#### \*\* 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.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A.I	or the	2023 calendar year, or tax year beginning and er	nding	200 200				
В	Check If pplicable	C Name of organization		D Employer identific	cation number			
	Addres	R STREET INSTITUTE		Į				
	Name change	Doing business as		26-34771	25			
Initial return		, ,	oom/suite 0 0	E Telephone number (202) 525-5717				
	ireturn/ termin- ated		00	G Gross receipts \$	11,048,315.			
_	Amend			H(a) Is this a group re				
F	return Applica tion		ABEB	for subordinates				
	pendin	SAME AS C ABOVE	IIVISIV	H(b) Are all subordinates in				
7	Γαν.ανα	empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or	527		list. See instructions			
	Nebsit		JZI	H(c) Group exemption				
_		organization: X Corporation Trust Association Other	I Voor	The second liverage was a second liverage with the second liverage was a second live	State of legal domicile; DC			
	art I	Summary			State of legal dofflictle, DC			
9	1	Briefly describe the organization's mission or most significant activities: ${f SEE \ \ Pl}$	ART I	II, LINE 1.				
Governance								
ern	2	Check this box if the organization discontinued its operations or disposed		3 1				
Ş O	3			3	10			
	ı ·	Number of independent voting members of the governing body (Part VI, line 1b)			10			
9		Total number of individuals employed in calendar year 2023 (Part V, line 2a)		100740040	87			
Activities &		Total number of volunteers (estimate if necessary)		200 March 200 Ma	11			
Aci				7a	0.			
_	- D	Net unrelated business taxable income from Form 990-T, Part I, line 11		Prior Year	Current Year			
Revenue		One Aribe Aires and See A (Deed A (III) 15 - A LA	-					
		Contributions and grants (Part VIII, line 1h)		13,315,801.	10,987,175.			
		Program service revenue (Part VIII, line 2g)		0.	0.			
æ		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		189.	1,581.			
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	64,604.	59,559.				
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		13,380,594.	11,048,315.			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1020	246,878.	164,938.			
		Benefits paid to or for members (Part IX, column (A), line 4)	-	0.	11 100 206			
98	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		9,799,406.	11,190,306.			
Expenses	102	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  363,014	4	0.	0.			
X	47	<u> </u>		2,884,506.	2,869,582.			
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		12,930,790.	14,224,826.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		449,804.	-3,176,511.			
-9		Revenue less expenses. Subtract line 18 from line 12	Re	ginning of Current Year	End of Year			
Assets or	20	Total assets (Part X, line 16)		10,132,891.	8,145,696.			
SSE	21	Total liabilities (Part X, line 26)	(4)(3)	784,109.	1,973,425.			
ë		Net assets or fund balances. Subtract line 21 from line 20		9,348,782.	6,172,271.			
	art II	Signature Block		3,320,702.	0/1/2/2/11			
_		Ities of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	ents, and to the hest of my	knowledge and belief it is			
		t, and complete. Declaration of preparer (other than officer) is based on all information of whic			morroage and boner, it is			
	,	El Keltila-leh	п рторато	10-16-	74			
Sig	n	Signature of officer		Date				
He		ELIAS ROTHENBERG-LEHRER, PRESIDENT						
		Type or print name and title						
		Print/Type preparer's name Preparer's signature	1	Date Check	PTIN			
Pair	i	ELIZABETH W. HELLER Glip Schungel	an 1	0/03/2024   if   self-employe	P00397829			
	parer	Firm's name GELMAN, ROSENBERG & FREEDMAN	<u> </u>		2-1392008			
	Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N		711111111111111111111111111111111111111				
		BETHESDA, MD 20814-2930		Phone no. 30	1-951-9090			
Ma	/ the IF	RS discuss this return with the preparer shown above? See instructions	100	,	X Yes No			

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE R STREET INSTITUTE IS A NONPROFIT, NONPARTISAN, PUBLIC-POLICY
	RESEARCH ORGANIZATION ("THINK TANK"). OUR MISSION IS TO ENGAGE IN
	POLICY RESEARCH AND OUTREACH TO PROMOTE FREE MARKETS AND LIMITED,
	EFFECTIVE GOVERNMENT. (CONTINUED ON SCHEDULE O)
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X No
•	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
7	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.
40	0.000.010
4a	(Code:) (Expenses \$2,090,218 our including grants of \$) (Revenue \$)  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.
	1 000 210
4b	(Code:) (Expenses \$1,808,318. including grants of \$69,631. ) (Revenue \$)
	GOVERNANCE:
	R STREET'S GOVERNANCE PROGRAM 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 QUESTION.
	1 906 600 1 052
4c	(Code:) (Expenses \$1,806,689. including grants of \$1,053. ) (Revenue \$) TECHNOLOGY & 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,
	THWARTING 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.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 6,575,907. including grants of \$ 93,143.) (Revenue \$ )
4e	Total program service expenses 12,281,132.
	Form <b>990</b> (2023)

## Form 990 (2023) R STREET INSTITUTE Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			.,
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
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		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	l		37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	<b>.</b>	v	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		
	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			Х
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	Х	
	Schedule D, Parts XI and XII	12a	Λ	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	401-		Х
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
14a		14a		X
b	Did the organization maintain an office, employees, or agents outside of the United States?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	144		-25
J	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		х
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		Х
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		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
<b>20</b> a	and the second s	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	Х	

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Part IV Checklist of Required Schedules (continued)

	·		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	<u> </u>
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			37
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	040		
d	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
254	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	200		
~	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):			
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		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			v
00	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		x
31	contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
-	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	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?	000	Х	1
Par	Note: All Form 990 filers are required to complete Schedule O  t V Statements Regarding Other IRS Filings and Tax Compliance	38	_ ^	
	Check if Schedule O contains a response or note to any line in this Part V			
	C. 155 Contouring a companied of froto to dry into in this tart v		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		.03	.40
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  1b  0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
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Part V	Statements Regarding Other IRS Filings and Tax Compliance	(continued)

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	_		37
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	0.		
-	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	70		X
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Λ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b		
С	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year? N/A	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders N/A 11a			
D	Gross income from other sources. (Do not net amounts due or paid to other sources against			
120	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?  N/A	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	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?  N/A	17		
	If "Yes," complete Form 6069.			

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Form **990** (2023)

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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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 10 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 10 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 X 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 X 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b 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 Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Own website Another's website X Upon request Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records HAMMAD KAMAL - (202)525-5717

Form **990** (2023)

1411 K STREET NW SUITE 900, WASHINGTON, DC

#### 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-NEĆ) of more than \$100,000 from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- 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.

(A)  Name and title	(B) Average hours per week	(do box	not c	Pos heck	sition more than one erson is both an director/trustee)			(D)  Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) ELIAS ROTHENBERG-LEHRER	40.00	-		37				200 710	0	21 677
PRESIDENT (2) ERICA SCHODER	40.00			Х				309,712.	0.	31,677.
EXECUTIVE DIRECTOR	40.00	┨		х				267,019.	0.	18,603.
(3) MAZEN SALEH	40.00							207,019.	0.	10,003.
DIR. HARM REDUCTION	40.00	┧				X		206,316.	0.	19,679.
(4) SABRINA SCHAEFFER	40.00		$\vdash$					200,310.	•	13,073.
VP. PUBLIC AFFAIRS	1000	1				x		207,270.	0.	6,100.
(5) DEVIN HARTMAN	40.00									
DIR. ENERGY & ENVIRONMENT		1				x		201,822.	0.	8,692.
(6) JILLIAN SNIDER	40.00									,
DIR.CJ & CIVIL LIBERTIES		1				Х		199,294.	0.	8,485.
(7) WAYNE BROUGH	40.00									
DIR. TECHNOLOGY & INNOVATION						Х		198,650.	0.	4,692.
(8) SUSANNA DOKUPIL	0.50									
BOARD CHAIRWOMAN		Х		X				0.	0.	0.
(9) ROBERT WATKINS	0.50									
BOARD MEMBER		Х						0.	0.	0.
(10) STEPHEN WEINSTEIN	0.50								_	_
BOARD MEMBER		Х						0.	0.	0.
(11) RYAN CALO	0.50	ļ								
BOARD MEMBER	0.50	Х						0.	0.	0.
(12) PABLO CARRILLO	0.50	-								0
BOARD MEMBER	0 50	Х						0.	0.	0.
(13) MARLA DEAN	0.50	.,							0	0
BOARD MEMBER	0.50	Х						0.	0.	0.
(14) JOHN GRAHAM BOARD MEMBER	0.50	х						0.	0.	0
(15) ELIZABETH FRAZEE	0.50	^						0.	0.	0.
BOARD MEMBER	0.50	Х						0.	0.	0.
(16) KATIE HARBATH	0.50	22						0.	0.	
BOARD MEMBER (FROM 06/23)	0.30	x						0.	0.	0.
(17) SIMONE SYED	0.50		$\vdash$			$\vdash$	$\vdash$		•	
BOARD MEMBER (FROM 06/23)	1130	х						0.	0.	0.
332007 12-21-23										Form <b>990</b> (2023)

Form **990** (2023) 332007 12-21-23

(A) Name and title	Name and title  Average hours per  Average hours per  Position (do not check more that box, unless person is box				than c s both	an	(D) Reportable compensation	(E)  Reportable compensation		Estin	nated		
	week (list any hours for related organizations below line)	Individual trustee or director	institutional trustee	Officer Officer		Highest compensated carl		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISO 1099-NEC)	;/ 	compe	n the ization elated	
(18) ARTUR DAVIS	0.50												
BOARD MEMBER (UNTIL 06/23)	MEMBER (UNTIL 06/23) X 0.								0.		0.		
1b Subtotal  c Total from continuation sheets to Part VI d Total (add lines 1b and 1c)  Total number of individuals (including but n	I, Section A				· · · · · · ·			1,590,083. 0. 1,590,083.		0.		928. 0. 928.	
compensation from the organization	or illilited to th	036	11316	u ab		) vvii		eceived more than \$100	,000 of reportable			44	
<ul> <li>3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s</li> <li>4 For any individual listed on line 1a, is the su</li> </ul>	uch individual									[	3	es No	
<ul> <li>and related organizations greater than \$150</li> <li>Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com</li> </ul>	ccrue compen	sati	on fr	om a	any	unre	late	ed organization or indivi	dual for services		4 Σ 5	X	
Section B. Independent Contractors  1 Complete this table for your five highest contractors	mpensated ind	lene	nder	nt co	ntra	actor	s th	nat received more than 9	\$100,000 of compe	nsati	on from		
the organization. Report compensation for								the organization's tax y					
(A) Name and business	address							<b>(B)</b> Description of s	services	Co	( <b>C</b> ) ompensa	ation	
FIONTA, INC. PO BOX 66794, WASHINGTON,	DC 200	35					(	CRM CONSULTING			110,000.		
2 Total number of independent contractors (in \$100,000 of compensation from the organic	•	ot lin	nited	l to t	thos	e lis	ted	above) who received m	ore than				

Form 990 (2023) R STREE
Part VIII Statement of Revenue

		Check if Schedule O contains a response o	r note to any lin	e in this Part VIII			
		•	•	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
					iunction revenue	business revenue	sections 512 - 514
Si Si	1	a Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues 1b					
يَ ق		c Fundraising events 1c					
ifts		d Related organizations 1d					
nila G		e Government grants (contributions)  1e					
Sir		f All other contributions, gifts, grants, and					
uti Per		I	10,987,175.				
育		g Noncash contributions included in lines 1a-1f	, ,				
Sign		h Total. Add lines 1a-1f		10,987,175.			
			Business Code	, ,			
o o	2	а					
, vi		b					
Program Service Revenue		c					
E S		d					
Be		e					
Pro		f All other program service revenue					
		g Total. Add lines 2a-2f					
	3	Investment income (including dividends, interes					
		other similar amounts)		1,581.			1,581.
	4	Income from investment of tax-exempt bond pro					
	5	Royalties					
		(i) Real	(ii) Personal				
	6	a Gross rents 6a					
		b Less: rental expenses 6b					
		c Rental income or (loss) 6c					
		d Net rental income or (loss)					
	7	a Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
		<b>b</b> Less: cost or other basis					
ne		and sales expenses					
/en		c Gain or (loss)7c					
Re		d Net gain or (loss)					
ther Revenue		a Gross income from fundraising events (not including \$ of					
Ò		contributions reported on line 1c). See					
		Part IV, line 188a					
		b Less: direct expenses 8b					
		c Net income or (loss) from fundraising events					
		a Gross income from gaming activities. See					
	9	Part IV, line 19 9a					
		b Less: direct expenses 9b					
		c Net income or (loss) from gaming activities					
		a Gross sales of inventory, less returns					
		and allowances 10a					
		b Less: cost of goods sold 10b					
		c Net income or (loss) from sales of inventory					
		•	Business Code				
sno	11	a MISCELLANEOUS	900099	44,313.			44,313.
ane Due		b CREDIT CARD REWARDS	900099	15,246.			15,246.
eke		с					
Miscellaneous Revenue		d All other revenue					
		e Total. Add lines 11a-11d		59,559.			
	12	Total revenue. See instructions		11,048,315.	0.	0.	61,140.

332009 12-21-23

# Form 990 (2023) R STREET INSTITUTE Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).									
	Check if Schedule O contains a respor	nse or note to any line in							
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses				
1	Grants and other assistance to domestic organizations								
	and domestic governments. See Part IV, line 21	164,938.	164,938.						
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,								
	trustees, and key employees	627,011.	290,181.	319,761.	17,069.				
6	Compensation not included above to disqualified								
	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)	0 017 040	0.046.120	F00 FF3	260 166				
7	Other salaries and wages	8,817,849.	8,046,130.	502,553.	269,166.				
8	Pension plan accruals and contributions (include	205 042	256 042	20 047	0 054				
_	section 401(k) and 403(b) employer contributions)	285,843. 744,881.		20,847.	8,954.				
9	Other employee benefits	744,881.	506,275. 619,452.	74,145.	17,699. 21,125.				
10	Payroll taxes	/14,/22.	019,452.	74,145.	21,123.				
11	Fees for services (nonemployees):								
_	Management	49,959.	32,815.	16,057.	1 097				
b	3	72,208.	47,429.	23,208.	1,087. 1,571.				
	Accounting	72,200.	41,423.	23,200.	1,3/1.				
u	Lobbying Professional fundraising services. See Part IV, line 17								
f	Investment management fees								
g									
9	column (A), amount, list line 11g expenses on Sch O.)	784,356.	704,599.	74,704.	5.053.				
12	Advertising and promotion	3,514.	3,478.	34.	5,053. 2.				
13	Office expenses	126,801.	91,503.	32,139.	3,159.				
14	Information technology	56,768.	44,456.	11,532.	780.				
15	Royalties	,	,	,					
16	Occupancy	397,168.	222,488.	167,314.	7,366.				
17	Travel	527,375.	479,215.	43,321.	4,839.				
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	518,245.	493,943.	22,418.	1,884.				
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	8,615.		5,325.	105.				
23	Insurance	46,224.	30,362.	14,857.	1,005.				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)								
а	BOOKS & SUBSCRIPTIONS	218,215.	197,640.	19,258.	1,317.				
b	PAYROLL FEES	25,023.	16,436.	8,043.	544.				
c	DUES	21,664.	21,261.	377.	26.				
d	REGISTRATION FEES	7,939.	5,686.	2,110.	143.				
е	All other expenses	5,508.		1,770.	120.				
25	Total functional expenses. Add lines 1 through 24e	14,224,826.	12,281,132.	1,580,680.	363,014.				
26	Joint costs. Complete this line only if the organization								
	reported in column (B) joint costs from a combined								
	educational campaign and fundraising solicitation.								
	Check here if following SOP 98-2 (ASC 958-720)								
					E 000 (0000)				

Form 990 (2023)

Part X | Balance Sheet

<u>Pai</u>	t X	Balance Sheet					
		Check if Schedule O contains a response or no	te to an	/ line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	5,199,142.	1	2,688,593		
	2	Savings and temporary cash investments	1,332,417.	2	1,333,727		
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net			3,042,132.	4	2,313,958
	5	Loans and other receivables from any current of	officer, director,				
		trustee, key employee, creator or founder, subs	tantial c	ontributor, or 35%			
		controlled entity or family member of any of the	se pers	ons		5	
	6	Loans and other receivables from other disqua	ified per	sons (as defined			
		under section 4958(f)(1)), and persons describe	d in sec	tion 4958(c)(3)(B)		6	
s	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ğ	9	Duran sid according to the form of all according			185,281.	9	157,940
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	119,092.			
	b	Less: accumulated depreciation	10b	3,766.	7,705.	10c	115,326
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line	11			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			366,214.	15	1,536,152
	16	Total assets. Add lines 1 through 15 (must equ	ual line 3	3)	10,132,891.	16	8,145,696
	17	Accounts payable and accrued expenses	402,368.	17	400,344		
	18	Grants payable			18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
S	22	Loans and other payables to any current or for	ner offic	er, director,			
Ĭ		trustee, key employee, creator or founder, subs	tantial c	ontributor, or 35%			
Liabilities		controlled entity or family member of any of the				22	
_	23	Secured mortgages and notes payable to unrel				23	
	24	Unsecured notes and loans payable to unrelate	d third	parties		24	
	25	Other liabilities (including federal income tax, p	,				
		parties, and other liabilities not included on line	s 17-24)	. Complete Part X	204 544		4 550 004
		of Schedule D			381,741.		1,573,081
	26			77	784,109.	26	1,973,425
S		Organizations that follow FASB ASC 958, ch	eck her	X			
Ce		and complete lines 27, 28, 32, and 33.			F 474 707		2 402 116
alar	27	Net assets without donor restrictions			5,474,787.	27	3,493,116
B	28	Net assets with donor restrictions			3,873,995.	28	2,679,155
nu		Organizations that do not follow FASB ASC	958, che	ck here			
or F		and complete lines 29 through 33.					
ts c	29	Capital stock or trust principal, or current funds				29	
SSe	30	Paid-in or capital surplus, or land, building, or e				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in			0 240 700	31	6 170 071
Se	32	Total net assets or fund balances			9,348,782.	32	6,172,271
	33	Total liabilities and net assets/fund balances			10,132,891.	33	8,145,696 Form <b>990</b> (202

OIII	000 (2020)				ı uş	<u> </u>
Pai	T XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,			
2	Total expenses (must equal Part IX, column (A), line 25)	2	14,			
3	Revenue less expenses. Subtract line 2 from line 1	3	-3,:		_	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	9,	3 <b>4</b> 8	, 7	<u>82.</u>
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	6,	172	, 2	71.
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		
	· · · · · · · · · · · · · · · · · · ·		F	orm (	990	(2023)

#### **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.

2023

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number 26 – 3/1771 25

			KEEL INDII.					0-34//123
Pa	rt I	Reason for Public (	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.	
he (	organ	zation is not a private found	ation because it is: (F	For lines 1 through 12, cl	neck only	one box.)		
1		A church, convention of chi	urches, or associatio	n of churches described	in <b>sectio</b>	n 170(b)(1	I)(A)(i).	
2		A school described in secti	ion 170(b)(1)(A)(ii).	Attach Schedule E (Form	n 990).)			
3		A hospital or a cooperative				(b)(1)(A)(ii	i).	
4	一	A medical research organization					•	the hospital's name.
•	ш	city, and state:	a.i.o.i. opoi.a.oa .ii. oo.	, amonom man a moophan		000110		and noophan o name,
5			or the benefit of a col	lege or university owned	or operat	ed by a go	vernmental unit describe	ad in
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)							
_						70/5//4//4/	()	
6	┰	A federal, state, or local gov	-					1.0
1	X	An organization that norma	•	ntial part of its support fr	om a gove	ernmental	unit or from the general p	oublic described in
		section 170(b)(1)(A)(vi). (C	-					
8	$\square$	A community trust describe			•			
9		An agricultural research org	anization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	inction with a land-grant	college
		or university or a non-land-g	rant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of the college	or
		university:						
10		An organization that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membership fees, and	d gross receipts from
		activities related to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its support fi	rom gross investment
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	m busines	ses acquii	red by the organization a	ıfter June 30, 1975.
		See section 509(a)(2). (Cor	mplete Part III.)					
11		An organization organized a	and operated exclusi	vely to test for public sat	ety. See	section 50	)9(a)(4).	
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform t	he functior	ns of, or to carry out the	purposes of one or
		more publicly supported or	ganizations describe	d in <b>section 509(a)(1)</b> o	r section	509(a)(2).	See <b>section 509(a)(3).</b> (	Check the box on
		lines 12a through 12d that	describes the type of	f supporting organization	and com	plete lines	12e, 12f, and 12g.	
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	orted orga	anization(s), typically by	giving
		the supported organization	· · · · · · · · · · · · · · · · · · ·			-		
		organization. You must o			, ,			
b		Type II. A supporting org			ion with its	s supporte	d organization(s), by hav	vina
-		control or management o	•					-
		organization(s). You mus			arrio porco	110 11141 001	na or manago are oupp	70110d
_		Type III functionally inte	-		in connect	tion with s	and functionally integrate	nd with
·		its supported organization	-					with,
d		Type III non-functionally		·				zation(s)
u		that is not functionally int						* *
		requirement (see instructi	-		-		=	7011033
е		Check this box if the orga	·	-				
C		-					Type i, Type ii, Type iii	
	Ente	functionally integrated, or r the number of supported or		ially liftegrated supporting	ig organiz	ation.		
,		ride the following information		d organization(s)				
9		) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	nization listed	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10	in your governi	No No	support (see instructions)	support (see instructions)
				above (see instructions))	163	140		

(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	tion
fails to qualify under the tests listed below, please complete Part III.)	

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	8721568.	12649014.	12044306.	13315801.	10987175.	57717864.
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	8721568.	12649014.	12044306.	13315801.	<u> 10987175.</u>	57717864.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						17695255.
6	Public support. Subtract line 5 from line 4.						40022609.
	ction B. Total Support			ı	T	·	
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	8721568.	12649014.	12044306.	13315801.	10987175.	57717864.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	4 -00	200	400	100	4 - 0.4	
	and income from similar sources	1,589.	322.	133.	189.	1,581.	3,814.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	40 700	05 100	24 452	64 604	F0 FF0	226 507
	assets (Explain in Part VI.)	42,708.	25,183.	34,453.	64,604.	59,559.	226,507. 57948185.
	<b>Total support.</b> Add lines 7 through 10		,				<u>p/948185.</u>
	Gross receipts from related activities,	•	,			12	
13	First 5 years. If the Form 990 is for the	-					
Sec	organization, check this box and storection C. Computation of Publi						
	Public support percentage for 2023 (li			column (f))		14	69.07 %
	Public support percentage from 2022					15	67.30 %
	<b>33 1/3% support test - 2023.</b> If the o						
	stop here. The organization qualifies						T
b	33 1/3% support test - 2022. If the o		-				
	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances test	- 2023. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the facts						
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	- 2022. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets th	ne facts-and-circum	stances test, che	ck this box and st	<b>top here.</b> Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	zation	
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	s
						Schedule A	(Form 990) 2023

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sed	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third, f	fourth, or fifth tax y	year as a section 5	01(c)(3) organizatio	on,
	ction C. Computation of Publi						
	Public support percentage for 2023 (I			column (f))		15	%
<u>16</u>	Public support percentage from 2022	Schedule A, Part	III, line 15			16	%
	ction D. Computation of Inves					I .= I	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from					18   0.4 /00/	%
19a	33 1/3% support tests - 2023. If the						/ is not
	more than 33 1/3%, check this box ar						L
b	33 1/3% support tests - 2022. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	ns box and see ins	tructions	

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#### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

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

,		Yes	No
	1		
	•		
	2		
	3a		
	3b		
	0-		
	3с		
	4a		
	Tu		
	4b		
	4c		
	10		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
l	0.0		
	9с		
	10a		
	10b		
Schedule	A (Forn	n <mark>990</mark> )	2023

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

	dule A (Form 990) 2023 R STREET INSTITUTE			26-3477125 Page 6
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on	Nov. 20, 1970 ( explain	n in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	st complete	e Sections A through E.	
Sect	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	on B - Minimum Asset Amount	·	(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Secti	on C - Distributable Amount			Current Vear

5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally in	ntegra	ted Type III supporting organ	nization (see
	instructions)			

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

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

Schedule A (Form 990) 2023

Enter 0.85 of line 1.

Enter greater of line 2 or line 3.

2

<u>3</u>

Schedule A (Form 990) 2023

09401003 745960 28560

#### Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

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

OMB No. 1545-0047

2023

Schedule B (Form 990) (2023)

**Employer identification number** 

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).

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

Schedule B (Form 990) (2023)

Name of organization

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
1		\$ 1,250,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 874,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 700,000.	Person X Payroll
(a)	(b)	(c)	(d)
No4_	Name, address, and ZIP + 4	Total contributions  \$ 600,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 500,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ 500,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

Name of organization Employer identification number

#### R STREET INSTITUTE

26-3477125

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	itional space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
7		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
8		Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
9	Nume, address, and 2n + 4	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No. 10	Name, address, and ZIP + 4	Total contributions  Type of contribution  Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
11		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
12	- Training additional 1 Training additional	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

Name of organization

Employer identification number

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
13		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.

Page 3

Name of organization Employer identification number

#### R STREET INSTITUTE

26-3477125

Part II	Noncash Property (see instructions). Use duplicate copies of Property	art II if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_			
(a) No. From	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
$-\Big $			
		\$	Schedule B (Form 990) (2)

Page 4

Name of organization **Employer identification number** R STREET INSTITUTE 26-3477125 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

323454 12-26-23

Schedule B (Form 990) (2023)

#### SCHEDULE C

(Form 990)

### **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

Department of the Treasury Internal Revenue Service

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

- 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) organizations: Complete Part III.

	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.						
Nam	ne of organization	Emplo	mployer identification number					
	R STREE		26-3477125					
Pa	rt I-A Complete if the org	anization is exempt unde	er section 501(c) o	r is a section 52	7 org	anization.		
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai							
Pa	rt I-B Complete if the org	anization is exempt unde	r section 501(c)(3	3).				
1	Enter the amount of any excise tax	incurred by the organization unde	er section 4955		\$			
	Enter the amount of any excise tax							
	If the organization incurred a sectio							
4a	Was a correction made?					Yes No		
b	If "Yes," describe in Part IV.							
Pa	irt I-C   Complete if the org	anization is exempt unde	r section 501(c), e	except section 5	01(c)	(3).		
1	Enter the amount directly expended	by the filing organization for sec	tion 527 exempt function	on activities	\$ .			
2	Enter the amount of the filing organ		· ·					
	exempt function activities				\$.			
3	Total exempt function expenditures		*					
	line 17b							
	Did the filing organization file Form							
5	Enter the names, addresses, and er made payments. For each organization							
	contributions received that were pro					•		
	political action committee (PAC). If			•				
	<b>(a)</b> Name	<b>(b)</b> Address	(c) EIN	(d) Amount paid f filing organization funds. If none, ente	n's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0		

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

Schedule C (Form 990) 2023

Part II-A   Complete if the org	anization is exem	npt under section	501(c)(3) and file	20-3 ed Form 5768 (ele	tion under					
section 501(h)).			( - )( - )	(2.2						
A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,										
expenses, and shar	e of excess lobbying e	xpenditures).								
B Check if the filing organiza	tion checked box A an	d "limited control" pro	visions apply.							
Limit (The term "expend		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals							
1a Total lobbying expenditures to influ	uence public opinion (q	rassroots lobbying)		0.						
<b>b</b> Total lobbying expenditures to influ	ience a legislative bod	v (direct lobbying)		77,946.						
c Total lobbying expenditures (add lin				77,946.						
d Other exempt purpose expenditure				14,146,880.						
e Total exempt purpose expenditures				14,224,826.						
f Lobbying nontaxable amount. Ente	`			861,241.						
If the amount on line 1e, column (a) o		oying nontaxable amo		,						
not over \$500,000,	` '	he amount on line 1e.								
over \$500,000 but not over \$1,000	,000, \$100,00	0 plus 15% of the exce	ess over \$500,000.							
over \$1,000,000 but not over \$1,50		0 plus 10% of the exce								
over \$1,500,000 but not over \$17,0		0 plus 5% of the exces								
over \$17,000,000,	\$1,000,0	000.								
g Grassroots nontaxable amount (en	ter 25% of line 1f)			215,310.						
h Subtract line 1g from line 1a. If zero		0.								
i Subtract line 1f from line 1c. If zero	0.									
j If there is an amount other than zer	o on either line 1h or li	ne 1i, did the organiza	tion file Form 4720							
reporting section 4911 tax for this	year?				Yes No					
(Some organizations th	nat made a section 50	raging Period Under 01(h) election do not h te instructions for lin	nave to complete all o	of the five columns be	low.					
	Lobbying Expen	ditures During 4-Yea	r Averaging Period							
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2020	<b>(b)</b> 2021	<b>(c)</b> 2022	(d) 2023	(e) Total					
2a Lobbying nontaxable amount	640,811.	676,453.	796,540.	861,241.	2,975,045.					
b Lobbying ceiling amount (150% of line 2a, column(e))					4,462,568.					
c Total lobbying expenditures	16,013.	25,756.	35,392.	77,946.	155,107.					
d Grassroots nontaxable amount	160,203.	169,113.	199,135.	215,310.	743,761.					
e Grassroots ceiling amount (150% of line 2d, column (e))					1,115,642.					
f Grassroots lobbying expenditures										

Schedule C (Form 990) 2023

## 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)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(k	)
	e lobbying activity.	Yes	No	Amo	ount
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
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				
	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5),	or sec	tion	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
Dar	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section		3 or soc	tion	
ı aı	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				3 is
	answered "Yes."				
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	cal			
	expenses for which the section 527(f) tax was paid).				
	Current year		2a		
b	Carryover from last year		2b		
С	Total		2c		
3			. 3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and provided in the control of t	olitical			
_	expenditures next year?  Taxable amount of lobbying and political expenditures. See instructions		4		
5 Par			. 5		
		lieth Deat II A	Para di a	1 0 /	
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-A,	lines 1 a	na 2 (see	
ınstrı	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

R STREET INSTITUTE

Employer identification number 26-3477125

Par	t I Organizations Maintaining Donor Advised Funds	s or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6.		·
	(4	a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that	at the assets held in donor adv	vised funds
	are the organization's property, subject to the organization's exclusive	legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in	writing that grant funds can b	ne used only
	for charitable purposes and not for the benefit of the donor or donor according to the donor ac	dvisor, or for any other purpos	e conferring
D-	impermissible private benefit?		
Par	outspices in the significance		), Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check		
	Preservation of land for public use (for example, recreation or ed	· —	of a historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conse	ervation contribution in the form	m of a conservation easement on the last  Held at the End of the Tax Year
	day of the tax year.		
_			
b		hudad an lina Oa	
C	Number of conservation easements on a certified historic structure inc Number of conservation easements included on line 2c acquired after		
d	on a historic structure listed in the National Register	•	2d
3	Number of conservation easements modified, transferred, released, ex		
3	year	tinguished, or terminated by the	The organization during the tax
4	Number of states where property subject to conservation easement is	located	
5	Does the organization have a written policy regarding the periodic mor		<del></del>
	violations, and enforcement of the conservation easements it holds?	g,g c	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling		
7	Amount of expenses incurred in monitoring, inspecting, handling of vice	plations, and enforcing conserv	vation easements during the year
8	Does each conservation easement reported on line 2d above satisfy the	e requirements of section 170	0(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation easem		
	balance sheet, and include, if applicable, the text of the footnote to the	e organization's financial state	ments that describes the
Day	organization's accounting for conservation easements.	atorical Transcruss or (	Other Circles Accets
Pai	t III Organizations Maintaining Collections of Art, Hi	·	Other Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Par		
1a	If the organization elected, as permitted under FASB ASC 958, not to	•	
	of art, historical treasures, or other similar assets held for public exhibit	,	·
	service, provide in Part XIII the text of the footnote to its financial state		
D	If the organization elected, as permitted under FASB ASC 958, to repo		
	art, historical treasures, or other similar assets held for public exhibitio	n, education, or research in tu	rtherance of public service,
	provide the following amounts relating to these items.		Ф
	(i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treasures, or	other similar assets for finance	
~	the following amounts required to be reported under FASB ASC 958 re		nai gaili, piovide
а	Revenue included on Form 990, Part VIII, line 1	-	\$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions for Forn		Schedule D (Form 990) 2023

	t III Organizations Maintaining Col	lections of Ar	t, Hist	orical Tre	asures, o	r Other	Similar	Assets	Continu	ued)
3	Using the organization's acquisition, accession								(00111111	
	collection items (check all that apply).	,	-,				J			
а	Public exhibition	d		I oan or exc	hange progra	am				
b	Scholarly research	е			9-  9					
c	Preservation for future generations	_								
4	Provide a description of the organization's colle	ections and explain	n how th	ev further th	ne organizatio	n's exem	not purpos	se in Part	XIII.	
5	During the year, did the organization solicit or re	•		•	•					
	to be sold to raise funds rather than to be main								Yes	☐ No
Par	t IV Escrow and Custodial Arrange									
	reported an amount on Form 990, Part		10 11 1110	organization	1 4110110104	100 0111	o 000,		., 0,	
	Is the organization an agent, trustee, custodian		diary for	contribution	ns or other as	sets not i	included			
	on Form 990, Part X?								Yes	No
h	If "Yes," explain the arrangement in Part XIII an								00	
	The root, oxplaint the arrangement in real rain air	a complete the for	.ovi.ig	abio.					Amount	
С	Beginning balance						1c			
	Additions during the year									
	Distributions during the year									
f	Ending balance									
	Did the organization include an amount on Forr								Yes	No
	If "Yes," explain the arrangement in Part XIII. Cl						•		_	
Par	'- '									
		(a) Current year		Prior year	(c) Two year		( <b>d)</b> Three y	ears back	(e) Four	years back
12	Beginning of year balance	(,,	(-)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(-,)		(,		(-,	,
b	Contributions									
	Net investment earnings, gains, and losses									
C										
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
	Administrative expenses									
g	End of year balance		- /: 1		\\					
2	Provide the estimated percentage of the curren	it year end balance	· · ·	j, column (a	)) neid as:					
a	Board designated or quasi-endowment	0/	_%							
b	Permanent endowment	%								
С	Term endowment%	l								
0-	The percentages on lines 2a, 2b, and 2c should	•		A a consideration	and and a death of a factor					
за	Are there endowment funds not in the possessi	ion of the organiza	ition tha	t are neid ar	na administer	ea for the	9		Г	Yes No
	organization by:								_	Tes NO
	(i) Unrelated organizations?								3a(i)	
	(ii) Related organizations?								3a(ii)	
	If "Yes" on line 3a(ii), are the related organization								3b	
4 Day	Describe in Part XIII the intended uses of the or t VI Land, Buildings, and Equipmen		wment f	unds.						
Fai	Complete if the organization answered "		Dort IV	/ lino 110 C	000 Form 000	Dort V I	ino 10			
	Description of property	(a) Cost or o			or other		ccumulate	ed	(d) Book	value
		basis (investn	nent)	Dasis	(other)	aep	reciation			
	Land									
b	Buildings			11	C 725		2 (		112	007
	Leasehold improvements	I			6,735.		3,64			,087.
	Equipment				2,357.			18.		,239.
	Other								445	200
Total	. Add lines 1a through 1e. (Column (d) must equ	al Form 990 Part	X line 1	Oc column	(R))				TT5	,326.

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 R STREET IN	ISTITUTE	20	6-3477125 Page
Part VII Investments - Other Securities	Las Farra 000 Deat IV line	14b, 0aa Farra 000 Bart V liaa 10	
Complete if the organization answered "Yes"  (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or er	nd-of-vear market value
(d) Financial doubleshing	(b) Book value	(e) memed or valuation: occiter or	ia or your market value
(1) Financial derivatives (2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.	L F 000 D+ IV/ I'	14 - O - Farm 000 Bart V Bar 10	
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1)			
(2)			
(3)			
(4)			
(5) (6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets	•		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a)	<b>)</b> Description		(b) Book value
(1) SECURITY DEPOSIT			21,517
(2) RIGHT OF USE ASSET			1,514,635
(3)			
(4)			
(5)			
(6)			
(7)			+
(8)			
(9)	- / (D))		1,536,152
Total. (Column (b) must equal Form 990, Part X, line 15, co	<u> </u>		1,330,132
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11e or 11f. See Form 990. Part X. line 2	5.
1. (a) Description of liability		110 01 1111 000 1 0111 000, 1 4117, 1110 2	(b) Book value
(1) Federal income taxes			(=) = =================================
(2) OPERATING LEASE LIABILITY			1,573,081
(3)			
(4)			
(5)			
(6)			

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))

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) 2023

1,573,081.

(8) (9)

Schedule D (Form 990) 2023

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

Open to Public

OMB No. 1545-0047

Inspection

Employer identification number 26-3477125 Name of the organization R STREET INSTITUTE Part I General Information on Grants and Assistance

1 Does the organization maintain records t							
criteria used to award the grants or assis	stance?						X Yes No
2 Describe in Part IV the organization's pro	cedures for monit	oring the use of grant	funds in the United	States.			
Part II Grants and Other Assistance to I recipient that received more than \$					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
· · · · · · · · · · · · · · · · · · ·			<del> </del>		(f) Method of	( ) Description of	(I) Dumana of smart
(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	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
							TO COLLABORATE ON THE
SNF AGORA INSTITUTE JOHN HOPKINS							GOVERNANCE POLICY PROGRAM
UNIVERSITY - 3100 WYMAN PARK DRIVE							IN AN EFFORT TO EXPLORE
- BALTIMORE, MD 21211	52-0595110	501(C)(3)	48,000.	0.			THE OUTLINES OF
							CLIMATE CHANGE MITIGATION
FLORIDA TAXWATCH, INC.							AND ADAPTION POLICY
106 NORTH BRONOUGH STREET							VISION THAT RESONATES IN
TALLAHASSEE, FL 32301	59-1918055	501(C)(3)	37,500.	0.			FLORIDA
							CLIMATE CHANGE MITIGATION
AMERICAN CONSERVATION COALITION							AND ADAPTION POLICY
PO BOX 391							VISION THAT RESONATES IN
APPLETON, WI 54912	82-3815628	501(C)(3)	37,500.	0.			FLORIDA
NCSL FOUNDATION							
7700 EAST 1ST PLACE							PRE-CONFERENCE
DENVER, CO 80230	74-2232576	501(C)(3)	10,000.	0.			SPONSORSHIP
DERVER, 60 00200	74 2232370	301(0)(3)	10,000.	٠.			DI GREGREIII
TALENT MARKET LLC *							TO COLLABORATE WITH THE
1367 CONNECTICUT AVE NW STE 200							OPERATIONS TEAM IN THE
WASHINGTON, DC 20036	52-1928321	501(C)(3)	10,000.	0.			RECRUITING EFFORTS
							TO COLLABORATE ON A HARM
THE INFLUENCE FOUNDATION, LLC.							REDUCTION POLICY PROGRAM
143 SHARON MEADOWS							TO DEVELOP AND PUBLISH
SOUTH ROYALTON, VT 05068	82-2925236	501(C)(3)	10,000.	0.			REPORTS PERTAINING TO
2 Enter total number of section 501(c)(3) ar	nd government or	ganizations listed in the	e line 1 table			•	7.
3 Enter total number of other organizations	s listed in the line	I table					0.

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) 2023

LHA 332101 11-01-23

Schedule I (Form 990) R STREET		6-3477125 Page 1								
Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CARDINAL INSTITUTE 1632 QUARRIER ST. CHARLESTON, WV 25311	47-1932521	501(C)(3)	9,250.	0.			TO PRODUCE RESEARCH AND ORIGINAL CONTENT AND TO PARTICIPATE IN POPULAR MEDIA, TO BRING IDEAS OF			

Schedule I (Form 990)

Schedule I (Form 990) 2023 R STREET INSTIT	26-3477125 Page 2				
Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	organization answ	ered "Yes" on Form 9	990, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	dditional information.	
PART I, LINE 2:					
SUBGRANTS ARE MONITORED BY THE PROG	GRAM STAF	'F AND, DEI	PENDING ON	THE	
REQUIREMENTS IN EACH SUBGRANT AGRE	EMENT, FI	NAL AND/OF	R INTERIM N	ARRATIVE AND	
FINANCIAL REPORTS ARE SUBMITTED BY	SUBGRANT	EE. THESE	REPORTS AR	E REVIEWED	
AND APPROVED BY THE PROGRAM STAFF	AND BY TH	E FINANCE	DIRECTOR.	AT A	
MINIMUM, ALL SUBGRANTS REQUIRE A F	INAL NARR	ATIVE REPO	ORT.		
PART II, LINE 1, COLUMN (H):					

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NAME OF ORGANIZATION OR GOVERNMENT:

332102 11-01-23

Part IV Supplemental Information
SNF AGORA INSTITUTE JOHN HOPKINS UNIVERSITY
(H) PURPOSE OF GRANT OR ASSISTANCE: TO COLLABORATE ON THE GOVERNANCE
POLICY PROGRAM IN AN EFFORT TO EXPLORE THE OUTLINES OF CONSERVATIVE
PRO-DEMOCRACY MOVEMENT
NAME OF ORGANIZATION OR GOVERNMENT: THE INFLUENCE FOUNDATION, LLC.
(H) PURPOSE OF GRANT OR ASSISTANCE: TO COLLABORATE ON A HARM REDUCTION
POLICY PROGRAM TO DEVELOP AND PUBLISH REPORTS PERTAINING TO VARIOUS
TOPICS ON HARM REDUCTION
NAME OF ORGANIZATION OR GOVERNMENT: CARDINAL INSTITUTE
(H) PURPOSE OF GRANT OR ASSISTANCE: TO PRODUCE RESEARCH AND ORIGINAL
CONTENT AND TO PARTICIPATE IN POPULAR MEDIA, TO BRING IDEAS OF ELECTORAL
REFORM TO A BROAD, BIPARTISAN AUDIENCE TO INCREASE INTEREST IN REFORM ON
THE POLITICAL RIGHT

Schedule I (Form 990)

#### SCHEDULE J (Form 990)

**Compensation Information** 

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

Attach to Form 990.

2023

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

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

R STREET INSTITUTE

Employer identification number 26-3477125

**Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or X reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, Х trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 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 X Compensation survey or study Independent compensation consultant X Form 990 of other organizations X Approval by the board or compensation committee 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: X a Receive a severance payment or change-of-control payment? 4a X **b** Participate in or receive payment from a supplemental nonqualified retirement plan? 4b X c Participate in or receive payment from an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation 5 contingent on the revenues of: X a The organization? 5a X **b** Any related organization? If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: X a The organization? X **b** Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. 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 Х 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2023

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

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

		(B) Breakdown of W	/-2 and/or 1099-MISO compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	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	(i)	309,712.	0.	0.	12,238.	19,439.	341,389.	0.
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ERICA SCHODER	(i)	267,019.	0.	0.	9,185.	9,418.	285,622.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MAZEN SALEH	(i)	200,761.	5,555.	0.	8,327.	11,352.	225,995.	0.
DIR. HARM REDUCTION	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) SABRINA SCHAEFFER	(i)	202,336.	4,934.	0.	0.	6,100.	213,370.	0.
VP. PUBLIC AFFAIRS	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) DEVIN HARTMAN	(i)	198,767.	3,055.	0.	8,179.	513.	210,514.	0.
DIR. ENERGY & ENVIRONMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JILLIAN SNIDER	(i)	196,739.	2,555.	0.	7,972.	513.	207,779.	0.
DIR.CJ & CIVIL LIBERTIES	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) WAYNE BROUGH	(i)	196,095.	2,555.	0.	4,179.	513.		0.
DIR. TECHNOLOGY & INNOVATION	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2023

332112 11-06-23

#### SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023
Open to Public Inspection

Internal Revenue Service

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:

HARM REDUCTION:

R STREET'S HARM REDUCTION PROGRAM IS GROUNDED IN AN UNDERSTANDING THAT

"ABSTINENCE ONLY" APPROACHES TO RISKY BEHAVIOR 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 MITIGATEIF NOT ELIMINATETHOSE HARMS. THE PROGRAM

CONNECTS THE DOTS BETWEEN HISTORICALLY SILOED ISSUES SUCH AS: TOBACCO,

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

AND ILLICIT DRUG USE.

Schedule O (Form 990) 2023

CANNABIS,

Schedule O (Form 990) 2023 Page 2

Name of the organization R STREET INSTITUTE

Employer identification number 26-3477125

EXPENSES \$ 1,714,030. INCLUDING GRANTS OF \$ 13,770. 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 \$ 1,699,768. INCLUDING GRANTS OF \$ 77,570. 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.

#### CYBERSECURITY & 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 \$ 1,070,266. INCLUDING GRANTS OF \$ 632. REVENUE \$ 0.

EXPENSES \$ 1,022,627. INCLUDING GRANTS OF \$ 593. REVENUE \$ 0.

#### FINANCE, INSURANCE AND TRADE:

Schedule O (Form 990) 2023 Page 2

Name of the organization R STREET INSTITUTE

Employer identification number 26-3477125

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.

EXPENSES \$ 991,270. INCLUDING GRANTS OF \$ 578. REVENUE \$ 0.

LOBBYING

EXPENSES \$ 77,946. 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

OF R STREET AND THE ADVANCEMENT OF ITS PURPOSE.

Schedule O (Form 990) 2023 Page **2** 

Name of the organization  R STREET INSTITUTE	Employer identification number 26-3477125
FORM 990, PART VI, SECTION B, LINE 15A:	
THE COMPENSATION COMMITTEE SETS THE COMPENSATION OF THE PR	ESIDENT/CHAIRMAN
AND EXECUTIVE DIRECTOR AFTER REVIEWING COMPARABILITY DATA	AND IS
DOCUMENTED. THE LAST SALARY REVIEW FOR THE PRESIDENT FOR F	Y 2023 WAS IN
DECEMBER 2023, AND THE LAST REVIEW FOR THE EXECUTIVE DIREC	TOR WAS IN AUGUST
2023.	
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 O	F INTEREST
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC U	PON REQUEST.