Form 990

** 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.

2022
Open to Public Inspection

Form 990 (2022)

Department of the Treasury Internal Revenue Service

232001 12-13-22

A F	A For the 2022 calendar year, or tax year beginning and ending										
Вс	heck if	C Name of organization		D Employer identifi	cation number						
X	Addre:	T									
	chang	Doing business as		26-34771	25						
	Initial return Final return	Number and street (or P.O. box if mail is not delivered to street address) Room, 1411 K STREET NW 900	/suite	E Telephone number (202)525							
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$ 13,380,594.							
	Amend	washington, DC 20005		H(a) is this a group re							
	Applic	F Name and address of principal officer: ELIAS ROTHENBERG-LEHRE	IR		? Yes X No						
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in							
1 1	ax-ex	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527	1	list. See instructions						
JV	Vebsit			H(c) Group exemptio							
		organization: X Corporation Trust Association Other L	Year (T T	A State of legal domicile: DC						
Pa	irt l	Summary									
a.	1	Briefly describe the organization's mission or most significant activities: SEE PAR!	r I	II, LINE 1.							
Governance											
rna	. –	Check this box if the organization discontinued its operations or disposed of			ets.						
ove	3	Number of voting members of the governing body (Part VI, line 1a)		3	9						
ر د		Number of independent voting members of the governing body (Part VI, line 1b)			9						
es		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			89						
viti	6	Total number of volunteers (estimate if necessary)		6	10						
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12			0.						
_	b	Net unrelated business taxable income from Form 990 T, Part I, line 11			0.						
				Prior Year	Current Year						
ē		Contributions and grants (Part VIII, line 1h)	<u> </u>	12,044,306.	13,315,801.						
Revenue		Program service revenue (Part VIII, line 2g)		0.	0.						
Zev.		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		133.	189.						
_	ı	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		34,453. 12,078,892.	64,604. 13,380,594.						
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)									
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		236,474.	246,878.						
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.						
ės		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	—	7,968,063.	9,799,406.						
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	\vdash	0.	0.						
뢌		Total fundraising expenses (Part IX, column (D), line 25) 260,166.		0.204.515	0.004.506						
-		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,324,515.							
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	-	10,529,052.	12,930,790.						
- v	19	Revenue less expenses. Subtract line 18 from line 12	l Pa	1,549,840.	449,804.						
ts o		Total assets (Cart V. Francis)	Dei	ginning of Current Year	End of Year						
Net Assets or	20 21	Total assets (Part X, line 16) Total liabilities (Part X, line 26)	\vdash	9,433,752.	10,132,891.						
log /	22	Net assets or fund balances. Subtract line 21 from line 20	-	534,774. 8,898,978.	784,109. 9,348,782.						
Pa	rt II	Signature Block		0,030,370.	9,340,102.						
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and si	atama	nte and to the heet of my	knowledge and helief it is						
		t, and complete. Declaration of preparer (other than officer) is based on all information of which pre			knowledge and belief, it is						
11 40,	COITEC	Gano complete. Decidi anon or preparer (onter than onicer) is based on an anormation or which pre	parer	nas any knowledge.							
Sign		Signature of officer	1	Date							
Her	_	ELIAS ROTHENBERG-LEHRER, PRESIDENT 休 🖟 🐍	-k!	~ II-1-2)						
	•	Type or print name and title		7	<u></u>						
		Print/Type preparer's name Preparer's signature		Date Check	PTIN						
Paid		RICHARD J. LOCASTRO, CPA Rectard for horast	<u>.</u> 1	0/27/2023 self-employ							
	arer	Firm's name GELMAN, ROSENBERG & FREEDMAN	<u>-0 0</u>		2-1392008						
	Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N		T.WIII O LIN							
	-	BETHESDA, MD 20814-2930		Phone no 30	1-951-9090						
May	the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No						

If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and

revenue, if any, for each program service reported. 1,922,361. including grants of \$ ____) (Expenses \$

CRIMINAL JUSTICE & CIVIL LIBERTIES: R STREET'S CRIMINAL JUSTICE AND CIVIL LIBERTIES POLICY PROGRAM WORKS ACROSS THE IDEOLOGICAL SPECTRUM ON PUBLIC POLICY IMPACTING ALMOST EVERY STAGE OF THE CRIMINAL JUSTICE SYSTEM: INCARCERATION, JUVENILE JUSTICE, POLICING, PRETRIAL, BAIL REFORM, REENTRY AND SENTENCING. OUR REFORMS ARE GROUNDED IN ENSURING PUBLIC SAFETY, DUE PROCESS, FISCAL RESPONSIBILITY AND INDIVIDUAL LIBERTY.

TECHNOLOGY AND INNOVATION: R STREET'S TECHNOLOGY AND INNOVATION POLICY PROGRAM SUPPORTS AMERICAN INNOVATION AND PUSHES BACK AGAINST REGULATORY IMPEDIMENTS TO ECONOMIC PROGRESS, INDIVIDUAL LIBERTY AND FREE SPEECH. THE TEAM'S WORK THIS YEAR INCLUDED DEFENDING AGAINST MISGUIDED ANTITRUST LAWS IN CONGRESS, THARTING ATTACKS ON CONTENT MODERATION AND SECTION 230 - FROM BOTH POLITICAL PARTIES - AS WELL AS OUTLINING THE FUTURE OF ARTIFICIAL INTELLIGENCE, BROADBAND DEPLOYMENT AND INTERNET GOVERNANCE IN THE UNITED STATES.

1,598,831. including grants of \$ 89,441.) (Revenue \$) (Expenses \$ **GOVERNANCE:** R STREET'S GOVERNANCE PROGRAMS AIMS TO ASSESS AND IMPROVE AMERICA'S SYSTEM OF SELF-GOVERNANCE, WITH A FOCUS ON CONGRESS AND OUR ELECTORAL SYSTEM. THIS YEAR THE GOVERNANCE TEAM'S WORK FOCUSED ON CONTINUED EFFORTS TO MODERNIZE THE LEGISLATIVE BRANCH, BROAD COALITION WORK AROUND IMPROVING OUR ELECTORAL SYSTEM AND DEFENDING ELECTION OFFICIALS AND VOTERS FROM VIOLENCE, REDUCING RAMPANT OVERSPENDING ON CAPITOL HILL, AND EDUCATING LAWMAKERS, STAFF AND THE PUBLIC ABOUT THEIR POWERS IN CONGRESS THROUGH WRITTEN WORK, BRIEFINGS AND PODCASTS LIKE POLITICS IN OUESTION.

4d Other program services (Describe on Schedule O.)

) (Expenses \$

6,002,655. including grants of \$ Total program service expenses

107,282.) (Revenue \$

11,274,008.

1,750,161. including grants of \$

Form 990 (2022)

Form 990 (2022) R STREET INS
Part IV Checklist of Required Schedules R STREET INSTITUTE

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		162	140
'		1	Х	
2	If "Yes," complete Schedule A	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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	١Ť		
•	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			\vdash
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	١Ť		
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space.	Ť		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			_==_
Ŭ	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	Ť		
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
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,	100		1
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D. Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	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			
	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			
	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. See instructions	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		<u> </u>
2 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
Ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			1
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21	X	

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Form	rt IV Checklist of Required Schedules (continued)	122	P	age 4
Га	CTA Checklist of Required Scriedules (continued)			r
00	Did the executation report more than \$5,000 of greate or other againstance to or for demantic individuals on	$\overline{}$	Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22		x
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	-22		 -
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
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 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):		J.(),	
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes,* complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? #			- V
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
0.4	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	20		X
22	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	_32_		
33		32		x
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34		34		x
35a	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		\vdash
-	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? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter ·0· if not applicable			12X
	Enter the number of Forms W-2G included on line 1a. Enter 0 if not applicable 1b		20	
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		113	
	(gambling) winnings to prize winners?	1c	X	
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14241027 745960 28560

Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements. 22 89 89 89 89 89 89 89 89 89 89 89 89 89	Form	990 (2022) R STREET INSTITUTE 26-3	47712	5	Page 5
2a Earler the number of employees reported on Form WS, Transmittal of Wage and Tax Statements, 2a 89 bit at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b LX S	Par	tV Statements Regarding Other IRS Filings and Tax Compliance (continued)			
tilled for the calendary year ending with or within the year covered by this return bit of all beats on its reported on time 2a, did the organization file all resigned disears employment tax returns? 3b D X 3c Did the organization have unrelated business gross income of \$1,000 or more during the year? 4c Did the organization have unrelated business gross income of \$1,000 or more during the year? 4d At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country guest is a bank account, sournies account, or other financial accountry? 4d At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountry. 5d Was the organization to foreign country. 5d Was the organization foreign country. 5d Was the organization are part to prohibited tax shelter transaction at any time during the tax year? 5d Was the organization have annual gross accepts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax educibles and celeptation and part of the organization solicit any contributions that were not tax educibles and celeptations? 5d If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not acceptated to the solicity of the organization solicity and contributions under section 170(c). 6d Bit the organization shall enany receive deductible contributions under section 170(c). 7d Organizations that may receive deductible contributions under section 170(c). 8d Bit "Yes," did the organization notify the donor of the value of the goods or services provided? 7d If "Yes," did the organization solicity and the property of the solicity organization shall enany receive deductible organization and partity for goods and services provided to the payor? 7d If "Yes," did the organization solicity or indirectly, to pay premiums on a perso				Yes	No
b If a feat one is reported on line 2a, did the organization file all required dedoral employment tax returns? a Did the organization have unretured business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No" to line 30, provide an explanation on Schedule 0 4a At any terms during the calendar year, did the organization have an interest its or a signature or other authority over, a sinnature or control in a foreign country (such as a share account, securities account, or other francial account)? 4a X b If "Yes," enter the name of the foreign country (such as a share account, securities account, or other francial accounts? 5a Was the organization a party to a prohibited tax shaller transaction at any time during the tax year? 5b Was the organization a party to a prohibited tax shaller transaction at any time during the tax year? 5c Was the organization and party to a prohibited tax shaller transaction at any time during the tax year? 5c Was the organization and organization file Form 8868.7 5c Was the organization and party to a prohibited tax shaller transaction at any time during the tax year? 5c Was the organization shall was even not tax deductible as charitable contributions? 5c Was the comparization and the organization file Form 8868.7 6c Was the was the contributions or gifts were not tax deductible? 6c Was the organization and provide the contributions under section 170(c). a Did the organization shall may receive deductible contributions under section 170(c). b If "Yes," cite the contribution of account of the value of the goods or uniness provided to like payer? 7a X 4 "Yes," checkate the number of Forms 8582 filed during the year payer minutes or uniness provided? 7b Did the organization exceeved and organization shall be adjusted to the organization file form 8898 as required? 7b Did the organization exceeved and contribution or during the year was provided to like form 8898 as required? 7c X 7d Was the organization excee	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4b If "Yes", his it filed a Form 900 for this year? If "No" to law 2b, provide an explanation or Schodule 0 4c At any terms during the calendar year, did the organization have an interest in or a signature or other authority over, a financial account? See instructions for filing requirements for FinCRN Form 114. Report of Foreign Bank and Financial Accounts (FBAR). 5c Was the organization part of prohibited as whether transaction at any time during the tax year? 5c Was the organization part of prohibited tas whether transaction at any time during the tax year? 5c Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax eductibles and charitable contributions? 6c Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax eductibles and charitable contributions? 6d If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization sellow any part in expect of 57 make part by a comparization part of the payer? 7 If "Yes," did the organization motify the donor of the value of the goods or services provided? 7 Did the organization sellow any part in expect of 57 make part by a comparization sellow any part in expect of 57 make part by a comparization sellow any part in expect of 57 make part by a comparization sellow any forms of 500 makes part by a comparization when the payer of 50 makes part by the sponsoring organization organization organization organization and part by the sponsoring organization and part by any part by the sponsoring organization makes a distribution to a donor, donor advised fund maintained by the sponsoring organi		filed for the calendar year ending with or within the year covered by this return	89		
b If "Yes," has it flietd a Form 990-T for this year? *If ye's to lies 3b, provide an explanation on Schedule O 4. At any time during the calandary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 5. If "Yes," either the name of the foreign country See instructions for filling requirements for FincEN Form 114, Report of Foreign Burk and Financial Accounts (FBAR). 5. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5. B. X. 5. If "Yes" to line Sa or 5b, did the organization file Form 88961? 6. Does the organization and round gross acception that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions under section 170(c). 8. If "Yes" of the organization include with every solicitation are representations that the organization include with every solicitation are representations that may receive deductible contributions under section 170(c). 8. If "Yes", indicate the number of Forms 8282 filed during the year 9. If "Yes", indicate the number of Forms 8282 filed during the year 19. If "Yes", indicate the number of Forms 8282 filed during the year 19. If the organization received an contribution of qualified intellectual property, did the organization file Form 8282? 19. If the organization received an contribution of qualified intellectual property, did the organization file Form 8282 filed during the year 19. If the organization received an contribution of a contribution of a contribution of the sponsoring organization make any taxability, to pay premiums on a personal benefit contract? 70. X. Y. Y. A. Did the organization in seclar of the payment o	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2t	X	
4a A any time during the calendary year, dot the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts? 5b If "Yes" cheet the name of the foreign country 5ee instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial accounts (FBAR). 5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5c If "Yes" to the 5a of 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6c If "Yes" to the 5a of 5b, did the organization the fire misses. 5c If "Yes" to the 5a of 5b, did the organization the fire misses. 5c If "Yes," did the organization network event that such contributions are very expensive deductions are contributed to the such accounts of the organization schedule approximation schedule appro	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	1	X
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If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	16	be the committee of a selection of the size of the selection of the select	10	6	X
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.		-	2000		
that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	15			
If "Yes," complete Form 6069.	.,		A L	,	
					, (1, 1)
	23200	· · · · ·	Fo	rm 99	0 (2022)

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

	Obsel: 16 Osberilate O anadalina a research to a state this De A.M.			X
200	Check if Schedule O contains a response or note to any line in this Part VI tion A. Governing Body and Management			Α
Sec	tion A. Governing body and Management		Vaa	Nia
4-	Enter the number of voting members of the governing body at the end of the tax year.		Yes	No
ıa	and the field of t	3.74		
	If there are material differences in voting rights among members of the governing body, or if the governing		100	
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0. Enter the number of voting members included on line 1a, above, who are independent 1b 9).VA_	
b				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	0	nue:	Х
•	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision	2		
3		ا م		Х
	of officers, directors, trustees, or key employees to a management company or other person?	3 4	-	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5	-	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			X
6	Did the organization have members or stockholders?	6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			Х
	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a_		
D		74		х
_	persons other than the governing body?	7b		_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	0	Х	
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Δ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			х
900	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Δ_
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		.,	
10-	Did the everylystics have local shorters bysoches or effiliates?	400	Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	406		
44.	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a		11a	Λ	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	40-	Х	
12a		12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Λ	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40-	X	
40	on 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	Λ	
15	Did the process for determining compensation of the following persons include a review and approval by independent		8	
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45.	X	
а	The organization's CEO, Executive Director, or top management official	15a	Δ,	Х
D	Other officers or key employees of the organization	15b		
4.0	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40		v
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	401		10000
600	exempt status with respect to such arrangements? tion C. Disclosure	16b		<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O			15.5.
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3))	only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
4.5	X Own website X Another's website X Upon request Other (explain on Schedule O)	en on		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	aal	
4.0	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	HAMMAD KAMAL - (202)525-5717			
	1411 K STREET NW SUITE 900, WASHINGTON, DC 20005			

Form 990 (2022)

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

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

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

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

 See the instructions for the order in which to list the persons above.

Check this box if neither the organization n	or any related o	orga	niza	tion	com	npen	sate	ed any current officer, di	rector, or trustee.	
(A)	(B) (C)							(D)	(E)	(F)
Name and title	Average	l tdo		Posi		than c	апе	Reportable	Reportable	Estimated
	hours per	box.	unles	ss per	son i	s both	an	compensation	compensation	amount of
	week	\vdash	er an	a a a	recto	r/trust	(66)	from	from related	other
	(list any	irecto						the organization	organizations (W-2/1099-MISC/	compensation from the
	hours for related	e or d	ee			sated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	ai trus		3,6	mbeu		1099·NEC)	10001120)	and related
	below	ndividual trustee or director	nstitutional trustee	iii	Key employee	est co oyee	<u>ت</u>			organizations
	line)	Indiv	Instit	ОПиег	Key 6	Highest compensated employee	Fолтег			
(1) ELIAS ROTHENBERG-LEHRER	40.00									
PRESIDENT				X				300,699.	0.	27,382.
(2) ERICA SCHODER	40.00					1				
EXECUTIVE DIRECTOR				X			_	246,793.	0.	13,394.
(3) DEVIN HARTMAN	40.00									
DIRECTOR, ENERGY		_			<u> </u>	X		197,422.	0.	16,189.
(4) JONATHAN BYDLAK	40.00							400 454		
DIRECTOR, GOVERNANCE	1000			_		Х	_	190,451.	0.	16,114.
(5) MAZEN SALEH	40.00							104 140		11 005
DIRECTOR, HARM REDUCTION	40.00	<u> </u>	\vdash		<u> </u>	X	H	194,140.	0.	11,225.
(6) JILLIAN SNIDER	40.00					3,7		100 000	_	6 960
DIRECTOR, CRIMINAL JUSTICE	40.00	⊢			-	X	-	192,000.	0.	6,860.
(7) WAYNE BROUGH	40.00	-				7.7		100 000		3 060
DIRECTOR, TECHNOLOGY	0.50				\vdash	X	⊢	190,000.	0.	3,968.
(8) SUSANNA DOKUPIL	0.50	١,,		,,						,
BOARD CHAIRWOMAN	2 50	X	H	X	H		⊢	0.	0.	0.
(9) ROBERT WATKINS	0.50	ļ.,								
BOARD MEMBER	0 50	X	\vdash		⊢	┢	⊢	0.	0.	0.
(10) STEPHEN WEINSTEIN	0.50	x					İ	0.	0.	<u> </u>
BOARD MEMBER (11) RYAN CALO	0.50	₽		-	⊢	├	⊢	0.	0.	0.
BOARD MEMBER	0.50	x						0.	0.	0.
(12) PABLO CARRILLO	0.50	Α.	\vdash	\vdash	\vdash	\vdash	\vdash	0.	0.	- 0.
BOARD MEMBER	0.50	X						0.	0.	0
(13) MARLA DEAN	0.50	1						- 0.		0.
BOARD MEMBER	0.30	x						0.	0.	0.
(14) JOHN GRAHAM	0.50	 				\vdash	\vdash		·	
BOARD MEMBER	0.00	\mathbf{x}	1					0.	0.	0.
(15) ELIZABETH FRAZEE	0.50		\vdash	\vdash	\vdash		╁			
BOARD MEMBER		$ \mathbf{x} $				1		0.	0.	0.
(16) ARTUR DAVIS	0.50	<u> </u>			 	\top	,			
BOARD MEMBER		x						0.	0.	0.
(17) AMANDA NGUYEN	0.50						\vdash			
BOARD MEMBER, THROUGH 12/2022		1x				L_		0.	0.	0.
										- 000

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Form 990 (2022)

Part VII Section A Officers Directors Trust	V F				1.112		4.0		- (): "				9-
Occupit A. Officero, Directors, Trace		юуе	ees,			gnes	t G			Т		(E)	
(A)	(B)			رر Posi	D) ition	,		(D)	(E)			(F)	
Name and title	Average hours per		not ch	heck i	more	than o		Reportable	Reportable			mated	
	week					s both		compensation	compensation from related	'		unt o	Т
	(list any							from the	organizations			ther	00
	hours for	lirect				_		organization	(W-2/1099-MISC		compe	n the	
	related	0 JO 9	<u>ಕ್ಷ</u>			satec		(W·2/1099·MISC/	1099·NEC)	″	orgar		
	organizations	uste	<u>s</u>		8	둳		1099-NEC)	1033-1120)		_	relate	
	below	lual tr	trona		ngloy	st cor		10001120)			organ		
	line)	ndividual trustee or director	nstitutional trustee	Officer	Кеу етрюуее	Highest compensated employee	0rme				-		
		-54	H	٣	Ť	1=0			······	\dashv			
										- 1			
		Н	H			\vdash				\dashv			
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			Н	<u> </u>		-	H						
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		ļ											
]					<u> </u>		4 544 505		\rightarrow		4.0	
1b Subtotal								1,511,505.		0.	95	,13	
c Total from continuation sheets to Part VI	, Section A							0.		0.			0.
d Total (add lines 1b and 1c)					ost.			1,511,505.		0.	95	,13	2.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d at	oove	e) wh	o re	ceived more than \$100,	000 of reportable				
compensation from the organization													36
												es	No
3 Did the organization list any former officer,	director, truste	ee. k	cev e	ame	love	e. or	hia	hest compensated emp	lovee on	Π			
line 1a? If "Yes," complete Schedule J for s							-		_	0.0	3		X
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150									-		4	х	
											7	-	-
	•				-			-			-	- 1	X
rendered to the organization? If "Yes," com	piete Scheduli	9 J I	<u>Or St</u>	ich	pers	son		***************************************			5		Α
Section B. Independent Contractors								. 10 1 41 4	100.000 (-			
Complete this table for your five highest co	•									ensati	ion fron	n	
the organization. Report compensation for	the calendar ye	ear e	endir	ng w	/ith (or wi	thin	the organization's tax y	ear.				
(A)				_				(B)		_	(C)		
Name and business	address	N	INC	₫				Description of s	services		ompens	sation	
							_						
									1				
-							\neg						
													
- Table with the transfer of the second		_,			41	12			and the i				
2 Total number of independent contractors (i	-	ni ro	mite	d to		_	sted	above) who received m	ore than				
\$100,000 of compensation from the organi	zation					0			- 1				

Form **990** (2022)

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Form 990 (2022) R STREET INSTITUTE
Part VIII Statement of Revenue

			Check if Schedule O contains a response or no	te to any line	in this Part VIII			<u> </u>
					(A)	(B)	(C)	(D)
				į	Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
						lanction revenue	business revenue	sections 512 - 514
92 97	1 :	a	Federated campaigns 1a					
in a			Membership dues 1b					
Contributions, Gifts, Grants and Other Similar Amounts			Fundraising events 1c	~				
E A			Related organizations 1d		1			
E,S			Government grants (contributions) 1e					
20.00			All other contributions, gifts, grants, and					
Eğ				,315,801.				
質な			Noncash contributions included in lines 1a-1f				Delice II	
200		_	Total. Add lines 1a-1f		13,315,801.			
	-			siness Code		0 - 118		
a	2 :	а						
ξ		b						
8 8		c						
ES		ď						
Program Service Revenue		e						
Pr			All other program service revenue					
			Total. Add lines 2a-2f					
	3		Investment income (including dividends, interest, a					
l	-		other similar amounts)	I	189,			189,
1	4		Income from investment of tax-exempt bond proce-					
	5		Royalties					
) Personal		- ' '		() ()
	6	а	Gross rents 6a					
	- 1	b	Less: rental expenses 6b					
			Rental income or (loss) 6c					
			Net rental income or (loss)					
				(ii) Other	0.07=0	X. S. HILL	DWW III	
			assets other than inventory 7a					
			Less: cost or other basis					
e			and sales expenses 7b					
ju j	,	С	Gain or (loss) 7c					
<u>چ</u>			Net gain or (loss)					
ther Revenue			Gross income from fundraising events (not			Typiù I. em III		
盲			including \$ of				mix v det	
_ 1			contributions reported on line 1c). See					
			Part IV, line 18					
		b	Less: direct expenses 8b					
			Net income or (loss) from fundraising events					
			Gross income from gaming activities. See					
			Part IV, line 19		KON, N. T.	Description Application		
		b	Less: direct expenses 9b					
			Net income or (loss) from gaming activities					
- 1	10	а	Gross sales of inventory, less returns		THE RESERVE	(0.1		11 11
			and allowances 10a					
		b	Less: cost of goods sold 10b		A			
			N1-4 :					
			***	siness Code				THE WILLIAM TO
ous.	11	а	MISCELLANEOUS 90	00099	53,349.			53,349.
Miscellaneous Revenue		b	CREDIT CARD REWARDS 90	00099	11,255.			11,255.
eve		С						
Aisc B		d	All other revenue					
2			Total, Add lines 11a-11d		64,604.			
	12		Total revenue. See instructions		13,380,594.	0.	0.	64,793.
								- 000

Form 990 (2022) R STREET INSTITUTE
Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon			piete column (A).	
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	246,878.	246,878.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	500 260	262 465	202 005	22 000
	trustees, and key employees	588,268.	262,465.	292,995.	32,808.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	7,770,804.	7,211,132.	389,481.	170,191.
7	Other salaries and wages	1,110,004.	1,411,134.	303,401.	110,131.
8	Pension plan accruals and contributions (include	251,008.	227,643.	17,801.	5,564.
_	section 401(k) and 403(b) employer contributions)	548,847.	380,897.	159,282.	8,668.
9 10	Other employee benefits Payroll taxes	640,479.	565,383.	60,565.	14,531.
11	Fees for services (nonemployees):	040,475	303,3031	00,3031	14,0011
	· · · · · · · · · · · · · · · · · · ·				
a b	Management	49,517.	33,210.	15,468.	839.
c	Legal Accounting	68,875.	46,193.	21,515.	1,167.
d	Lobbying	00,070			
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
9	Other. (If line 11g amount exceeds 10% of line 25,				
3	column (A), amount, list line 11g expenses on Sch 0.)	972,114.	844,628.	120,929.	6,557.
12	Advertising and promotion	24,057.	23,044.	961.	52.
13	Office expenses	85,717.	62,366.	21,496.	1,855.
14	Information technology	7,021.	7,010.	10.	1.
15	Royalties				
16	Occupancy	451,187.	302,604.	140,941.	7,642.
17	Travel	443,209.	418,806.	22,058.	2,345.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	288,683.	272,213.	15,100.	1,370.
20	Interest				
21	Payments to affiliates		10.015		
22	Depreciation, depletion, and amortization	16,322.	10,947.	5,098.	277.
23	Insurance	42,586.	28,562.	13,303.	721.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	TRAINING & PROF. DEV'L	212,804.	148,288.	61,029.	3,487.
b	BOOKS & SUBSCRIPTIONS	171,988.	143,050.	27,450.	1,488.
c	PAYROLL FEES	21,775.	14,604.	6,802.	369.
d	DUES	19,083.	17,464.	1,536.	83.
	All other expenses	9,568.	6,621.	2,796.	151.
25	Total functional expenses. Add lines 1 through 24e	12,930,790.		1,396,616.	260,166.
26	Joint costs. Complete this line only if the organization				
	reported in column (8) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)			,	

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Form 990 (2022)
Part X | Balance Sheet

Par	tΧ	Balance Sheet			<u></u>		
		Check if Schedule O contains a response or not	e to any lin	e in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing		and the state of t	6,337,881.	1	5,199,142
	2	Savings and temporary cash investments			1,332,228.	2	1,332,417
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			1,417,754.	4	3,042,132
	5	Loans and other receivables from any current or	former off	icer, director,			
		trustee, key employee, creator or founder, subst	tantial cont	ributor, or 35%			
1		controlled entity or family member of any of the	se persons			5	
Assets	6	Loans and other receivables from other disquali	fied person	s (as defined	THE RESERVE		
		under section 4958(f)(1)), and persons described		6			
	7	Notes and loans receivable, net		7			
SSe	8	Inventories for sale or use				8	
₹	9	Prepaid expenses and deferred charges			162,688.	9	185,281
	10a	Land, buildings, and equipment: cost or other				118	
		basis. Complete Part VI of Schedule D		97,175.			
	b	Less: accumulated depreciation		89,470.	144,512.	10c	7,705
	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		20 600	14	266 214	
	15	Other assets. See Part IV, line 11			38,689.	15	366,214
_	16	Total assets. Add lines 1 through 15 (must equ			9,433,752.	16	10,132,891
	17	Accounts payable and accrued expenses			306,707.	17	402,368
	18	Grants payable		18			
i	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete		2022-020116	THE RESERVE TO THE RE	21	
es	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subs				00	
ē		controlled entity or family member of any of the Secured mortgages and notes payable to unrela		22			
	23	Unsecured notes and loans payable to unrelate				24	
	24 25	Other liabilities (including federal income tax, pa				24	
	25	parties, and other liabilities not included on line	•				
					228,067.	25	381,741
	26	Total liabilities Add lines 17 through 25			534,774.	26	784,109
	20	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, che	ck here	X			
S		and complete lines 27, 28, 32, and 33.					
nc	27	Net assets without donor restrictions			6,317,401.	27	5,474,787
396	28	Net assets with donor restrictions			2,581,577.	28	3,873,995
DG.		Organizations that do not follow FASB ASC 9					
Ē		and complete lines 29 through 33.	,				
Ö	29	Capital stock or trust principal, or current funds		0.022.0		29	
ets	30	Paid-in or capital surplus, or land, building, or e				30	
ASS	31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances	32				8,898,978.	32	9,348,782
~	33	Total liabilities and net assets/fund balances			9,433,752.	33	10,132,891
							Form 990 (202

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Form 990 (2022)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of	lame of the organization Employer identification number											
		REET INSTIT					2	6-3477125				
Part T	Reason for Public C	harity Status. (All organizations must co	mplete th	is part.) Se	ee instruction	S.					
The orga	nization is not a private founda	ation because it is: (F	or lines 1 through 12, ch	eck only o	one box.)							
1 _	A church, convention of chu	urches, or association	n of churches described	in section	n 170(b)(1)(A)(i).						
2 🗀	A school described in secti-	on 170(b)(1)(A)(ii). (A	Attach Schedule E (Form	990).)								
3	A hospital or a cooperative				(b)(1)(A)(iii	i).						
4	A medical research organiza					•	l(iii). Enter t	the hospital's name.				
	city, and state:		,				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
5	An organization operated fo	r the benefit of a coll	lege or university owned	or operate	ed by a go	vernmental u	nit describe	ed in				
	section 170(b)(1)(A)(iv). (C				,-9-							
6	A federal, state, or local gov		ental unit described in	ection 17	O(b)(4)(A)((v)						
7 X		•					e general n	ublic described in				
,	section 170(b)(1)(A)(vi). (Co	•	mar part of its support in	an a gove	THI TOTAL C	and or nom a	o gonorai p	dono doscribed in				
8	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)											
9	An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college											
9												
	or university or a non-land-g	rant college or agrict	ulture (see instructions). I	ziirei iile i	iarrie, city,	, and state of	me conege	UI				
40 [university:	B	N 00 1/00/ -f in					1				
10	An organization that normal											
	activities related to its exem		·									
	income and unrelated busin		(less section 5 i i tax) fro	n busines	ses acquir	rea by the org	anization a	πer June 30, 1975.				
	See section 509(a)(2). (Cor											
11 -	An organization organized a											
12	An organization organized a		•	•			•	•				
	more publicly supported org		200					heck the box on				
Г	lines 12a through 12d that o	911	1.00	30.2			-					
a L	Type I. A supporting orga		· // // // // // // // // // // // // //	4000.00	-			-				
	the supported organization			majority o	f the direc	tors or truste	es of the su	pporting				
_	organization. You must c	- 24										
b L	Type II. A supporting orga	100				-		-				
	control or management of			me perso	ns that coi	ntrol or mana	ge the supp	ported				
	organization(s). You mus											
c L	Type III functionally inte	- 0,					ly integrate	d with,				
_	its supported organization	. 331	·									
d L	Type III non-functionally	integrated. A supp	orting organization opera	ated in cor	nnection w	ith its suppo	ted organiz	ation(s)				
	that is not functionally int	egrated. The organiz	ation generally must sati	sfy a distri	ibution rec	quirement and	an attentiv	reness				
_	requirement (see instructi		- ·									
e [Check this box if the orga	anization received a v	written determination from	n the IRS	that it is a	Type I, Type	II, Type III					
	functionally integrated, or	Type III non-function	nally integrated supportir	ng organiz	ation.							
	nter the number of supported o	•										
g Pr	ovide the following information			find to the near	noization listed	Lana						
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	ing document?	(v) Amount o support (see i		(vi) Amount of other support (see instructions)				
	Organización		above (see instructions))	Yes	No	support (see a	istructions)	support (see instructions)				
					ļ							
-												
		·										
						1						

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

	ialis to quality under the tests	s listed below, pleas	se complete Part I				
Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not			ŀ			
	include any "unusual grants.")	10548402.	8721568.	12649014.	12044306.	13315801.	57279091.
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	10548402.	8721568.	12649014.	12044306.	13315801.	57279091.
	The portion of total contributions					1.11.22	
	by each person (other than a			V WILL			1
	governmental unit or publicly						
	supported organization) included					1-1-1-1-1	
	on line 1 that exceeds 2% of the				HIX II I'V		
	amount shown on line 11.	1111 1111 1111					
	column (f)						18590062.
6	Public support. Subtract line 5 from line 4.					New York	38689029.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	10548402.	8721568.	12649014.	12044306.	13315801.	57279091.
	Gross income from interest,						
-	dividends, payments received on			}			
	securities loans, rents, royalties,						
	and income from similar sources	657.	1,589.	322.	133.	189.	2,890.
9	Net income from unrelated business		_,			1	
-	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain					 	
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	37,031.	42,708.	25,183.	34,453.	64.604	203,979.
44	Total support. Add lines 7 through 10	37,031.	-2,700.	27,103.	3-,-33.	04,004.	57485960.
	Gross receipts from related activities.	eto (eso instructio	ne)			12	D1500001
		3		fourth or lifth tax			
13	First 5 years. If the Form 990 is for the	-	si, second, triifd,	rourin, or min tax	year as a section 5	0 1(C)(3)	[]
Sa	organization, check this box and stoction C. Computation of Publ		centage				
				Aaluma (8)		-44-	67.30 %
	Public support percentage for 2022 (-			14	66.66
	Public support percentage from 202					15	
16a	33 1/3% support test - 2022. If the						
	stop here. The organization qualifies						
b	33 1/3% support test - 2021. If the						
	and stop here. The organization qua						
17a	10% -facts-and-circumstances tes	t - 2022. If the org	anization did not	check a box on lin	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fac-			=	•	VI how the organi	zation
	meets the facts-and-circumstances to	est. The organizatio	on qualifies as a pu	ublicly supported o	organization		
k	10% -facts-and-circumstances tes	t - 2021. If the org	anization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets t	the facts-and-circum	nstances test, che	eck this box and s	top here. Explain	in Part VI how the	-
	organization meets the facts and circ	cumstances test. Th	ne organization qu	alifies as a publicly	y supported organi	zation	
18	Private foundation. If the organization	on did not check a	box on line 13, 16	6a, 16b, 17a, or 17	b, check this box a	ınd see instruction	is
						Schedule A	(Form 990) 2022

Schedule A (Form 990) 2022 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 fa	ails to
and the state of t	

Ser	qualify under the tests listed be ction A. Public Support	iow, please comp	nete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and	(a) 2010	(1) 2019	(6) 2020	(u) 2021	(6) 2022	(i) rotal
'	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 Gross receipts from activities that					1	<u></u>
3	' I				1		
	are not an unrelated trade or bus-						
	iness under section 513				1		
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		1				
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that					1	
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)					max and	
	ction B. Total Support				-l		
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	(4) 2010	(0) 2010	(0) 2020	10/2021	10) 2022	(i) rotal
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
					1		
E.	Unrelated business taxable income				1		
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975			-	+	1	 -
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,		1				
	whether or not the business is						
	regularly carried on		ļ				
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.)			<u> </u>	1		
14	First 5 years. If the Form 990 is for the	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	i01(c)(3) organizatio	on,
			F1111111111111111111111111111111111111				/ (1)
Se	ction C. Computation of Public	Support Per	rcentage				
15	Public support percentage for 2022 (li	ne 8, column (f), c	divided by line 13,	column (f))		15	%
16	Public support percentage from 2021	Schedule A, Part	III, line 15			16	%
	ction D. Computation of Inves						
17	Investment income percentage for 20	22 (line 10c, colu	mn (f), divided by li	ine 13, column (f))		17	%
	Investment income percentage from 2					18	%
	a 33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box an						
	33 1/3% support tests - 2021. If the		=				
		_					
00	line 18 is not more than 33 1/3%, chec		105				
	Private foundation. If the organization	1 dia not check a	pox on line 14, 19	a, or 190, check t	riis dox and see ins		(F 000) 0000
2320	23 12-09-22					Schedule A	(Form 990) 2022

Yes No

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

 If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes." answer line 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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3b			
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Pa	rt IV Supporting Organizations (continued)		TV	Al-
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
11	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and	1 33		
a	11c below, the governing body of a supported organization?	11a	-	
h	A family member of a person described on line 11a above?	11b	\Box	
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	710		
Ī	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
	· ·		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	Y MA		7 11
	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,			
Sac	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
360	tion c. Type if Supporting Organizations		T.,	L
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		Yes	No
'	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			lu .
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			5
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	1		
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1 a b	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see		n <u>s).</u>	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	0.000		
	those supported organizations and explain how these activities directly furthered their exempt purposes,			11
	how the organization was responsive to those supported organizations, and how the organization determined		2111	
	that these activities constituted substantially all of its activities.	2a		
b			11/4	
	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	O.L		
^	these activities but for the organization's involvement.	_2b_	100000	
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а		За	-	
l-	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI. Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
i.	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	-	
				

Schedule A (Form 990) 2022

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1	Type III Non-Functionally Integrated 509(a)(3) Supportion Check here if the organization satisfied the Integral Part Test as a qualifying All other Type III non-functionally integrated supporting organizations must	ng trust on N	lov. 20, 1970 (<i>explain in</i> l	Part VI). See instruction
ect	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	·	
ect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	1 6 1	ALLEY SELECTION	
	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	10		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
ect	tion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		

Schedule A (Form 990) 2022

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported 2 organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 Amounts paid to acquire exempt-use assets 4 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 Distributable amount for 2022 from Section C, line 6 9 9 Line 8 amount divided by line 9 amount 10 (i) (ii) (iii) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2022 Amount for 2022 Distributable amount for 2022 from Section C, line 6 2 Underdistributions, if any, for years prior to 2022 (reasonable cause required · explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2022 a From 2017 **b** From 2018 c From 2019 d From 2020 e From 2021 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2022 distributable amount i Carryover from 2017 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2022 from Section D, line 7: a Applied to underdistributions of prior years b Applied to 2022 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. 6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2023. Add lines 3j 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020 d Excess from 2021

Schedule A (Form 990) 2022

e Excess from 2022

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2022

Name of the organization Employer identification number R STREET INSTITUTE 26-3477125 Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 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), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990). LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990) (2022)

Employer identification number

R	STREET	INST	ITUTE
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26-3477125

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$525,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$295,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$500,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ 440,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>744,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ <u>675,000.</u>	Person X Payroll

Employer identification number

R STREET INSTITUTE

26-3477125

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$810,634.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ 2,000,000.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$\$	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
10	Name, address, and Ele 74	\$ 375,000.	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
11		\$ <u>1,600,000</u> .	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 Oncash Complete Part II for noncash contributions.)

Employer identification number

R STREET INSTITUTE

26-3477125

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional 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
	Wed Manual allow White	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		}	

Employer identification number

R STRE	EET INSTITUTE			26-3477125
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) completing Part III. enter the total of exclusively religious. ct Use duplicate copies of Part III if additional s	through (e) and the following line entry. Fo paritable, etc., contributions of \$1,000 or less for	r organizations	at total more than \$1,000 for the year
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
			-	,,,,,,
-		(e) Transfer of gift	-	
-	Transferee's name, address, an	od ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
ŀ		(e) Transfer of gift		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
	<u> </u>	(e) Transfer of gift	1	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	nsferor to transferee
				000000000000000000000000000000000000000
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of gift		
ļ	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	nsferor to transferee

223454 11-15-22

SCHEDULE C

(Form 990)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

•	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.			
-	ne of organization	•		En	ployer identification number
	R STREE	T INSTITUTE			26-3477125
Pa	irt I-A Complete if the org	anization is exempt und	er section 501(c)	or is a section 527 (organization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campain	ures			\$
Pa	art I-B Complete if the org	anization is exempt und	er section 501(c)(3).	
2 3 4a b	If the organization incurred a section Was a correction made? If "Yes," describe in Part IV. If "Complete if the org	incurred by organization manage n 4955 tax, did it file Form 4720 anization is exempt und	ers under section 4955 for this year? er section 501(c),	except section 501	Yes No Yes No (c)(3).
3	Enter the amount directly expended Enter the amount of the filing organ exempt function activities Total exempt function expenditures line 17b Did the filing organization file Form Enter the names, addresses and en made payments. For each organization tributions received that were propolitical action committee (PAC). If	. Add lines 1 and 2. Enter here a 1120-POL for this year? Inployer identification number (Elition listed, enter the amount pain party and directly delivered to a 1221-1221.	her organizations for seand on Form 1120-POL, N) of all section 527 pod from the filing organiza separate political organizate	ection 527	\$ Yes No ich the filing organization the amount of political
_	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-	contributions received and
_					

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

Schedule C (Form 990) 2022

LHA

232041 11-08-22

655,542. 640,811. 676,453. 796,540. 2,769,346. 2a Lobbying nontaxable amount b Lobbying ceiling amount 4,154,019. (150% of line 2a, column(e)) 16,013. 25,756. 119,299. 42,138. 35,392. c Total lobbying expenditures 160,203. 169,113. 163,886. 199,135. 692,337. d Grassroots nontaxable amount

Schedule C (Form 990) 2022

1,038,506.

e Grassroots ceiling amount

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

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)).

r each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a))	(b)
the lobbying activity.	Yes	No	Amo	unt
During the year, did the filing organization attempt to influence foreign, national, state, or	Transition in			
local legislation, including any attempt to influence public opinion on a legislative matter			C 1	
or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?	W. 1			
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?	<i>(</i>)			
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
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? art III-A Complete if the organization is exempt under section 501(c)(4), sec) or noc	tion	
501(c)(6).	11011 50 1(0)(5	y, or sec	HOH	
00 1(0)(0)		-	Yes	N
Were substantially all (90% or more) dues received nondeductible by members?		1		
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere	n the prior year? tion 501(c)(5	2 3), or sec		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), sec	n the prior year? tion 501(c)(5 ed "No" OR (), or sec b) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B. Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures).	n the prior year? tion 501(c)(5 ed "No" OR (), or sec b) Part I		3, is
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Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polymers for which the section 527(f) tax was paid). Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditures next year? Taxable amount of lobbying and political expenditures. See instructions art IV Supplemental Information ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground or the polymer in the p	n the prior year? tion 501(c)(5 ed "No" OR (2 3 3), or sec b) Part I	II-A, line	3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polymers for which the section 527(f) tax was paid). Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditures next year? Taxable amount of lobbying and political expenditures. See instructions art IV Supplemental Information ovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground or the polymer in the p	n the prior year? tion 501(c)(5 ed "No" OR (2 3 3), or sec b) Part I	II-A, line	3, is
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

Employer identification number

R STREET INSTITUTE 26-3477125 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year _____ 1 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

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

a Revenue included on Form 990, Part VIII, line 1

232051 09-01-22

b Assets included in Form 990, Part X

Schedule D (Form 990) 2022

Sche	dule D (Form 990) 2022 R STREE'	T INSTITUT	2			26-34	77125	Page 2
Par	t III Organizations Maintaining C						(continue	ed)
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that make	significan	t use of its		
	collection items (check all that apply):							
а	Public exhibition	c		change program				
þ	Scholarly research	€	Other					
C	Preservation for future generations							
4	Provide a description of the organization's co		-	•		ose in Part	XIII.	
5	During the year, did the organization solicit o				lar assets	_		_
	to be sold to raise funds rather than to be ma						Yes	No_
Par	t IV Escrow and Custodial Arran		ete if the organizati	on answered "Yes"	on Form 99	0, Part IV,	ine 9, or	
	reported an amount on Form 990, Par							
1a	Is the organization an agent, trustee, custodi		•				7	
	on Form 990, Part X?						Yes	∟ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:					
							Amount	
C	Beginning balance							
d	Additions during the year							
е	Distributions during the year							
f	Ending balance						-	
	Did the organization include an amount on Fe				777		Yes	No
	If "Yes," explain the arrangement in Part XIII.						***************************************	
Par	rt V Endowment Funds. Complete		1					
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three	e years back	(e) Four y	ears back
1a	Beginning of year balance							
b	Contributions							
C	Net investment earnings, gains, and losses		<u> </u>					
d	Grants or scholarships							
e	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the curr		e (line 1g, column (a)) held as				
а	Board designated or quasi-endowment		%					
b	Permanent endowment	%						
c	Term endowment	%						
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.						
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	and administered for	the			
	organization by:						Y	es No
	(i) Unrelated organizations						3a(i)	
	(ii) Related organizations						3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza	itions listed as requi	red on Schedule R?				3b	
4	Describe in Part XIII the intended uses of the		wment funds.	10 Mary - Thoday Bicarrection	223342231122		-	
Pa	rt VI Land, Buildings, and Equipm							
	Complete if the organization answere	d "Yes" on Form 99	0, Part IV, line 11a.	See Form 990, Part	X, line 10.			
	Description of property	(a) Cost or o	other (b) Co	st or other (c) Accumula	ated	(d) Book	value
		basis (investi	ment) basi	s (other)	depreciation	on		
1a	Land	111						
	Buildings							
С	Leasehold improvements							
d	Equipment			35,650.	31,	021.	4	,629.
е	Other			61,525.	58,	449.	3	,076.
Tota	I. Add lines 1a through 1e. (Column (d) must e	egual Form 990. Part	X. column (B), line	10c.)			7	,705.

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 R STREET INS	TITUTE	26	-3477125 Page
Part VII Investments - Other Securities. Complete if the organization answered "Yes" of	n Form 990 Part IV line	11h See Form 900 Part Y line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	linfiyear market value
(4) F: (1) 1 (1)	(b) Dook value	(c) Method of Valuation. Cost of end	roryear market value
(1) Financial derivatives		1	
(2) Closely held equity interests			
(3) Other			
(A)			
(B) (C)			
(D)			
		1	
(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" of	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	l-of-vear market value
(1)	(-,	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(2)		= 1	
(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" of	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a) i	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" of	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) OPERATING LEASE LIABILITY			381,741
(3)			
(4)			
(5)			
(6)			

Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2022

381,741.

(7) (8) (9)

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

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

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

Attach to Form 990.

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

Vame of	Name of the organization	Employer identification number
	R STREET INSTITUTE	26-3477125
Part	Part I General Information on Grants and Assistance	
1 Do	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
crit	criteria used to award the grants or assistance?	X Yes No

ž

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 2 Desc

recipient that received more than 50,000. Part in call be duplicated if additional space is reserved.	SO, OOO, Part II can	pe duplicated il additio	orial space is rieduc	Ü.			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
							TPPF WILL ASSIST WITH
TEXAS PUBLIC POLICY							CENTER-RIGHT CASES IN
900 CONGRESS AVENUE SUITE 400							JAIL REFORM IN THE US
AUSTIN, TX 78701	74-2524057	501(C)(3)	50,000.	0.			WITH MEDIA HITS, OP-EDS,
							THIS COLLABORATION IS
SUTHERLAND INSTITUTE							INTENDED TO PRODUCE
15 WEST SOUTH TEMPLE SUITE 200							RESEARCH AND ORIGINAL
SALT LAKE CITY, UT 84101	87-0531727	501(C)(3)	32,625.	0.			CONTENT, AND TO
							THE PURPOSE IS TO CREATE,
ADVANCE ARKANSAS INSTITUTE							PRODUCE AND DISTRIBUTE
2400 KING STREET							EDUCATIONAL CONTENT ABOUT
ALEXANDRIA, VA 22301	27-0271657 501(C)(3)	501(C)(3)	20,000.	0.			POLITICAL DYSFUNCTION IN
							THE PURPOSE OF THE
NATIONAL HARM REDUCTION COALITION							SUBGRANT IS A SPONSORSHIP
243 5TH AVENUE BOX 529							FOR R STREET AT THE
NEW YORK , NY 10016	94-3204958	501(c)(3)	10,000.	0.			CONFERENCE.
							THIS COLLABORATION IS
CARDINAL INSTITUTE							INTENDED TO PRODUCE
1632 QUARRIER ST.							RESEARCH AND ORIGINAL
CHARLESTON, WV 25311	47-1932521	501(C)(3)	9,250.	0.			CONTENT, AND TO
MANHATTAN INSTITUTE FOR POLICY							THE PURPOSE IS TO CREATE,
RESEARCH, INC 52 VANDERBILT							PRODUCE AND DISTRIBUTE
AVE. 2ND FLOOR - NEW YORK , NY		_					EDUCATIONAL CONTENT ABOUT
10017	13-2912529 501(C)(3)	501(C)(3)	27,447.	0.			POLITICAL DYSFUNCTION IN
		CO 000 100 100 100 100 100 100 100 100 10					-

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) 2022

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26-3477125

Schedule I (Form 990) R STREET INSTITUTE

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	dule I (Form 990), Pari	(III)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							GRANTEE WILL ASSIST IN
FLORIDA TAXWATCH, INC.							DELINEATING A CLIMATE
106 NORTH BRONOUGH STREET	0000	0.00	000	c			CHANGE MITIGATION AND
TALLARASSEE, FL 52301		201101131	000	· A.			COSMODE WILL DEVELOR SAID
OTT NOTHERNIOS SONSTITUTE SHE							PUBLISH EIGHT ORIGINAL
143 SHARON MEADOWS							FEATURE LENGTH,
SOUTH ROYALTON, VT 05068	82 2925236	501(C)(3)	14,000.	0			JOURNALISTIC REPORTS
							GRANTEE WILL COLLABORATE
AMERICAN CONSERVATION COALITION							WITH THE R STREET ENERGY
PO BOX 391							AND ENVIRONMENT POLICY
APPLETON, WI 54912	82-3815628	501(C)(3)	37,500.	0.			PROGRAM TO DELINEATE A
							Schedule I (Form 990)

232241 04-01-22 26-3477125

Schedule I (Form 990) 2022

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. Part III

(f) Description of noncash assistance ther)											
(e) Method of valuation (book, FMV, appraisal, other)				ditional information.		ON THE	ARRATIVE AND	E REVIEWED	AT A		
(d) Amount of non- cash assistance	Si .	×		(b); and any other a		DEPENDING ON	INTERIM NARRATIVE	REPORTS ARE	DIRECTOR.	RT.	
(c) Amount of cash grant				e 2; Part III, column		AND,	FINAL AND/OR	EE. THESE	E FINANCE	NARRATIVE REPORT.	
(b) Number of recipients				uired in Part I, lin		SRAM STAFF		SUBGRANT	AND BY THE	FINAL NARR	
(a) Type of grant or 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	REQUIREMENTS IN EACH SUBGRANT AGREEMENT,	FINANCIAL REPORTS ARE SUBMITTED BY SUBGRANTEE.	OGRAM STAFF	MUM, ALL SUBGRANTS REQUIRE A	

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: TEXAS PUBLIC POLICY

Part IV | Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: TPPF WILL ASSIST WITH CENTER-RIGHT

CASES IN JAIL REFORM IN THE US WITH MEDIA HITS, OP-EDS, AND SPEAKING

ENGAGEMENTS.

NAME OF ORGANIZATION OR GOVERNMENT: SUTHERLAND INSTITUTE

(H) PURPOSE OF GRANT OR ASSISTANCE: THIS COLLABORATION IS INTENDED TO

PRODUCE RESEARCH AND ORIGINAL CONTENT, AND TO PARTICIPATE IN POPULAR

MEDIA TO BRING IDEAS OF ELECTORAL REFORM TO A BROAD, BIPARTISAN AUDIENCE

WITH A SPECIAL FOCUS ON WORK THAT WILL HELP INCREASE THE IMPACT OF

SPECIFIC ELECTORAL AND VOTING REFORMS FROM A CONSERVATIVE PERSPECTIVE AND

DEVELOP ORIGINAL CONTENT ON RANKED CHOICE VOTING.

NAME OF ORGANIZATION OR GOVERNMENT: ADVANCE ARKANSAS INSTITUTE

(H) PURPOSE OF GRANT OR ASSISTANCE: THE PURPOSE IS TO CREATE, PRODUCE

AND DISTRIBUTE EDUCATIONAL CONTENT ABOUT POLITICAL DYSFUNCTION IN

ARKANSAS AND POTENTIAL ELECTORAL REFORM SOLUTIONS, INCLUDING RANKED

CHOICE VOTING, REDISTRICTING REFORM, AND VOTING ACCESS AND SECURITY.

NAME OF ORGANIZATION OR GOVERNMENT: CARDINAL INSTITUTE

(H) PURPOSE OF GRANT OR ASSISTANCE: THIS COLLABORATION IS INTENDED TO

PRODUCE RESEARCH AND ORIGINAL CONTENT, AND TO PARTICIPATE IN POPULAR

MEDIA TO BRING IDEAS OF ELECTORAL REFORM TO A BROAD, BIPARTISAN AUDIENCE

WITH A SPECIAL FOCUS ON WORK THAT WILL HELP INCREASE INTEREST IN REFORM

ON THE POLITICAL RIGHT.

NAME OF ORGANIZATION OR GOVERNMENT:

MANHATTAN INSTITUTE FOR POLICY RESEARCH, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: THE PURPOSE IS TO CREATE, PRODUCE

Schedule I (Form 990)

Schedule I (Form 990)

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Employer identification number R STREET INSTITUTE 26-3477125

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		11.39	
	First-class or charter travel Housing allowance or residence for personal use	0.000		
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	X	
			1444	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract	District		
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the user did any agent listed on Form 000 Part VIII Continue A. Fine to with account to the filter			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
_	organization or a related organization:	4.0		х
a		4a		X
D	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c		
	Tes to any of lines 42.6, list the persons and provide the applicable amounts for each item in Part III.			- A
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			=W
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		9	
	contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			.00
	contingent on the net earnings of:			
а	The organization?	6a		X
	Any related organization?	6b	L	X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	X	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	SIL		
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2022

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

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

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.

ļ.		(B) Breakdown of W	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) ELIAS ROTHENBERG-LEHRER	E	300,699.	0	0	11,930.	15,452.	328,081.	0
PRESIDENT	E	0	0	0 •	* 0	0.	0.	0.
(2) ERICA SCHODER	Ξ	243,467.	3,326.	0.	1,679.	5,715.	260,187.	0.
EXECUTIVE DIRECTOR	: E	0	0	0.	• 0			0.
(3) DEVIN HARTMAN	Ξ	194,922.	2,500.	0.	7,365.	8,824.	213,611.	0.
DIRECTOR, ENERGY	€	0	0	0	* 0	0.	*0	0.
(4) JONATHAN BYDLAK	Ξ	187,95	2,500.	0	7,518.	8,596	206,565.	.0
DIRECTOR, GOVERNANCE	: 🖹	0	0	.0	0	0.	0 •	0.
(5) MAZEN SALEH	ε	191,640.	2,500.	0.	6,593.	4,632.	205,365.	.0
DIRECTOR, HARM REDUCTION	1	0	0	0.	0	0.	• 0	.0
(6) JILLIAN SNIDER	8	189,500.	2,500.	0.	6,826.	34.	198,860.	0.
DIRECTOR, CRIMINAL JUSTICE	3	0	0	0.	• 0	0.	0	.0
1 124	ε	187,500.	2,500.	0.	3,934.	34.	193,968.	0.
DIRECTOR, TECHNOLOGY	3	0	0	0.	0 0	0.	0.	0.
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							Schedu	Schedule J (Form 990) 2022

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.

LINE 1A: PART I,

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

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

PART I, LINE 7:

THE FOLLOWING EMPLOYEES RECEIVED BONUS PAYMENTS:

- ERICA SCHODER	\$3,326
No. of the latest states and the latest states are the latest states and the latest states are the latest states and the latest states are the latest stat	
- DEVIN HARTMAN	\$2,500
- MAZEN SALEH	\$2,500
- JILLIAN SNIDER	\$2,500
- JOHNATHAN BYDLAK \$2,500	\$2,500
- WAYNE BROUGH	\$2,500

Schedule J (Form 990) 2022

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

2022
Open to Public Inspection

Name of the organization

R STREET INSTITUTE

Employer identification number 26-3477125

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 4D, OTHER PROGRAM SERVICES:
FINANCE, INSURANCE AND TRADE:
R STREET'S 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 CORP. AND EXPLORING THE BENEFITS OF MITIGATION THROUGH
PROGRAMS LIKE THE RESTORE ACT AND THE COASTAL BARRIER RESOURCES SYSTEM. LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2022

232211 10-28-22

Schedule O (Form 990) 2022 Page 2 Name of the organization Employer identification number 26-3477125 R STREET INSTITUTE EXPENSES \$ 716,688. INCLUDING GRANTS OF \$ 25. REVENUE \$ 0. **ENERGY AND ENVIRONMENT:** R STREET'S ENERGY AND ENVIRONMENT TEAM SEEKS A CLEANER ENVIRONMENT THROUGH A COMBINATION OF A THRIVING ECONOMY, WELL-FOUNDED SCIENCE, AND PRINCIPLES OF MARKET COMPETITION AND LIMITED GOVERNMENT. OUR EXPERTS HAVE DEEP EXPERTISE IN CLIMATE AND EVIRONMENTAL POLICY, AS WELL AS ELECTRICITY POLICY. EXPENSES \$ 1,322,465. INCLUDING GRANTS OF \$ 75,100. REVENUE \$ 0. COMPETITION POLICY: R STREET'S COMPETITION POLICY PROGRAM ADDRESSES GOVERNMENT BARRIERS THAT HURT BUSINESSES AND PEOPLE. WE SUPPORT MARKET-ORIENTED POLICY SOLUTIONS THAT ENHANCE FREE ENTERPRISE, CONSUMER CHOICE AND PUBLIC WELL-BEING. THE TEAM FOCUSES PRIMARILY ON OCCUPATIONAL LICENSING, ALCOHOL POLICY, HEALTH CARE DISINTERMEDIATION, TELEHEALTH POLICY, ANTI-POVERTY PROGRAMMING AND REGULATORY REFORM. EXPENSES \$ 1,081,474. INCLUDING GRANTS OF \$ 12,046. REVENUE \$ 0. HARM REDUCTION: R STREET'S HARM REDUCTION PROGRAM IS GROUNDED IN AN UNDERSTANDING THAT "ABSTINENCE-ONLY" APPROACHES TO RISKY BEHAVIORS ARE INEFFECTIVE. WITH THIS IN MIND, RSI FOCUSES ON HARM-REDUCTION APPROACHES THAT RECOGNIZE THAT HARMFUL BEHAVIORS MAY CONTINUE TO HAPPEN EVEN AS POLICIES ARE ENACTED TO HELP MITIGATE--IF NOT ELIMINATE--THOSE HARMS. THE PROGRAM CONNECTS THE DOTS BETWEEN HISTORICALLY SILOED ISSUES SUCH AS: TOBACCO, CANNABIS, AND ILLICIT DRUG USE. EXPENSES \$ 1,452,848. INCLUDING GRANTS OF \$ 17,061. REVENUE \$ 0.

232212 10-28-22

Employer identification number 26-3477125

CYBERSECURITY AND EMERGING THREATS:

R STREET'S CYBERSECURITY AND EMERGING THREATS TEAM WORKS ON DATA

SECURITY AND DATA PRIVACY AT

THE FEDERAL AND STATE LEVELS, EMERGING CYBER AND NATIONAL SECURITY

THREATS, CYBER IMPACTS ON THE

PRIVATE SECTOR AND WORKFORCE DIVERSITY IN CYBERSECURITY, AMONG OTHER

PRESSING PUBLIC POLICY

CONCERNS.

EXPENSES \$ 1,393,788. INCLUDING GRANTS OF \$ 3,050. REVENUE \$ 0.

LOBBYING

EXPENSES \$ 35,392. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 WAS PREPARED BY THE EXTERNAL AUDITORS AND REVIEWED BY R
STREET'S AVP AND THE BOARD OF DIRECTORS PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

OFFICERS, DIRECTORS AND ALL EMPLOYEES ARE REQUIRED TO ANNUALLY SIGN A
CONFLICT OF INTEREST POLICY STATEMENT. IT IS THE POLICY OF THE BOARD THAT
THE EXISTENCE OF ANY INTERESTS BE DISCLOSED BEFORE ANY TRANSACTION IS
CONSUMMATED AFTER A POTENTIAL CONFLICT OF INTEREST IS DISCLOSED, THE BOARD
OR A DULY CONSTITUTED COMMITTEE THEREOF DETERMINES WHETHER A CONFLICT
EXISTS AND, IN THE CASE OF AN EXISTING CONFLICT, WHETHER THE CONTEMPLATED
TRANSACTION MAY BE AUTHORIZED AS JUST, FAIR, AND REASONABLE 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 MUST BE THE WELFARE

232212 10-28-22

Name of the organization R STREET INSTITUTE	Employer identification number 26-3477125
OF R STREET AND THE ADVANCEMENT OF ITS PURPOSE.	
FORM 990, PART VI, SECTION B, LINE 15A:	
	OVDENGA MTON
THE COMPENSATION OF THE PRESIDENT/CHAIRMAN IS SET BY THE COMPENSATION	
COMMITTEE AFTER REVIEWING COMPARABILITY DATA AND IS DOCUMENTED. THE	
COMPENSATION OF OTHER OFFICERS IS EVALUATED AND SET BY THE	
PRESIDENT/CHAIRMAN BASED ON COMPARABILITY DATA AND IS DOCUMENTED. THE LAST	
SALARY REVIEW FOR THE PRESIDENT FOR FY 2022 WAS IN NOVEMBE	R 2022.
-	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
AL, AR, CA, FL, GA, HI, MA, MI, MN, MS, NJ, NM, NY, NC, OR, PA, SC, UT, VA	
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 U	PON REQUEST.
	100 Tab