTS REQUIRE A FINAL NARRATIVE REPORT.

SC	HEDULE J	Compensation Information	1	OMB No.	1545-00	47
(Fo	(Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest			2018		2
	Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.			20	IU)
Depa	Department of the Treasury			Open to Public		
Intern	nternal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.			Inspe		
Nan	Name of the organization Employe					mber
_		R STREET INSTITUTE	26-3	347712	5	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a		iate box(es) if the organization provided any of the following to or for a person listed on Form	ו 990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or o	, i i i i i i i i i i i i i i i i i i i				
	Travel for com					
		cation and gross-up payments X Health or social club dues or initiation fee				
	Discretionary	spending account Personal services (such as maid, chauffer	ur, chef)			
_						
b	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or				v	
-		provision of all of the expenses described above? If "No," complete Part III to explain		1b	X	
2	-	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,			х	
	trustees, and office	rrs, including the CEO/Executive Director, regarding the items checked on line 1a?		2	<u> </u>	
~	la dia sta subista da 16 a		- 41 1			
3		ny, of the following the filing organization used to establish the compensation of the organization of the				
CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to						
	X Compensation	ation of the CEO/Executive Director, but explain in Part III.				
	X Form 990 of o		ommittoo			
			Johnmillee			
4	During the year di	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
-	organization or a re					
а	•	e payment or change-of-control payment?		4a		x
				·····		X
	 b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? 				X	
c Participate in, or receive payment from, an equity-based compensation arrangement? 4 If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. 4						
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on			
	contingent on the r					
а	•					X
b	Any related organiz	ation?		5b		X
		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 compensati	on			
	contingent on the r	net earnings of:				
а	The organization?	-		6a		Х
		ation?				Х
		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 payment	S			
		nes 5 and 6? If "Yes," describe in Part III		7		Х
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to				
		ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X
9	If "Yes" on line 8, c	id the organization also follow the rebuttable presumption procedure described in				
		n 53.4958-6(c)?	<u></u>	9		
LHA		eduction Act Notice, see the Instructions for Form 990.		lule J (Forr	n 990) 2018

26-3477125

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deterred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) ELI LEHRER	(i)	241,835.	0.	0.	9,992.	11,948.	263,775.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ERICA SCHODER	(i)	184,255.	0.	0.	7,469.	6,510.	198,234.	0.
VICE PRESIDENT & CORPORATE TREASURER ((ii)	0.	0.	0.	0.	0.	0.	0.
(3) KEVIN KOSAR	(i)	185,472.	0.	0.	6,379.	515.	192,366.	0.
VICE PRESIDENT OF POLICY	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) DAVID CAMERON SMITH	(i)	180,660.	0.	0.	6,425.	15,577.		0.
VP OF IMPL. & GEN. COUN. (END 10/18)	(ii) [0.	0.	0.	0.	0.	0.	0.
(5) IAN ADAMS	(i)	154,265.	0.	0.	6,207.	3,755.	164,227.	0.
ASSOC. VICE PRES., STATE AFFAIRS	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) CHARLES DUAN	(i)	141,058.	0.	0.	5,827.	16,534.	163,419.	0.
DIRECTOR TECHNOLOGY & INN. POLICY ((ii)	0.	0.	0.	0.	0.	0.	0.
(7) JAMES WALLNER	(i)	144,898.	0.	0.	6,000.	13,634.	164,532.	0.
SENIOR FELLOW, GOVERNANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
((ii)							
	(i)							
((ii)							
	(i)							
((ii)							
	(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.

PART I, LINE 1A:

AS PART OF THE WELLNESS BENEFITS OFFERED TO FULL TIME STAFF, THE COMPANY

REIMBURSES HEALTH CLUB DUES UP TO A CERTAIN AMOUNT PER YEAR.

Schedule J (Form 990) 2018

SCHEDULE O

(Form 990 or 990-EZ) Department of the Treasury

Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.

EZ 2018 Open to Public Inspection Employer identification number

26-3477125

OMB No 1545-0047

R STREET INSTITUTE

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

WE WORK EXTENSIVELY ON BOTH STATE AND NATIONAL POLICY, FOCUSING ON

ISSUES THAT OTHER GROUPS TEND TO NEGLECT. OUR SPECIALTY IS TACKLING

ISSUES THAT ARE COMPLEX, BUT DON'T NECESSARILY GRAB MAJOR HEADLINES.

THESE ARE THE AREAS WHERE WE THINK WE CAN HAVE A REAL IMPACT. WE

BELIEVE FREE MARKETS WORK BETTER THAN THE ALTERNATIVES. AT THE SAME

TIME, WE RECOGNIZE THE LEGISLATIVE PROCESS CALLS FOR PRACTICAL

RESPONSES TO CURRENT PROBLEMS. TOWARD THAT END, OUR MOTTO IS "FREE

MARKETS. REAL SOLUTIONS."

WE ALSO DIFFER FROM OTHER GROUPS ON THE POLITICAL RIGHT IN OUR DEDICATION TO BUILDING BROAD COALITIONS, WORKING WITH A WIDE ARRAY OF GROUPS WHO SHARE SPECIFIC POLICY GOALS. THIS MAKES US UNIQUELY CAPABLE OF BUILDING SUPPORT FOR PRAGMATIC, FREE-MARKET PROPOSALS THAT CAN EARN BIPARTISAN CONSENSUS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

WE WORK EXTENSIVELY ON BOTH STATE AND NATIONAL

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

IN 2018, THE ORGANIZATION LAUNCHED THE CIVIL SOCIETY AND NATURAL

SECURITY PROGRAMS. THESE PROGRAMS ARE DESCRIBED FURTHER IN SCHEDULE O.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

LHAFor Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.Schedule O (Form 990 or 990-EZ) (2018)83221110-10-18

Schedule O (Form 990 or 990-EZ) (2018) Page				
Name of the organization R STREET INSTITUTE	Employer identification number 26-3477125			
FORMERLY INCARCERATED, PROPOSED REFORMS OF THE PRE-TRIAL	PROCESS SO AS			
TO MAKE IT CONSISTENT WITH DUE PROCESS AND RECOMMENDATION	IS FOR CHANGING			
HOW THE SYSTEM ENGAGES WITH VIOLENT YOUTH OFFENDERS.				

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

FINANCE, INSURANCE AND TRADE:

THE FINANCE, INSURANCE AND TRADE POLICY PROGRAM EXPLORES EFFICIENT AND

EFFECTIVE MARKET-BASED APPROACHES TO PUBLIC POLICY QUESTIONS THAT

INVOLVE FINANCIAL SERVICES AND FREE TRADE. AMONG ITS PRIORITIES ARE

SOUND MONEY, PUBLIC FISCAL CRISES, THE EXPANSION OF BILATERAL AND

MULTILATERAL TRADE AGREEMENTS AND PLACING GOVERNMENT-SPONSORED

ENTERPRISES ON EQUAL FOOTING WITH OTHER FINANCIAL INSTITUTIONS.

IN PARTICULAR, OUR INSURANCE POLICY PROGRAM EXPLORES EFFICIENT AND EFFECTIVE MARKET-BASED APPROACHES TO PUBLIC POLICY QUESTIONS THAT INVOLVE THE TRANSFER OF RISK. AMONG ITS PRIORITIES ARE RISK BASED INSURANCE REGULATION, ENDING ENVIRONMENTALLY DESTRUCTIVE TAXPAYER SUBSIDIES THROUGH THE NATIONAL FLOOD INSURANCE PROGRAM AND THE FEDERAL CROP INSURANCE CORPORATION, AND EXPLORING THE BENEFITS OF MITIGATION THROUGH PROGRAMS LIKE THE RESTORE ACT AND THE COASTAL BARRIER RESOURCES SYSTEM.

R STREET HELPED TO CREATE THE INSURANCE RULES GOVERNING RIDESHARING AT THE STATE LEVEL, BRINGING TOGETHER RIDESHARING AND INSURANCE FIRMS UNDER AGREED-UPON REGULATORY FRAMEWORK.

EXPENSES \$ 1,145,580. INCLUDING GRANTS OF \$ 132,000. REVENUE \$ 0.

Name of the organization R STREET INSTITUTE	Employer identification number 26-3477125
R STREET'S ENERGY PROGRAM SEEKS TO ADVANCE A CLEANER ENVI	RONMENT AND A
THRIVING ECONOMY THROUGH PRINCIPLES OF MARKET COMPETITION	, LIMITED

PUT SIMPLY, WE RECOGNIZE THE RISKS POSED BY CLIMATE CHANGE AND PROMOTE POLICIES THAT HAVE CLIMATE BENEFITS AND APPEAL TO CONSERVATIVES ON A PRINCIPLED BASIS. TO THAT END, R STREET FOCUSES ON INITIATIVES THAT: 1) CUT REGULATION AND TAXES; 2) INCREASE COMPETITION, MARKET PRICING AND INNOVATION; AND 3) PROTECT PRIVATE PROPERTY RIGHTS. THESE POLICIES ULTIMATELY BOOST MARKET SIGNALS IN THE POWER SECTOR AND ALLOW A VARIETY OF FUELS TO OUTCOMPETE THE DIRTIEST ENERGY SOURCES, LIKE COAL AND RESIDUAL FUEL OIL. EXAMPLES OF SUCH POLICIES INCLUDE PROPOSALS THAT ALLOW HOMEOWNERS TO INVEST IN ROOFTOP SOLAR, GEOTHERMAL OR WIND ENERGY SOURCES, AS THESE GIVE THEM INDEPENDENCE FROM ELECTRICITY PROVIDERS AND CREATE MORE RENEWABLE ENERGY. WE ALSO PROMOTE POLICIES THAT EMBRACE CONSUMER CHOICE, PROTECT PROPERTY RIGHTS IN CLEAN ENERGY AND PROVIDE A LEVEL PLAYING FIELD FOR ALL SOURCES OF ENERGY TO COMPETE IN A COMPETITIVE MARKET.

EXPENSES \$ 908,996. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

HARM REDUCTION:

THE HARM REDUCTION PROGRAM AIMS FOR INTEGRATED HARM REDUCTION WITH TOBACCO, OPIOID AND SEXUAL BEHAVIOR AS CENTRAL ELEMENTS. WE BELIEVE THAT "ABSTINENCE ONLY" APPROACHES TO RISKY BEHAVIORS WILL NOT WORK ON A POPULATION-WIDE BASIS. AS SUCH, WE EMPHASIZE HARM-REDUCTION APPROACHES THAT ACCEPT THAT HARMFUL BEHAVIOR MAY CONTINUE EVEN AS WE SEEK TO MITIGATE-IF NOT ELIMINATE-THE HARMS INVOLVED.

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Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization R STREET INSTITUTE	Employer identification number $26-3477125$
IN ADDITION TO OUR WORK ON TOBACCO HARM REDUCTION, R STRE	ET IS
EXPANDING OUR WORK ON OPIOID HARM REDUCTION. ACCORDINGLY,	WE RECOGNIZE
THE VITAL ROLE THAT OPIOIDS PLAY IN REDUCING CHRONIC PAIN	WHILE
PROPOSING APPROACHES THAT REDUCE THE RISK OF ADDICTION. W	E PROMOTE
SYRINGE ACCESS PROGRAMS AND POLICIES THAT RESTRICT THE AB	USE OF OPIOIDS
AND ENSURE THAT THEIR USE DOES NOT RESULT IN UNINTENDED C	ONSEQUENCES,
SUCH AS ILLICIT USE OF OTHER DRUGS.	
EXPENSES \$ 838,735. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 0.

COMMERCIAL FREEDOM:

THE COMMERCIAL FREEDOM PROGRAM ADDRESSES GOVERNMENT BARRIERS THAT HARM BUSINESSES AND PEOPLE. GENERALLY, WE SUPPORT MARKET-ORIENTED POLICY SOLUTIONS THAT ENHANCE FREE ENTERPRISE, CONSUMER CHOICE AND PUBLIC WELLBEING. TO THIS END, OUR TEAM FOCUSES PRIMARILY ON OCCUPATIONAL LICENSING, ALCOHOL POLICY, SHIPPING AND POSTAL POLICY, HEALTHCARE DISINTERMEDIATION AND REGULATORY REFORM.

WITH RESPECT TO HEALTHCARE DISINTERMEDIATION, WE BELIEVE THAT THE CURRENT SYSTEM FOR ACCESSING CONTRACEPTION RESTRICTS WOMEN'S REPRODUCTIVE AND ECONOMIC FREEDOM AND IMPOSES NEEDLESS BURDENS ON THE VAST MAJORITY OF SEXUALLY ACTIVE AMERICANS (MEN INCLUDED). OUR ULTIMATE OBJECTIVES ARE TWOFOLD. FIRST, WE WOULD LIKE TO SUPPORT THE EFFORT TO EXPAND WOMEN'S ACCESS TO CONTRACEPTION IN ORDER TO GIVE THEM GREATER AUTONOMY OVER THEIR REPRODUCTIVE HEALTH AND REDUCE THE PUBLIC HEALTH BURDEN OF UNPLANNED PREGNANCIES. WE AIM TO IMPROVE ACCESS TO CONTRACEPTION AND ADVANCE A RIGHT-OF-CENTER CASE FOR REPRODUCTIVE RIGHTS BASED NOT ONLY ON INDIVIDUAL AUTONOMY AND GENDER EQUALITY BUT ALSO ON ECONOMIC FREEDOM. OUR MESSAGES WILL FOCUS ON CONSUMER CHOICE, 822212 10-10-18 82212 10-10-18 82212 10-10-18 82212 10-10-18 82212 10-10-18 Name of the organization

R STREET INSTITUTE

Employer identification number 26 - 3477125

THE LIMITED-GOVERNMENT BENEFITS OF CONTRACEPTION, INDIVIDUAL FREEDOM AND DEREGULATION OF PROFESSIONAL LICENSING.

TO THIS END, WE AIM TO HAVE ALL FORMS OF BIRTH CONTROL THAT DO NOT REQUIRE A SURGICAL PROCEDURE TO BE AVAILABLE EITHER FULLY OVER THE COUNTER (IN THE CASE OF CERTAIN DRUGS) OR WITHOUT THE NEED FOR A DOCTOR'S PRESCRIPTION (FOR CERTAIN DEVICES). SECOND, WE HOPE TO INITIATE A BROADER CONVERSATION ABOUT LICENSING REFORM IN THE MEDICAL PROFESSION THAT WILL PAVE THE WAY FOR NEW, CONSUMER-DRIVEN WAYS OF DELIVERING MORE AFFORDABLE AND CONVENIENT HEALTHCARE TO AMERICANS. EXPENSES \$ 789,067. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

NATIONAL SECURITY AND CYBER SECURITY:

THE NATIONAL SECURITY PROGRAM CONDUCTS RESEARCH TO ANALYZE THE NATION'S CURRENT AND EMERGING SECURITY CHALLENGES. IT SEEKS TO DEVELOP POLICIES THAT WILL SOLIDIFY OUR STRENGTH BOTH AT HOME AND ABROAD, AND WITHOUT SACRIFICING CIVIL LIBERTIES. TO THIS END, WE ARE CURRENTLY EXPANDING OUR WORK ON THE NATIONAL SECURITY IMPLICATIONS OF CYBERSECURITY, ESPECIALLY CYBER THREATS THAT EMERGE FROM HOSTILE OR ROGUE ACTORS ACROSS THE GLOBE. WE PROPOSE UPDATES AND IMPROVEMENTS TO OUR CYBERSECURITY SYSTEMS IN GOVERNMENT, IN ADDITION TO ADOPTING CYBERSECURITY BEST PRACTICES. WE ALSO PROVIDE RECOMMENDATIONS FOR OUR NUCLEAR POSTURE AND MODERNIZATION EFFORTS. EXPENSES \$ 252,709. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

CIVIL SOCIETY, EDUCATION AND WORK: IN 2018, WE LAUNCHED OUR CIVIL SOCIETY, EDUCATION AND WORK PROGRAM,

WHICH STUDIES THE BUILDING BLOCKS OF SOCIETY AND GOVERNANCE, INCLUDING

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R STREET INSTITUTE	Employer identification nun 26-3477125
ISSUES OF LOCALISM, FEDERALISM, SOCIAL CAPITAL, TRADITION	, PHILANTHROPY
AND MEDIATING INSTITUTIONS. IT PRODUCES RESEARCH, ANALYSI	-
COMMENTARY TO INFORM POLICYMAKERS' WORK ON A RANGE OF DOM	
POLICIES. OUR INITIATIVES HAVE A PARTICULAR FOCUS ON SCHO	
WORKFORCE TRAINING AS ESSENTIAL CONTRIBUTORS TO AMERICA'S	
PRODUCE CITIZENS, WORKERS AND PUBLIC LEADERS. ACCORDINGLY	
TO EDUCATE STATE POLICYMAKERS TO SOLVE PROBLEMS IN EDUCAT	-
THAT END, WE FOCUS ON STUDYING AND WRITING ABOUT THE MOST	-
STATE POLICIES, SPOTLIGHTING THE MOST EXCITING EXAMPLES O	
CIVIL-SOCIETY SECTOR EFFORTS TO DO JUST THAT IN K-12 EDUC	
IMPORTANTLY IN OUR VIEW, POLICYMAKERS NEED TO KNOW WHAT F	
ARE CURRENTLY AVAILABLE AND THAT THERE ARE CONCRETE EXAME	LES OF
SUCCESS.	
	* •
EXPENSES \$ 198,345. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 0.
	\$ 0.
LOBBYING	·
	·
LOBBYING	·
LOBBYING EXPENSES \$ 20,778. INCLUDING GRANTS OF \$ 0. REVENUE \$	0.
LOBBYING EXPENSES \$ 20,778. INCLUDING GRANTS OF \$ 0. REVENUE \$ FORM 990, PART VI, SECTION B, LINE 11B:	0. VIEWED BY R
LOBBYING EXPENSES \$ 20,778. INCLUDING GRANTS OF \$ 0. REVENUE \$ FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 WAS PREPARED BY THE EXTERNAL AUDITORS AND RE	0. VIEWED BY R
LOBBYING EXPENSES \$ 20,778. INCLUDING GRANTS OF \$ 0. REVENUE \$ FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 WAS PREPARED BY THE EXTERNAL AUDITORS AND RE STREET'S OPERATIONS DIRECTOR AND THE BOARD OF DIRECTORS F	0. VIEWED BY R
LOBBYING EXPENSES \$ 20,778. INCLUDING GRANTS OF \$ 0. REVENUE \$ FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 WAS PREPARED BY THE EXTERNAL AUDITORS AND RE STREET'S OPERATIONS DIRECTOR AND THE BOARD OF DIRECTORS F	0. VIEWED BY R
LOBBYING EXPENSES \$ 20,778. INCLUDING GRANTS OF \$ 0. REVENUE \$ FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 WAS PREPARED BY THE EXTERNAL AUDITORS AND RE STREET'S OPERATIONS DIRECTOR AND THE BOARD OF DIRECTORS F WITH THE IRS.	O. VIEWED BY R PRIOR TO FILING
LOBBYING EXPENSES \$ 20,778. INCLUDING GRANTS OF \$ 0. REVENUE \$ FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 WAS PREPARED BY THE EXTERNAL AUDITORS AND RE STREET'S OPERATIONS DIRECTOR AND THE BOARD OF DIRECTORS F WITH THE IRS. FORM 990, PART VI, SECTION B, LINE 12C:	O. VIEWED BY R PRIOR TO FILING
LOBBYING EXPENSES \$ 20,778. INCLUDING GRANTS OF \$ 0. REVENUE \$ FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 WAS PREPARED BY THE EXTERNAL AUDITORS AND RE STREET'S OPERATIONS DIRECTOR AND THE BOARD OF DIRECTORS F WITH THE IRS. FORM 990, PART VI, SECTION B, LINE 12C: OFFICERS, DIRECTORS AND ALL EMPLOYEES ARE REQUIRED TO ANN	0. VIEWED BY R RIOR TO FILING UALLY SIGN A F THE BOARD THAT
LOBBYING EXPENSES \$ 20,778. INCLUDING GRANTS OF \$ 0. REVENUE \$ FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 WAS PREPARED BY THE EXTERNAL AUDITORS AND RE STREET'S OPERATIONS DIRECTOR AND THE BOARD OF DIRECTORS F WITH THE IRS. FORM 990, PART VI, SECTION B, LINE 12C: OFFICERS, DIRECTORS AND ALL EMPLOYEES ARE REQUIRED TO ANN CONFLICT OF INTEREST POLICY STATEMENT. IT IS THE POLICY C	O. VIEWED BY R RIOR TO FILING UALLY SIGN A F THE BOARD THAT ANSACTION IS

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization R STREET INSTITUTE	Employer identification number 26-3477125
OR A DULY CONSTITUTED COMMITTEE THEREOF DETERMINES WHETHE	R A CONFLICT
EXISTS AND, IN THE CASE OF AN EXISTING CONFLICT, WHETHER	THE CONTEMPLATED
TRANSACTION MAY BE AUTHORIZED AS JUST, FAIR, AND REASONAB	LE TO R STREET.
THE DECISION OF THE BOARD OR A DULY CONSTITUTED COMMITTEE	THEREOF ON THESE
MATTERS RESTS IN ITS SOLE DISCRETION, AND ITS CONCERN MUS	T BE THE WELFARE
OF R STREET AND THE ADVANCEMENT OF ITS PURPOSE.	

FORM 990, PART VI, SECTION B, LINE 15A:

THE COMPENSATION OF THE PRESIDENT/CHAIRMAN IS SET BY THE COMPENSATION

COMMITTEE AFTER REVIEWING COMPARABILITY DATA AND IS DOCUMENTED. THE

COMPENSATION OF ALL OTHER EMPLOYEES IS EVALUATED AND SET BY THE

PRESIDENT/CHAIRMAN BASED ON COMPARABILITY DATA AND IS DOCUMENTED. THE LAST

SALARY REVIEW TOOK PLACE IN DECEMBER 2018.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST

POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

Schedule O (Form 990 or 990-EZ) (2018)