** 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)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Α	For the	2016 calendar year, or tax year beginning	and	ending	_	
В	Check if applicable	C Name of organization			D Employer identifi	cation number
	Addres	R STREET INSTITUTE				
	Name change				26-3	477125
L	Initial return Final return/	Number and street (or P.O. box if mail is not delived 1050 17TH STREET, N.W.		Room/suite 1150	E Telephone numbe	r 525-5717
	termin- ated				G Gross receipts \$	5,946,145.
Г	Ameno		ir or foreign postar code		H(a) Is this a group re	
	Applic		S ROTHENBERG-L	EHRER	for subordinates	
	pendir	g SAME AS C ABOVE			H(b) Are all subordinates in	
$\overline{\Gamma}$	Tax-exe	empt status: X 501(c)(3) 501(c)((insert no.) 4947(a)(1)	or 527	1	list. (see instructions)
J	Websit	e: WWW.RSTREET.ORG			H(c) Group exemptio	,
			ociation Other >	L Year		A State of legal domicile: DC
		Summary				
О	1	Briefly describe the organization's mission or most s	ignificant activities: SEE	PART I	II, LINE 1.	
Š						
Governance	2	Check this box 🕨 🔲 if the organization discont	inued its operations or dispo	sed of more	than 25% of its net as	ssets.
Š	3	Number of voting members of the governing body (F	Part VI, line 1a)		3	6
ص ص	4	Number of independent voting members of the gove	erning body (Part VI, line 1b)			6
Activities &	5	Total number of individuals employed in calendar ye	ar 2016 (Part V, line 2a)		5	32
ĬĘ		Total number of volunteers (estimate if necessary) $_{\dots}$				6
Act	7 a	Total unrelated business revenue from Part VIII, colu	mn (C), line 12		7a	0.
_	b	Net unrelated business taxable income from Form 9	90-T, line 34		7b	0.
					Prior Year	Current Year
ne		Contributions and grants (Part VIII, line 1h)	4,069,963.	5,887,086.		
Revenue					0.	0.
Be		Investment income (Part VIII, column (A), lines 3, 4, a			1,051. 93,934.	1,190.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9				57,869.
_		Total revenue - add lines 8 through 11 (must equal P			4,164,948.	5,946,145. 269,201.
		Grants and similar amounts paid (Part IX, column (A)			24,901.	209,201.
	1	Benefits paid to or for members (Part IX, column (A),			2,277,056.	3,226,561.
Expenses	15	Salaries, other compensation, employee benefits (Pa			0.	0.
Sen	loa	Professional fundraising fees (Part IX, column (A), lin		39	<u> </u>	0.
ă	17	Total fundraising expenses (Part IX, column (D), line Other expenses (Part IX, column (A), lines 11a-11d, ⁻			1,169,284.	1,414,915.
		Total expenses. Add lines 13-17 (must equal Part IX,			3,471,241.	4,910,677.
		Revenue less expenses. Subtract line 18 from line 1			693,707.	
Or Sec	 .~				ginning of Current Year	End of Year
Net Assets or Find Ralances	20	Total assets (Part X, line 16)			2,131,906.	3,311,687.
ASS	21	T !! . !!!!			120,989.	265,302.
ESE ESE	22	Net assets or fund balances. Subtract line 21 from li			2,010,917.	3,046,385.
P	art II	Signature Block				
Und	der pena	lties of perjury, I declare that I have examined this return, in	cluding accompanying schedule	es and statem	ents, and to the best of m	y knowledge and belief, it is
true	e, correc	t, and complete. Declaration of preparer (other than officer)	is based on all information of w	hich preparer	has any knowledge.	
Sig	ın	Signature of officer			Date	
He	re	ELIAS ROTHENBERG-LEHRER Type or print name and title	, PRESIDENT			
		· · ·	Preparer's signature	10	Date Check	PTIN
Pai	d	Time Type proparer 3 mains	roparor o orginaluro		if	
	parer	Firm's name GELMAN, ROSENBERG	& FREEDMAN		self-employ Firm's EIN ▶	52-1392008
	Only	Firm's address 4550 MONTGOMERY A			THIII 3 LIIV	<u> </u>
		BETHESDA, MD 2081	4-2930		Phone no. (3	01) 951-9090
Ma	v the IF	RS discuss this return with the preparer shown above			1	X Yes No

Pai	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:
	R STREET IS A NATIONAL, FREE MARKET THINK TANK THAT SUPPORTS LIMITED,
	EFFECTIVE GOVERNMENT AND RESPONSIBLE ENVIRONMENTAL STEWARDSHIP. IT
	STRIVES TO CRAFT PRAGMATIC SOLUTIONS TO DOMESTIC POLICY CHALLENGES
	INVOLVING REGULATION, PUBLIC HEALTH, THE ENVIRONMENT, TAX REFORM, AND
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes X No
_	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	3, 3 3
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported. (Code:) (Expenses \$ 1,276,091 • including grants of \$ 654 •) (Revenue \$)
4a	(Code:) (Expenses \$ 1,276,091. including grants of \$ 654.) (Revenue \$) ENERGY & ENVIRONMENT: R STREET'S ENERGY & ENVIRONMENT PROGRAM FOCUSES
	ON THREE MAIN CHALLENGES. FIRST, IT STRIVES TO BUILD ON RONALD REAGAN'S
	CONSERVATION LEGACY BY IDENTIFYING AREAS WHERE GOVERNMENT SUBSIDIES AND
	REGULATIONS RESULT IN ENVIRONMENTALLY HARMFUL ACTIVITY. SECOND, IT
	PROMOTES FLOURISHING ENERGY MARKETS BY PROPOSING FREE-ENTERPRISE
	SOLUTIONS TO OUR NATION'S ENERGY CHALLENGES. FINALLY, IT ADDRESSES THE
	THREATS PRESENTED BY CLIMATE CHANGE THROUGH MARKET-ORIENTED SOLUTIONS
	DESIGNED TO CURB GREENHOUSE GAS EMISSIONS.
	PUDITIONED TO COME CHARMINOUSE CITE ENTERPRISE
	IN 2016, R STREET MADE ELECTRICITY MARKET REFORM A DISTINCT FOCUS,
	PUBLISHING ACADEMIC PAPERS, WHITE PAPERS, EDUCATIONAL DOCUMENTS, AND
	OP-EDS ON A VARIETY OF ISSUES RELATED TO PROPOSED AND ACTIVE REFORM
4b	(Code:) (Expenses \$ 810,793 • including grants of \$ 25,647 •) (Revenue \$)
	TECHNOLOGY POLICY: THE PURPOSE OF R STREET'S TECHNOLOGY POLICY PROGRAM
	(TPP) IS TO CONDUCT MARKET-ORIENTED RESEARCH AND ADVOCACY AROUND THE
	PUBLIC POLICY FRAMEWORK THAT GOVERNS BOTH ESTABLISHED AND EMERGING
	TECHNOLOGIES.
	FOR ESTABLISHED TECH SECTORS (SUCH AS TELECOM OR INTERNET GOVERNANCE),
	OUR GOAL IS TO OPERATE AT THE POINTS OF TENSION BETWEEN STAKEHOLDERS
	(SUCH AS GOVERNMENT AGENCIES AND INTERNET COMPANIES), AND PUSH BACK
	AGAINST REGULATIONS THAT UNNECESSARILY IMPEDE ECONOMIC PROGRESS OR
	INDIVIDUAL LIBERTY.
	FOR EMERGING TECH, OUR GOAL IS TO ADVANCE POLICY SOLUTIONS THAT WILL
4c	(Code:) (Expenses \$ 657,964. including grants of \$ 127,337.) (Revenue \$) FINANCIAL SERVICES: AN IMPORTANT THEME FOR R STREET'S ONGOING WORK IS
	CENTRAL BANKING, ITS NATURE, EFFECTS AND RISKS-NOT TO MENTION ITS PRETENSE OF KNOWLEDGE. NEGATIVE REAL AND NOMINAL INTEREST RATES, THE
	RESULTING ASSET PRICE BUBBLES, AND RELATED SYSTEMIC RISK WILL GIVE
	CONTINUING ESSENTIAL ISSUES FOR OUR WORK. HIGHLY RELATED TO THAT IS THE
	IMPACT ON SAVERS OF THE FED'S (AND OTHER CENTRAL BANKS') ACTIONS. IT
	LOOKS LIKE THE FED HAS TRANSFERRED FROM SAVERS MORE THAN \$1 TRILLION TO
	GIVE IT TO BORROWERS AND LEVERAGED SPECULATION. THIS IS A DEEPLY
	POLITICAL ACT, WHICH NEEDS FOCUS AND UNDERSTANDING.
	TOTTION WOI, WHICH MADDS FOCOS AND CHDENSTANDING.
	HOUSING FINANCE AND CYCLES OF BOOMS AND BUSTS ARE A LARGE PART OF R
	STREET'S WORK, WITH ANOTHER HOUSE PRICE INFLATION WELL UNDER WAY, WE
<u>4</u> d	Other program services (Describe in Schedule O.)
-ru	(Expenses \$ 1,487,038 • including grants of \$ 115,563 •) (Revenue \$)
4e	Total program service expenses 4, 231, 886.
	Form 990 (2016)

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Form 990 (2016) R STREET INS 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)?		x	
_	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		- 21
4	during the tax year? If "Yes," complete Schedule C, Part II	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		
3	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
-	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	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	X	
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			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			х
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Λ
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446	x	
100	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
ıZd	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	ıza		
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
		14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		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	000	X

Form **990** (2016)

Form 990 (2016) R STREET INSTITUTE Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
		24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			37
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b				
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			37
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			v
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			X
00	of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):	00-		Х
a		28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		x
20	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c 29		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		- 25
30	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
31		31		х
32	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
JZ	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 02		
00	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			
٠.	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
•	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
			222	

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Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response of note to any line in this Part V					Ш
			ا م		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	34			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and resources are supported by the control of th			-	37	
	(gambling) winnings to prize winners?	 T		1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		32			
	filed for the calendar year ending with or within the year covered by this return	2a		01	X	
р	If at least one is reported on line 2a, did the organization file all required federal employment tax returns the sum of line 1 and 0a is greater than 250 years are the required to a file (as a instruction)			2b	Λ	
20	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction			3a		x
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other		rity over a	30		
- a	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		x
h	If "Yes," enter the name of the foreign country:	accou		Tu		
~	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accour	nts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transactions.			5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t					
	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions c	r gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices p	provided to the payor?	7a		X
				7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w					,,
	to file Form 8282?		I	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d		_		₩
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file F If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7g 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained			/11		
Ü		-		8		
9	Sponsoring organizations maintaining donor advised funds.					
	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				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:		,			
а	Gross income from members or shareholders N/A	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	? I	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		N/A	10-		
а	Is the organization licensed to issue qualified health plans in more than one state?		11/1	13a		
h	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the					
IJ	organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
	Did the second in the second is a second of the description of the desired of the second of the seco			14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul			14b		
					990	(2016)

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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 in Schedule O. See instructions.

	Creck if Schedule O contains a response or note to any line in this Part VI			77
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7a				
	more members of the governing body?	7a		Х
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	74		
b		7b		Х
	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	76		- 21
8		0-	Х	
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	_		37
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	104		
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
		16b		
Sec	exempt status with respect to such arrangements?tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed ►CA , FL			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	wailah	le	
	for public inspection. Indicate how you made these available. Check all that apply.	vanab		
	X Own website X Another's website X Upon request Other (explain in Schedule O)			
10		l fina:	oial	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	ııman	ual	
00	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: ► JOI WASHINGTON - 202-525-5717			
	1050 17TH STREET, NW, SUITE 1150, WASHINGTON, DC 20036			

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 instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	Ĭ		((C)	•		(D)	(E)	(F)
Name and Title	Average hours per week	box	not c	heck ss pe	rson i	than is bot or/trus	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MARNI SOUPCOFF	0.50	X		Х				0.	0.	0
BOARD CHAIR (2) TEVI TROY	0.50	^		^				0.	0.	0.
BOARD MEMBER	0.30	Х						0.	0.	0.
(3) MICHAEL COHEN	0.50	<u> </u>						0.	0.	•
BOARD MEMBER	0.30	х						0.	0.	0.
(4) ROBERT WATKINS	0.50									
BOARD MEMBER		х						0.	0.	0.
(5) ROBERT INGLIS	0.50									
BOARD MEMBER		Х						0.	0.	0.
(6) RYAN ALEXANDER	0.50									
BOARD MEMBER		Х						0.	0.	0.
(7) ELI LEHRER	40.00									
PRESIDENT AND BOARD VICE CHAIR				Х				216,700.	0.	23,613.
(8) ERICA SCHODER	40.00			l				160 615		11 010
OPERATIONS DIR. & CORP. TREAS.	40.00			Х				162,617.	0.	11,019.
(9) ANDREW MOYLAN EXECUTIVE DIRECTOR	40.00				x			179,311.	0.	13,514.
(10) KEVIN KOSAR	40.00							1/3/3110	•	13/3110
DIRECTOR OF GOVERNANCE PROGRAM						x		164,250.	0.	5,335.
(11) DAVID CAMERON SMITH	40.00							, , ,		. ,
DIRECTOR OF STATE PROGRAMS						Х		146,356.	0.	22,248.
(12) CATRINA RORKE	40.00									
DIRECTOR OF ENERGY PROGRAM						Х		131,227.	0.	8,686.
(13) RAY LEHMANN	40.00									
EDITOR IN CHIEF						Х		130,696.	0.	18,040.
(14) LORI SANDERS	40.00					l		446.005		45 540
DIRECTOR OF OUTREACH						Х		116,885.	0.	17,542.
		\vdash				_				
632007 11-11-16										Form 990 (2016)

Form **990** (2016)

	(A)	(B)	ployees, and Highest (C)						(D)	(E)			(F)	
	Name and title	Average hours per week	box offi	not c , unle cer ar	ss pe	more rson	than is bot	h an	Reportable compensation from	Reportable compensatio from related		an	timate nount other	-
		(list any hours for related	Individual trustee or director	nstee			ensated		the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		fr org	pensa om the anizat	on
		organizations below line)	Individual trus	Institutional trustee	Officer	Key employee	Highest compensated employee	Former					d relat anizati	
	_													
			_											
	Sub-total		<u> </u>			<u> </u>	<u> </u>	<u> </u>	1,248,042.		0.	11	9,9	97.
С	Total from continuation sheets to Part V	II, Section A						•	0. 1,248,042.		0.	11	9,9	0.
d 2	Total (add lines 1b and 1c) Total number of individuals (including but r compensation from the organization									,000 of reportabl	-		3,3	10
	compensation from the organization												Yes	No
3	Did the organization list any former officer line 1a? <i>If</i> "Yes," <i>complete Schedule J for s</i>				•	•	•		•			3		Х
4	For any individual listed on line 1a, is the sand related organizations greater than \$15	-		-					•	the organization	- 1	4	х	
5	Did any person listed on line 1a receive or	accrue comper	nsat	ion f	from	any	unr unr	elat	ted organization or indiv	dual for services	····	_		
Sec	rendered to the organization? If "Yes," constion B. Independent Contractors	nplete Schedul	e J t	for s	uch	pers	son .					5		X
1	Complete this table for your five highest countries the organization. Report compensation for	-	-								pensa	ation f	from	
	(A) Name and business			INC					(B) Description of s		C	(C ompe) nsatio	า
	Total number of independent contractors (\$100,000 of compensation from the organ		not li	mite	d to		se lis	stec	d above) who received n	nore than				

11051110 745960 28560

. u	I V I			e or note to any li	ne in this Part VIII			
		Check if Schedule O cont	200 d (30po)	on moto to unit	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
Gra		Membership dues						
ts, An		Fundraising events						
Gif		Related organizations						
ns, Sim		e Government grants (contributi						
itio er S	f	All other contributions, gifts, grant						
JE H		similar amounts not included abov	/e 1f 5 ,	<u>,887,086.</u>				
ont od (_	Noncash contributions included in lines			E 00F 006			
<u>a</u> C	h	Total. Add lines 1a-1f		1	5,887,086.			
•	0 -			Business Code	9			
vice	2 a							
Ser	b							
am ever	d							
Program Service Revenue	е							
Pro		All other program service reve	nue					
		Total. Add lines 2a-2f						
	3	Investment income (including						
		other similar amounts)		>	1,190.			1,190.
	4	Income from investment of tax	exempt bond	proceeds >				
	5	Royalties		<u></u>				
			(i) Real	(ii) Personal				
		Gross rents	50,780	•				
		Less: rental expenses	50,780					
		Rental income or (loss)			50,780.			50,780.
		Net rental income or (loss)			50,760.			50,760.
	/ a	Gross amount from sales of	(i) Securities	(ii) Other				
	L	assets other than inventory Less: cost or other basis						
	L	and sales expenses						
		Gain or (loss)						
		Net gain or (loss)		<u> </u>				
ne		Gross income from fundraising	g events (not					
Other Revenu		including \$ contributions reported on line						
. Be		Part IV, line 18	-					
ther	h	Less: direct expenses			_			
Ö		Net income or (loss) from fund						
		Gross income from gaming ac						
		Part IV, line 19		,				
	b	Less: direct expenses						
		Net income or (loss) from gam						
	10 a	Gross sales of inventory, less	returns					
		and allowances	a	1				
	b	Less: cost of goods sold						
	С	Net income or (loss) from sale:	s of inventory .	_				
		Miscellaneous Revenu	е	Business Code				F 000
		MISCELLANEOUS		900099	7,089.			7,089.
	b							
	C							
	0	***************************************			7,089.			
	12	• Total. Add lines 11a-11d Total revenue. See instructions.			5,946,145.	0.	0.	59,059.
	14	i stat to rottato. Occ Illottactiono.			- / / ·	ı •	J •	1 22,000.

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).

Dο	Check if Schedule O contains a responsion tinclude amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	0.50 0.01	252 221		
	and domestic governments. See Part IV, line 21	269,201.	269,201.		
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,	606 554	200 050	000 500	1 4 41 6
	trustees, and key employees	606,774.	389,852.	202,503.	14,419
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.154.014	1 0 10 616	100 455	40 500
7	Other salaries and wages	2,174,814.	1,942,616.	189,475.	42,723
8	Pension plan accruals and contributions (include				4 4==
	section 401(k) and 403(b) employer contributions)	65,097.	57,492.	6,355.	1,250
9	Other employee benefits	186,115.	154,340.	29,844.	1,931
10	Payroll taxes	193,761.	165,117.	24,481.	4,163
11	Fees for services (non-employees):				
а	Management				
b	Legal	8,436.	6,793.	1,526.	117
С	Accounting	22,800.	18,359.	4,123.	318
d	Lobbying				
е	D (' 1(1 ' ' ' O D ' N' ' ' 47				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	391,582.	368,369.	21,553.	1,660
12	Advertising and promotion	8,734.	7,639.	1,017.	78
13	Office expenses	123,227.	95,983.	25,662.	1,582
14	Information technology	86,097.	83,651.	2,271.	175
15	Royalties				
16	Occupancy	207,422.	167,021.	37,512.	2,889
17	Travel	241,308.	219,554.	20,199.	1,555
18	Payments of travel or entertainment expenses	-	-	-	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	186,338.	168,858.	16,071.	1,409
20	Interest	,	,		·
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,361.	1,096.	246.	19
23	Insurance	17,620.	14,188.	3,187.	245
24	Other expenses. Itemize expenses not covered	,	,	,	_
	above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	DITEC & CITECOPTEMIONO	95,290.	80,748.	13,502.	1,040
d	TRAINING & PROF. DEV'L	12,900.	10,505.	2,224.	171
C	GRAPHIC DESIGN	7,200.	7,152.	45.	3
d	PENSION ADMIN EXP.	1,686.	1,385.	277.	24
_		2,914.	1,967.	879.	68
e		4,910,677.	4,231,886.	602,952.	75,839
25	Total functional expenses. Add lines 1 through 24e	±,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	±,4J±,000•	004,334.	15,033
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)				Earm 990 (201

Form **990** (2016)

Га	πх	Balance Sneet					
		Check if Schedule O contains a response or not	e to ar	ny line in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			242,259.	1	414,623.
	2	Savings and temporary cash investments			1,116,409.	2	1,128,296.
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net			676,905.	4	1,724,121.
	5	Loans and other receivables from current and for	officers, directors,				
		trustees, key employees, and highest compensation	ated er	nployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali	fied pe	rsons (as defined under			
ets		section 4958(f)(1)), persons described in section		-			
		employers and sponsoring organizations of sect					
		employees' beneficiary organizations (see instr).		6			
Assets	7	Notes and loans receivable, net				7	
⋖	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			53,359.	9	19,519.
	10a	Land, buildings, and equipment: cost or other		0 004			
		basis. Complete Part VI of Schedule D		8,084.	2 261		0 500
	b	Less: accumulated depreciation		5,584.	3,861.	10c	2,500.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line	_		13		
	14	Intangible assets	20 112	14	22 620		
	15	Other assets. See Part IV, line 11		39,113.	15	22,628.	
	16	Total assets. Add lines 1 through 15 (must equ			2,131,906.	16	3,311,687.
	17	Accounts payable and accrued expenses			120,989.	17	265,302.
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
Liabilities	22	Loans and other payables to current and former					
Σ E		key employees, highest compensated employee					
<u>E</u>		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela		—		23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa	,				
		parties, and other liabilities not included on lines		•		0.5	
	06	Schedule D			120,989.	25	265,302.
_	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958		ok horo X and	120,909.	26	203,302.
'n		complete lines 27 through 29, and lines 33 an		A Here P LAL AND			
ĕ	27				1,556,208.	27	1,180,685.
Fund Balances	28	Unrestricted net assets			454,709.	28	1,865,700.
Ä	29	D			20277030	29	2700077000
Ĕ	23	Organizations that do not follow SFAS 117 (A		8) check here		23	
Ϋ́		and complete lines 30 through 34.	JU 93	oj, oneok nere			
ts c	30	Capital stock or trust principal, or current funds				30	
se	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or	32	Retained earnings, endowment, accumulated in				32	
Ne	33	Total net assets or fund balances		—	2,010,917.	33	3,046,385.
	34	Total liabilities and net assets/fund balances			2,131,906.	34	3,311,687.
	1 0 7	Total habilities and het assets/fully balances			_,,	<u> </u>	-,,

Form **990** (2016)

Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
1 2 3	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1	2	5,94 4,91 1,03	0,6 5,4	77. 68.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,01	0,9	<u> 17.</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 in Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3,04	6,3	85.			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII				Ш			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.		Yes	No			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	d on a						
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							
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch							
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	-			37			
	Act and OMB Circular A-133?		. 3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ired audit			1			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	000				
			Form	990 ((2016)			

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2016

Open to Public Inspection

Name of the organization

R STREET INSTITUTE

Employer identification number 26-3477125

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

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

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

Sec	ction A. Public Support		·				
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and	` ,	` ,	, ,	ì	` ,	.,
	membership fees received. (Do not						
	include any "unusual grants.")	791,833.	2,353,072.	2,832,801.	4,069,963.	5,887,086.	15,934,755.
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	791,833.	2,353,072.	2,832,801.	4,069,963.	5,887,086.	15,934,755.
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)						6,635,367.
	Public support. Subtract line 5 from line 4.						9,299,388.
	ction B. Total Support	() 0040	# N 00 40	() 004 ()	(D 00 (=	() 00/0	(n T l
	ndar year (or fiscal year beginning in)	(a) 2012 791,833.	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4	131,033.	2,353,072.	2,832,801.	4,069,963.	5,887,086.	15,934,755.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	66.	920.	6,819.	68,724.	51,970.	128,499.
_	and income from similar sources	00.	920•	0,019.	00,724.	31,970.	120,499.
9	Net income from unrelated business						
	activities, whether or not the						
10	business is regularly carried on Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	223.	15,488.	26,253.	26,261.	7,089.	75,314.
11	Total support. Add lines 7 through 10	2231	23,1331	20,200	20,2021	7,0031	16,138,568.
12		etc. (see instruction	ons)			12	625.
	First five years. If the Form 990 is for						
	organization, check this box and stop						
Sec	ction C. Computation of Publ						
14	Public support percentage for 2016 (I	ine 6, column (f) d	ivided by line 11, c	olumn (f))		14	57.62 %
	Public support percentage from 2015					15	56.85 %
	33 1/3% support test - 2016. If the o					nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				► X
b	33 1/3% support test - 2015. If the o						
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶□
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	l organization		▶□
b	10% -facts-and-circumstances tes	t - 2015. If the org	anization did not c	heck a box on line	13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, ch	neck this box and s	stop here. Explain	in Part VI how the	
	organization meets the "facts-and-circ	cumstances" test.	The organization of	qualifies as a public	cly supported orga	anization	▶∐
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instruction	s ▶∟

Schedule A (Form 990 or 990-EZ) 2016

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
	endar year (or fiscal year beginning in) 🖊	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3) orgar	nization,
_	check this box and stop here						<u> </u>
	ction C. Computation of Publi						
	Public support percentage for 2016 (li					15	<u>%</u>
	Public support percentage from 2015					16	<u>%</u>
	ction D. Computation of Inves					l .= I	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from 2					18	%
198	33 1/3% support tests - 2016. If the						e 17 is not
	more than 33 1/3%, check this box ar						.
k	33 1/3% support tests - 2015. 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, 19	a, or 19b, check t	his box and see ins	structions	▶Ш

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
40-		
10a		
10b		

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 in (b) and (c)			
		11a		
b		11b		
	· · · · · · · · · · · · · · · · · · ·	11c		
	tion B. Type I Supporting Organizations			
	27 Type i capperang organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		103	140
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
0		•		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
<u> </u>	supervised, or controlled the supporting organization.	2		
Seci	tion C. Type II Supporting Organizations	- 1	· I	
			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			
<u> </u>	the supported organization(s).	1		
Seci	tion D. All Type III Supporting Organizations		1	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruc	ctions) T		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on	Nov. 20, 1970 (explain in	Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete S	ections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly integrat	ed Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2016

Par	TV Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizaτions _(continued)	
Secti	ion D - Distributions		, , , , , , , , , , , , , , , , , , , ,	Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	IS	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	he organization is responsive	e	
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
Saati	ion E. Dietribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
ecti	ion E - Distribution Allocations (see instructions)		Pre-2016	Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
а				
b				
С	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c			
8	Breakdown of line 7:			
а				
b	Excess from 2013			
С	Excess from 2014			
d	Excess from 2015			
е	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;
	Dat IV Section A linear 1 2 the 50 th 50 t
	Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V,
	Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
	(See instructions.)
	(See instructions.)
-	
-	
-	

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 .

OMB No. 1545-0047

Name of the organization

Employer identification number

26-3477125 R STREET INSTITUTE Organization type (check one):

or gameanon type (emeant	,					
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General Rule						
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules						
sections 509(a)(1) any one contribute	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
year, total contribu	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, 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 \rightarrow \$						
but it must answer "No" on	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to					

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional	Il space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>1,358,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>450,001.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$391,000.	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		\$350,000.	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
6		\$348,000.	Person X Payroll Noncash (Complete Part II for

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		
7		\$310,000.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
8		\$ 230,000.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
9		\$ 200,000.	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		
10		\$ 200,000.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
11		\$ <u>155,000.</u>	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
12		\$ <u>150,000.</u>	Person X Payroll Noncash (Complete Part II for		

R STREET INSTITUTE

26-3477125

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

Name of orga	ınization			Employer identification number		
R STRE	ET INSTITUTE			26-3477125		
Part III	Exclusively religious, charitable, etc., cont	ributions to organizations describ	ed in section 501(d	(7), (8), or (10) that total more than \$1,000 for		
	the year from any one contributor. Complete of completing Part III, enter the total of exclusively religious	columns (a) through (e) and the to s, charitable, etc., contributions of \$1,00	ollowing line entry. F O or less for the year. (F)	or organizations		
	Use duplicate copies of Part III if addition		, (2)			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		(e) Transfer of	gift			
	Transferee's name, address, ar	nd ZIP + 4	Relation	ship of transferor to transferee		
(a) No.						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
.						
<u> </u>	-					
		(e) Transfer of	gift			
	Transferee's name, address, a	nd ZIP + 4	Relation	ship of transferor to transferee		
(a) No. from	(h) Dumaga of wift	(a) Has of with		(d) December of how wife in held		
Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
-	_	(a) Transfer of	aift			
	(e) Transfer of gift					
-	Transferee's name, address, a	nd ZIP + 4	Relation	ship of transferor to transferee		
(a) No.	(h) Dumas - t -ifi	(2) 11-2-4-27		(a) Description of house of the hold		
Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
.						
-		(a) Turn of an of				
		(e) Transfer of				
	Transferee's name, address, a	nd ZIP + 4	Relation	ship of transferor to transferee		
-						

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

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

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

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

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

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

Tax) (see se	parate instructions), then		,, (,	,,
	601(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Name of orga	R STREE	T INSTITUTE	or acation 501/a		oyer identification number
Part I-A	Complete if the org	ganization is exempt unde	er section 501(c)	or is a section 527 o	rganization.
2 Political	campaign activity expendit	cation's direct and indirect politica ures gn activities		 ▶\$	
Part I-B		janization is exempt unde			
1 Enter th	e amount of any excise tax	incurred by the organization unde	er section 4955	▶ \$	
2 Enter th	e amount of any excise tax	incurred by organization manage	rs under section 4955	 \$	
4a Was a c	orrection made?	n 4955 tax, did it file Form 4720 f			
Part I-C	describe in Part IV. Complete if the ord	ganization is exempt unde	er section 501(c)	except section 5010	(c)(3)
 Enter th exempt Total ex line 17b Did the second the exempt Enter the made paragraph contribution 	e amount of the filing organ function activities empt function expenditures filing organization file Form e names, addresses and er ayments. For each organiza tions received that were pr	d by the filing organization for secization's funds contributed to other. a. Add lines 1 and 2. Enter here are an are all the are an are all the are and a secience and a secience and a secience and a secience are all the are an are all the are are all the are all the are are all the are are all the are are all the are all the are are are all the are all the are are are all the a	nd on Form 1120-POL, I) of all section 527 polyfrom the filing organiz separate political orga	sction 527 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Yes No the filing organization a amount of political
· -	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2016

LHA

632041 11-10-16

Sch	nedule C (Form 990 or 990-EZ) 2016 R	STREET INSTITUTE	26-3	477125 Page 2
Pa	art II-A Complete if the orgar	nization is exempt under section 501(c)(3) and fi	led Form 5768 (el	ection under
	section 501(h)).			
A C	Check 🕨 📖 if the filing organization	n belongs to an affiliated group (and list in Part IV each affiliated	l group member's nam	e, address, EIN,
	expenses, and share of	of excess lobbying expenditures).		
B C	Check 🕨 📖 if the filing organization	n checked box A and "limited control" provisions apply.		-
		on Lobbying Expenditures ures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	a Total lobbying expenditures to influer	nce public opinion (grass roots lobbying)	20,000.	
b	b Total lobbying expenditures to influer	nce a legislative body (direct lobbying)	37,555.	
c	c Total lobbying expenditures (add lines	s 1a and 1b)	57,555.	
d	d Other exempt purpose expenditures		4,853,122.	
е	e Total exempt purpose expenditures (a	add lines 1c and 1d)	4,910,677.	
f	f Lobbying nontaxable amount. Enter t	he amount from the following table in both columns.	395,534.	
	If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,0	00 \$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500	,000 \$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,00	0,000 \$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
			00 004	
	g Grassroots nontaxable amount (enter	,	98,884.	
h	h Subtract line 1g from line 1a. If zero o		0.	
i	i Subtract line 1f from line 1c. If zero or	,	0.	
j		on either line 1h or line 1i, did the organization file Form 4720	Г	
	reporting section 4911 tax for this year		L	Yes No
	(Some organizations that	4-Year Averaging Period Under section 501(h) made a section 501(h) election do not have to complete all See the separate instructions for lines 2a through 2f.)	of the five columns b	elow.
		Lobbying Expenditures During 4-Year Averaging Period		

	Lobbying Expen	ditures During 4-Yea	ar Averaging Period						
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total				
2a Lobbying nontaxable amount	242,267.	268,027.	323,562.	395,534.	1,229,390.				
b Lobbying ceiling amount (150% of line 2a, column(e))					1,844,085.				
c Total lobbying expenditures	8,590.	5,438.	12,057.	57,555.	83,640.				
d Grassroots nontaxable amount	60,567.	67,007.	80,891.	98,884.	307,349.				
e Grassroots ceiling amount (150% of line 2d, column (e))					461,024.				
f Grassroots lobbying expenditures		2,058.	500.	20,000.	22,558.				

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990-EZ) 2016 R STREET INSTITUTE 26-347712 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)).

 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f 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? 	h 1i)?	Yes	No		A	
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f 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?	h 1i)?				Amo	ount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f 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?	h 1i)?					
 a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f 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? 	h 1i)?					
 b Paid staff or management (include compensation in expenses reported on lines 1c through c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f 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? 	h 1i)?					
 b Paid staff or management (include compensation in expenses reported on lines 1c through c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f 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? 	h 1i)?					
 d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f 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? 						
 d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f 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? 						
 e Publications, or published or broadcast statements? f 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? 						
 f 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? 						
 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? 						
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?i Other activities?						
i Other activities?	·					
j Total. Add lines 1c through 1i						
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b If "Yes," enter the amount of any tax incurred under section 4912	_					
c If "Yes," enter the amount of any tax incurred by organization managers under section 491						
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Part III-A Complete if the organization is exempt under section 501(c)(4	1), section	n 501(c)	(5), or	secti	ion	
501(c)(6).						
			_		Yes	N
1 Were substantially all (90% or more) dues received nondeductible by members?				1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditu	res from the	e prior yea	ır?	3		
Dues, assessments and similar amounts from members						
		al		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amount				1		
Section 162(e) nondeductible lobbying and political expenditures (do not include amount expenses for which the section 527(f) tax was paid).	s of politica					
 Section 162(e) nondeductible lobbying and political expenditures (do not include amount expenses for which the section 527(f) tax was paid). a Current year 	s of politica			a		
 Section 162(e) nondeductible lobbying and political expenditures (do not include amount expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year 	s of politica		2			
 Section 162(e) nondeductible lobbying and political expenditures (do not include amount expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 	s of politica		2	a b		
 Section 162(e) nondeductible lobbying and political expenditures (do not include amount expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(a) 	e) dues		2	a b		
 Section 162(e) nondeductible lobbying and political expenditures (do not include amount expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion 	e) dues	ess	2	a b		
 Section 162(e) nondeductible lobbying and political expenditures (do not include amount expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) 	e) dues	ess	2	a b		
 Section 162(e) nondeductible lobbying and political expenditures (do not include amount expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion does the organization agree to carryover to the reasonable estimate of nondeductible lobb expenditure next year? 	e) dues	ess blitical	2 3	a b c s		
 Section 162(e) nondeductible lobbying and political expenditures (do not include amount expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion does the organization agree to carryover to the reasonable estimate of nondeductible lobb 	e) dues	ess blitical	2 3	a b c c 3		

SCHEDULE D (Form 990)

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.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

R STREET INSTITUTE

Employer identification number 26-3477125

Pai	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Pai			
1	Purpose(s) of conservation easements held by the organizati	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a hist	orically important land area
	Protection of natural habitat	Preservation of a cert	ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic str		
d	Number of conservation easements included in (c) acquired		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		
	year▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements in		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	tion easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes	the organization's accounting for
	conservation easements.		
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue stater	nent and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	nibition, education, or research in furthera	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ibes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement	t and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pu	blic service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		> \$
h	Assets included in Form 990. Part X		▶ \$

632051 08-29-16

Schedule D (Form 990) 2016

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

Pai	t III Organizations Maintaining C	ollections of Ar	t, His	torical Tr	easures, d	or Othe	r Simila	r Asse	ts (continu	ied)
3	Using the organization's acquisition, accession	on, and other record	s, chec	k any of the	following tha	t are a siç	gnificant u	se of its	collection	items
	(check all that apply):									
а	Public exhibition	d		Loan or exc	hange progra	ams				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and explain	n how th	ney further t	he organizati	on's exen	npt purpos	se in Par	t XIII.	
5	During the year, did the organization solicit or	receive donations	of art, hi	storical trea	sures, or oth	er similar	assets		_	
	to be sold to raise funds rather than to be ma								Yes	└─ No
Pai	t IV Escrow and Custodial Arrang		ete if the	organizatio	n answered '	"Yes" on	Form 990,	Part IV,	line 9, or	
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodia								٦,,	
	on Form 990, Part X?								Yes	└── No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fo	llowing	table:						
									Amount	
	Beginning balance									
	Additions during the year									
_	Distributions during the year									
f	Ending balance								1,,	
	Did the organization include an amount on Fo						ty?		Yes	No
Pai	If "Yes," explain the arrangement in Part XIII.									
rai	t V Endowment Funds. Complete if				•					
	<u></u>	(a) Current year	(b) F	rior year	(c) Two year	s back (d) Three ye	ars back	(e) Four y	rears back
	Beginning of year balance									
b	Contributions									
_	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
	Administrative expenses									
_	End of year balance									
2	Provide the estimated percentage of the curr	ent year end balanc	-	g, column (a	a)) held as:					
a	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
_	The percentages on lines 2a, 2b, and 2c should be a sh									
За	Are there endowment funds not in the posses	ssion of the organiza	ation tha	at are held a	ind administe	ered for th	ie organiza	ation		
	by:									es No
	(i) unrelated organizations									
	(ii) related organizations								3a(ii)	
	If "Yes" on line 3a(ii), are the related organization								3b	
4	Describe in Part XIII the intended uses of the		wment	tunds.						
Fai	t VI Land, Buildings, and Equipm) David IV	/ Uma dda G	Caa Fawa 000	Ded V	line 10			
	Complete if the organization answered	1			1					
	Description of property	(a) Cost or of			or other		cumulated	'	(d) Book	value
		basis (investn	ierit)	Dasis	(other)	aep	reciation			
	Land									
	Buildings									
	Leasehold improvements				8,084.		5,58	, -	า	,500.
d	Equipment				0,004.		٥,٥٥	±•		, 500 •
	Other		Y ook:	nn (D) line i	100)			+	2	,500.
เบเส	. Aud iiiles Ta tililougit Te. (Colultiii (u) IIIust et	quai i Uiiii 330, Fail	n, colul	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·					,

Schedule D (Form 990) 2016

Schedule D (Form 990) 2016 R STREET INS	STITUTE		26-	-3477125	Page
Part VII Investments - Other Securities.					
Complete if the organization answered "Yes" of	on Form 990, Part IV	, line 11b. See Form 990,	Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation: Cost or end	of-year market v	value
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII Investments - Program Related.		•			
Complete if the organization answered "Yes" of	on Form 990. Part IV	line 11c. See Form 990.	Part X. line 13.		
(a) Description of investment	(b) Book value		aluation: Cost or end	of-year market v	value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX Other Assets.					
Complete if the organization answered "Yes" of	on Form 990, Part IV	, line 11d. See Form 990,	Part X, line 15.		
(a) D	escription			(b) Book va	alue
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		>		
Part X Other Liabilities.					
Complete if the organization answered "Yes" of	on Form 990, Part IV		n 990, Part X, line 25.		
1. (a) Description of liability		(b) Book value			
(1) Federal income taxes					
(2)					
(3)					
(4)					
(5)					
(e)					

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2016

(7) (8)

Schedule D (Form 990) 2016

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No. 1545-0047

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

➤ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization R STREET	INSTITUTE	2					Employer identification number 26 – 3477125
Part I General Information on Grants a	ınd Assistance						
 Does the organization maintain records criteria used to award the grants or assi Describe in Part IV the organization's presented. 	stance?						
Part II Grants and Other Assistance to	Domestic Organ	izations and Domest	ic Governments. C	omplete if the org	anization answered "\	Yes" on Form 990, Par	t IV, line 21, for any
recipient that received more than	\$5,000. Part II car	be duplicated if addit	tional space is need	ded.	(6) Madle and af	·	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
AMERICAN CONSUMER INSTITUTE							
PO BOX 2161							SUBGRANT - PROGRAM
RESTON, VA 20195	20-8601897	501(C)(3)	65,000.	0.			SUPPORT
JOHN LOCKE FOUNDATION							
200 W. MORGAN ST., STE 200				_			SUBGRANT - PROGRAM
RALEIGH, NC 27601	59-2811908	501(C)(3)	15,000.	0.			SUPPORT
JAMES MADISON INSTITUTE 100 N DUVAL ST.							SUBGRANT - PROGRAM
TALLAHASSEE, FL 32301	56-1656943	501(C)(3)	47,000.	0.			SUPPORT
FREEDOMWORKS FOUNDATION 400 N CAPITOL ST. NW, STE 765 WASHINGTON, DC 20001	52-1526916	501(C)(3)	25,000.	0.			SUBGRANT - PROGRAM SUPPORT
TEXAS PUBLIC POLICY FOUNDATION 900 CONGRESS ST., STE 400 AUSTIN, TX 78701	74-2524057	501(C)(3)	115,000.	0.			SUBGRANT - PROGRAM SUPPORT
 Enter total number of section 501(c)(3) a Enter total number of other organization 		4					5. • 0.

Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (b) Number of recipients (c) Amount of cash grant (d) Amount of non-cash assistance (b) Number of recipients (e) Method of valuation (book, FMV, appraisal, other) (f) Description of noncash assistance (d) Amount of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) (e) Method of valuation (book, FMV, appraisal, other) (f) Description of noncash assistance (g) Amount of non-cash assistance (g) Amount						
Part III Grants and Other Assistance to Domestic Indivi		organization answ	ered "Yes" on Form 9	990, Part IV, line 22.		<u> </u>
(a) Type of grant or assistance				(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash	assistance
Part IV Supplemental Information. Provide the information	n required in Part I, lin	ie 2; Part III, colum	n (b); and any other a	dditional information.		
PART I, LINE 2:						
SUBGRANTS ARE MONITORED BY THE	PROGRAM STA	FF AND, DI	EPENDING ON	THE		
REQUIREMENTS IN EACH SUBGRANT A	GREEMENT, F	INAL AND/	OR INTERIM	NARRATIVE AND		
INANCIAL REPORTS ARE SUBMITTED	BY SUBGRAN	TEE. THESI	E REPORTS A	RE REVIEWED		
AND APPROVED BY THE PROGRAM STA	FF AND BY T	HE FINANCI	E DIRECTOR.	AT A		
MINIMUM, ALL SUBGRANTS REQUIRE	A FINAL NAR	RATIVE REI	PORT.			

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.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

R STREET INSTITUTE

Employer identification number 26-3477125

Pa	art I Questions Regarding Compensation			
			Yes	No
1 a	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	, 3		37	
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		37	
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
•				
3	Indicate which, if any, of the following the filing 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.			
	 Compensation committee Independent compensation consultant Written employment contract Compensation survey or study 			
	Independent compensation consultant Independent compensation compensation committee Independent compensation compensation compensation compensation compensation comp			
	Approval by the board of compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		v	
_	not described on lines 5 and 6? If "Yes," describe in Part III	7	X	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			v
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2016

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(6)(1)-(0)	reported as deferred on prior Form 990
(1) ELI LEHRER	(i)	181,439.	35,261.	0.	6,928.	16,685.	240,313.	0.
PRESIDENT AND BOARD VICE CHAIR	(ii)	0.	0.	0.	0.	0.		0.
(2) ERICA SCHODER	(i)	148,617.	14,000.	0.	4,973.	6,046.	173,636.	0.
OPERATIONS DIR. & CORP. TREAS.	(ii)	0.	0.	0.	0.	0.		0.
(3) ANDREW MOYLAN	(i)	165,811.	13,500.	0.	5,472.	8,042.		0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KEVIN KOSAR	(i)	150,750.	13,500.	0.	4,928.	407.		0.
DIRECTOR OF GOVERNANCE PROGRAM	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) DAVID CAMERON SMITH	(i)	135,231.	11,125.	0.	4,312.	17,936.		0.
DIRECTOR OF STATE PROGRAMS	(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)							
	(i)							
	(ii)							
	(i)							
	(ii)						L	

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 1A:
R STREET PROVIDES A TAXABLE HEALTH CLUB BENEFIT TO ALL FULL-TIME EMPLOYEES.
UPON PROOF OF PAYMENT, R STREET REIMBURSES UP TO \$50 PER MONTH FOR HEALTH
CLUB DUES.
PART I, LINE 7:
THE ORGANIZATION PROVIDED BONUSES TO THE FOLLOWING OFFICERS/EMPLOYEES:
ANDREW MOYLAN \$13,500
ERICA SCHODER \$14,000
KEVIN KOSAR \$13,500
DAVID CAMERON SMITH \$11,125
CATRINA RORKE \$9,250
RAY LEHMANN \$13,750
LORI SANDERS \$9,500

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2016
Open to Public Inspection

Name of the organization

R STREET INSTITUTE

Employer identification number 26-3477125

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE FEDERAL BUDGET.

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

ISSUES. WE'VE CONTINUED OUR EFFORTS ON CARBON PRICING, PUBLISHING A

SERIES OF PAPERS LAYING THE FOUNDATION FOR OUR PRINCIPLED WORK ON A

REVENUE NEUTRAL CARBON TAX. IN COLLABORATION WITH THE AMERICAN

CONSERVATIVE, WE PUBLISHED A SERIES OF PIECES LAYING OUT A CONSERVATIVE

VISION FOR ENVIRONMENTAL AND ENERGY POLICY. WE CONTINUE TO PLACE

EMPHASIS ON FEDERAL CONGRESSIONAL STAFF EDUCATION, AN ESPECIALLY HIGH

PRIORITY IN PREPARATION FOR THE NEXT CONGRESS. WE ALSO EXPANDED OUR

WORK IN CROP INSURANCE REFORM IN 2016 THROUGH FIVE RESEARCH PAPERS AND

INCREASED CONGRESSIONAL EDUCATION. OTHER 2016 PROJECTS INCLUDE WORK ON

THE RENEWABLE FUEL STANDARD, THE GREENSCISSORS COALITION, NUCLEAR POWER

PLANT RETIREMENTS, AND TRENDS IN DIVESTMENT.

IN 2017, R STREET IS CONTINUING ITS WORK ON ELECTRICITY MARKET REFORM,

INCLUDING WORK ON REMOVING REGULATORY BARRIERS FOR CLEAN ENERGY AND

ENERGY INNOVATION. KEY WORK INCLUDES A WHITE PAPER ON BASELOAD

RETIREMENTS, MEETINGS WITH KEY STAKEHOLDERS AND POLICYMAKERS AT THE

STATE LEVEL ON CARBON PRICING AND REFORMING ELECTRICITY MARKETS, AND

OUTREACH TO CONSERVATIVES ON A PRINCIPLED, MARKET-BASED ENERGY POLICY.

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

MAKE THE FUTURE HAPPEN SOONER. WHETHER IT'S AUTONOMOUS VEHICLES,

AUGMENTED REALITY, OR HEALTH INNOVATIONS - WE BELIEVE DELAYING NEW

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

Schedule O (Form 990 or 990-EZ) (2016)

632211 08-25-16

Name of the organization

R STREET INSTITUTE

Employer identification number 26-3477125

TECHNOLOGIES HAS A REAL HUMAN COST THAT WOULD-BE REGULATORS DON'T ADEQUATELY CONSIDER.

BROADLY SPEAKING, WE EMBRACE THE CONCEPT OF "PERMISSIONLESS INNOVATION"

OVER THE "PRECAUTIONARY PRINCIPLE" - NAMELY, THAT THE BURDEN OF PROOF

IS ON THOSE WHO BELIEVE NEW INNOVATIONS SHOULD BE REGULATED TO

DEMONSTRATE POTENTIAL HARM. YET, WE ALSO SEEK TO OPERATE AT A DEEPER

LEVEL THAN JUST REASONING FROM FIRST PRINCIPLES. OUR MOTTO ISN'T MERELY

ABOUT "FREE MARKETS," IT'S ABOUT "REAL SOLUTIONS." THUS, WE WANT TO BE

IN THE WEEDS AND IN THE OVERTON WINDOW OF WHERE A POLICY DEBATE IS

HAPPENING. WHAT WE ADVOCATE FOR WON'T ALWAYS BE THE PERFECT LIBERTARIAN

SOLUTION, BUT IT WILL INCREMENTALLY ADVANCE THE CAUSE OF LIBERTY.

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

ARE HEADING FOR SOME DIFFICULT FUTURE RECKONING. CAN WE EVER GET THE

HOUSING FINANCE SECTOR TO IMPLEMENT COUNTER-CYCLICAL REFORMS? CAN WE

EVER GET FANNIE AND FREDDIE INTO SOME RATIONAL STRUCTURE? WITH THE NEXT

FINANCIAL CRISIS ALWAYS NEARER TO US THAN WE REALIZE, CONSTANT FOCUS ON

THE REPEATING HISTORY OF CYCLES IS NEEDED. A MARK OF OUR WORK GOING

FORWARD IS VIEWING FINANCIAL ISSUES IN THEIR LONG-TERM HISTORICAL

PERSPECTIVE, SO LITTLE UNDERSTOOD AND SO LITTLE KNOWN BY MOST FINANCIAL

PROFESSIONALS, LET ALONE THE AVERAGE PERSON. THIS INCLUDES THE

EVOLUTION OF THE BANKING SECTOR.

R STREET WORKS ON A VARIETY OF OTHER ISSUES RELATED TO FINANCIAL
CRISES, BANKING AND FINANCIAL REGULATION, RETIREMENT FINANCE, STUDENT
LOANS, AND RISK AND UNCERTAINTY. PUERTO RICO IS THE BIGGEST MUNICIPAL
INSOLVENCY IN HISTORY AND TRICKY IN POLITICS, ECONOMICS, FINANCE. R

UNCERTAINTY AND RISK WILL REMAIN KEY THEMES.

Name of the organization

Employer identification number

R STREET INSTITUTE 26-3477125

STREET WILL STAY INVOLVED. ANTI-PRODUCTIVE FINANCIAL REGULATION NEEDS

REFORM. HERE WE FIND MORE UNJUSTIFIED PRETENSE OF KNOWLEDGE. ALSO

HIGHLY RELATED ARE THE GROWING INSOLVENCIES OF PENSION PLANS AND THE

GOVERNMENT'S GUARANTEES OF THEM. WHAT KIND OF BAILOUTS WILL BE

ATTEMPTED AND WHAT REFORMS CAN WE SUGGEST INSTEAD OR IN ADDITION?

FINALLY, FINANCIAL EVENTS ARE MARKED BY FUNDAMENTAL UNCERTAINTY.

IN ALL THESE AREAS, R STREET CONTINUES TO BE IN SUBSTANTIVE DISCUSSION
WITH THE RELEVANT CONGRESSIONAL CONTACTS, WORKING ON THE POLITICAL AS
WELL AS THE INTELLECTUAL DISCUSSIONS IN THE ABOVE AREAS. A VERY
PRODUCTIVE ACTIVITY IS MAINTAINING ACTIVE COLLABORATION AND TEAMWORK
WITH FRIENDS AND COLLEAGUES AT AEI. R STREET SHOULD CONTINUE FREQUENT
CONFERENCES ON VARIOUS IMPORTANT ISSUES THERE. OTHER IMPORTANT
COMMUNICATIONS ARE WITH OTHER THINK TANKS, ACADEMICS, JOURNALISTS,
EDITORS, FINANCIAL PRACTITIONERS, AND ANYBODY WITH INTERESTING IDEAS IN
THE FIELD. WE'VE CONTINUED TO BUILD OUR PROFILE IN THE FINANCIAL AND
FINANCIAL POLICY WORLD.

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

PUBLIC HEALTH: R STREET'S PUBLIC HEALTH PROGRAM EXAMINES HOW HARM

REDUCTION PROGRAMS AND POLICIES CAN POSITIVELY IMPACT THE CONSEQUENCES

THAT RISKY BEHAVIOR HAS ON BOTH INDIVIDUALS AND COMMUNITIES. WITH AN

EMPHASIS ON TOBACCO USE, IV DRUG USE, AND SEXUAL ACTIVITY OUR PUBLIC

HEALTH PROGRAM BRINGS A HARM REDUCTION PERSPECTIVE TO BOTH POSITIVE AND

NEGATIVE BEHAVIORS. OUR PRIMARY FOCUS REMAINS ON CURRENT TOPICS WHERE A

HARM REDUCTION APPROACH CAN HAVE A POSITIVE IMPACT. EXAMPLES INCLUDE

PROMOTING PUBLIC POLICIES THAT ENCOURAGE SMOKERS TO SWITCH TO LESS

Name of the organization **Employer identification number** R STREET INSTITUTE 26-3477125 HARMFUL NICOTINE PRODUCTS, LIKE ELECTRONIC CIGARETTES, THAT INCREASE CLEAN SYRINGE ACCESS TO STOP THE SPREAD OF INFECTIOUS DISEASE AND THAT ALLOW PEOPLE TO ENGAGE IN SAFE SEX. IN 2016 AND 2017, R STREET CONTINUED TO PUBLISH STUDIES AND OP-EDS ON HARM REDUCTION AND ENGAGED IN REGULATORY OUTREACH AND EDUCATION EFFORTS AROUND THE COUNTRY. EXPENSES \$ 441,684. INCLUDING GRANTS OF \$ 114. REVENUE \$ 0. CRIMINAL JUSTICE: R STREET'S CRIMINAL JUSTICE PROGRAM AIMS TO FORWARD A COMPREHENSIVE, SOLUTIONS-BASED CONSERVATIVE/LIBERTARIAN PROGRAM THAT DEALS WITH POLICING AND ADULT AND JUVENILE CORRECTIONS. R STREET'S ACTIVITIES INCLUDED LEADING THE WAY ON ISSUES OF JAIL REFORM, POLICING ISSUES, EMPLOYMENT FOR INDIVIDUALS WITH CRIMINAL HISTORY RECORDS, AND PLAYING A MAJOR ROLE IN EDUCATING THE PUBLIC AND LEGISLATORS ABOUT THE PROBLEMS INVOLVED IN THE PRACTICE OF INCLUDING JUVENILES ON SEX OFFENDER REGISTRIES. EXPENSES \$ 403,614. INCLUDING GRANTS OF \$ 115,152. REVENUE \$ 0. GOVERNANCE: THE GOVERNANCE PROJECT EXAMINES DEMOCRATIC DYSFUNCTION WITH A PARTICULAR FOCUS ON THE U.S. CONGRESS. THE AIM IS TO DIAGNOSE THE SOURCES OF THE DYSFUNCTION AND TO FIND REFORM PROPOSALS THAT PRODUCE MORE EFFECTIVE GOVERNANCE, AS INDICATED BY MORE TIMELY AND SUSTAINABLE BUDGETING, A REINVIGORATION OF CONGRESS AS THE FIRST BRANCH OF GOVERNMENT AND MORE CONSISTENT AND RESULTS-FOCUSED OVERSIGHT OF THE EXECUTIVE BRANCH. THE CENTERPIECE OF THE PROJECT IS THE LEGISLATIVE BRANCH CAPACITY WORKING GROUP (LBCWG), A JOINT PROJECT OF THE R STREET INSTITUTE AND NEW AMERICA. THE LBCWG IS A MONTHLY MEETING OF CONGRESSIONAL STAFF AND EXPERTS HELD IN THE U.S. CAPITOL. THE GROUP DISCUSSES VARIOUS ASPECTS OF CONGRESSIONAL CAPACITY, SUCH AS STAFFING 632212 08-25-16

Name of the organization **Employer identification number** R STREET INSTITUTE 26-3477125 AND LEGISLATIVE BRANCH ORGANIZATION AND RESOURCES. THE INFORMATION HUB FOR THE LBCWG IS LEGBRANCH.COM, WHICH CARRIES NEW INFORMATIVE CONTENT AND ANALYSES EACH WEEK. THE GOVERNANCE PROJECT HAS PRODUCED RESEARCH ON CONGRESSIONAL OVERSIGHT, THE FEDERAL BUDGET, LEGISLATIVE SUPPORT AGENCIES, AND BUREAUCRACY. EXPENSES \$ 365,271. INCLUDING GRANTS OF \$ 183. REVENUE \$ 0. TAX & EXPENDITURE: R STREET'S TAX & EXPENDITURE PROGRAM PROMOTES SOUND TAX POLICY AND RESPONSIBLE LIMITS ON SPENDING. R STREET HAS ESTABLISHED ITSELF AS A NATIONAL LEADER ON INTERNET SALES TAX POLICY. IN 2015 AND 2016, R STREET WORKED DILIGENTLY ON CAPITOL HILL TO HELP CRAFT AN ALTERNATIVE APPROACH TO THE FLAWED MARKETPLACE FAIRNESS ACT. WE WERE ALSO AN ACTIVE PARTICIPANT IN ONGOING COALITIONS TO REFORM PROGRAMS LIKE THE MISGUIDED EXPORT-IMPORT BANK AND DISTORTIONARY TAX PREFERENCES FOR ENERGY SOURCES. WE MADE THE PRINCIPLED CASE FOR REFORMING SIGNIFICANTLY--AND ULTIMATELY ELIMINATING--STRUCTURALLY DEFICIENT LEVIES, LIKE THE CORPORATE INCOME TAX AND THE DEATH TAX. R STREET STAFF ALSO ENGAGED HEAVILY IN STATE-LEVEL BUDGET FIGHTS IN STATES LIKE FLORIDA, TEXAS, CALIFORNIA AND ALABAMA. EXPENSES \$ 154,608. INCLUDING GRANTS OF \$ 81. REVENUE \$ 0. INCOME MOBILITY: R STREET'S WORK ON INCOME MOBILITY EXAMINES POLICY SOLUTIONS, CENTERED ON WORK, FAMILY AND COMMUNITY--THAT ENSURE ALL AMERICANS HAVE ACCESS TO THE FUNDAMENTAL TOOLS NECESSARY TO ACCESS OPPORTUNITY. OUR 2016 WORK FOCUSED ON THE DIFFERENCE IN THE REAL VALUE OF EITC PAYMENTS BASED ON VARYING COSTS OF LIVING, AS WELL AS ON POTENTIAL REFORMS TO WIC. IN 2017, R STREET HAS PUBLISHED ON REFORMING

OCCUPATIONAL LICENSING REQUIREMENTS AND CONTINUED OUR WORK ON HOW

ENHANCE OPPORTUNITY.

Name of the organization R STREET INSTITUTE

Employer identification number 26-3477125

POLICY CAN EMPOWER WORKERS TO ENTER INTO THE 'GIG ECONOMY' IN ORDER TO

EXPENSES \$ 121,861. INCLUDING GRANTS OF \$ 33. 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 OPERATIONS DIRECTOR 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.

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

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

COMMITTEE AFTER REVIEWING COMPARABILITY DATA AND IS DOCUMENTED. THE

COMPENSATION OF ALL OTHER EMPLOYEES IS EVALUATED AND SET BY THE

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

SALARY REVIEW TOOK PLACE IN DECEMBER 2016.

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat 9.x products and later products, select "None"in the "Page Scaling" selection box in the Adobe "Print" dialog.

STATE COPY

2016 TAX RETURN FILING INSTRUCTIONS

CALIFORNIA FORM 199

FOR THE YEAR ENDING

DECEMBER 31, 2016

Prepared for	R STREET INSTITUTE 1050 17TH STREET, N.W. NO. 1150 WASHINGTON, DC 20036
Prepared by	GELMAN, ROSENBERG & FREEDMAN 4550 MONTGOMERY AVE SUITE 650N BETHESDA, MD 20814-2930
To be signed and dated by	NOT APPLICABLE
Amount of tax	Total tax \$ 0.00 Less: payments and credits \$ 0.00 Plus: other amount \$ 0.00 Plus: interest and penalties \$ 0.00 NO PMT REQUIRED \$
Overpayment	Credited to your estimated tax \$ 0.00 Other amount \$ 0.00 Refunded to you \$ 0.00
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE FTB, AND NO FURTHER ACTION IS REQUIRED. DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE FTB.
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	

TAXABLE YEAR **2016**

California Exempt Organization Annual Information Return

628941 11-30-16 FORM

199

Ca	lendar Year	r Year 2016 or fiscal year beginning (mm/dd/yyyy) , and ending (mm/dd/yyyy) .							
С	orporation/Or	ganization name			Cal	ifornia corp	oration	number	
		ET INSTITUTE				3994	047		
A	dditional infor	mation. See instructions.				26-3	177	1125	
S	treet address	(suite or room)				PMB no.	4//	123	
		7TH STREET, N.W., NO. 1150							
_	ity	THE BILLETT HOWEY HOT THE			State	ZIP code			
W.	ASHIN	GTON			DC	2003	6		
F	oreign country	y name Foreign province/state/	/county			Foreign p	ostal co	ode	
Α	First Retu			npt under R&T					
В	Amended	I Return • ☐ Yes X No		ed in political a					
C		, , , ,		•	•			•	Yes X No
D		rmation Return?		," enter the gro				_	
				nization is exer eets the filing fo					
Ε		(mm/dd/yyyy) • Counting method: (1) Cash (2) X Accrual (3) Other		•				_	₹
F				organization a l	imited Liahili	ty Compa	nv?		Yes X No
•				e organization f					
G		group filing? See instructions • Yes X No		taxable income				•	Yes X No
Н	Is this or			organization ur					
		hat is the parent's name?	IRS au	dited in a prior	year?			•	Yes X No
			P Is a fe	deral Form 102	3/1024 pendi	ng?			Yes X No
I		rganization have any changes to its guidelines	Date fi	led with IRS _					
_		ted to the FTB? See instructions Yes X No		2 0					
_	Part I	complete Part I unless not required to file this form. See General Inst					1		59,059. ₀₀
		 Gross sales or receipts from other sources. From Side 2, Part II, Gross dues and assessments from members and affiliates 	, IIIIe o				2		00 • 00 00
		3 Gross contributions, gifts, grants, and similar amounts received	 		STMT	' 1 •	3	5,88	37,086. ₀₀
	Receipts	 Gross contributions, gifts, grants, and similar amounts received Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$50,000, see General 	Instruction	В		······	4		16,145.00
	and	5 Cost of goods sold	•	5		00		-	
•	Revenues	Cost of goods soldCost or other basis, and sales expenses of assets sold	•	6		00			
		7 Total costs. Add line 5 and line 6					7		00
		8 Total gross income. Subtract line 7 from line 4				•	8		16,145.00
ı	Expenses	9 Total expenses and disbursements. From Side 2, Part II, line 18				······ •	9	4,91	0,677.00
_	-	10 Excess of receipts over expenses and disbursements. Subtract I				•	10	1,03	35,468. ₀₀
		11 Total payments 12 Use tax. See General Instruction K					11		00
		Use tax. See General Instruction KPayment balance. If line 11 is more than line 12, subtract line 12					13		00
F	ilina Fee	14 Use tax balance. If line 12 is more than line 11, subtract line 11 f					14		00
•	9 . 00						15		N/A 00
							16		00
		17 Balance due. Add line 12, line 15, and line 16. Then subtract lin	ne 11 from	the result		•	17		00
Si	an .	Under penalties of perjury, I declare that I have examined this return, including accit is true, correct, and complete. Declaration of preparer (other than taxpayer) is based to be a correct to the correct of the cor	companying ised on all in	schedules and st formation of whic	atements, and to h preparer has a	ny knowled	t my kn Ige.	owledge and be	liet,
He		Signature	Title		Date			● Telephone	
		Signature of officer	PRES	IDENT Date				● PTIN	
		Preparer's ▶		Dute	Check			FIIIN	
D-	id	Preparer's signature			seir-er	mployed	•	● FEIN	
Pa Pr	iia eparer's	Firm's name (or yours, GELMAN, ROSENBERG & FREED	MAN					52-139	2008
	eparers se Only	employed) 4550 MONTGOMERY AVE SUITE		Ŋ				● Telephone	
-00		and address BETHESDA, MD 20814-2930						(301)	951-9090
		May the FTB discuss this return with the preparer shown above? See	instruction	ns		• X	Yes	No No	

R STREET INSTITUTE

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

628951 11-3

		1	Gross sales or receipts from all	business a	ctivities. See instr	ructions		•	1	
		2	Interest					•	2	1,190.00
		3	Dividends					•	3	
Receip	pts	4	Gross rents					•	4	50,780.00
from		5	Gross royalties					•	5	<u> </u>
Other		6	Gross amount received from sa	le of assets	(See Instructions	s)		•	6	
Source	es	7	Other income				SEE STA	TEMENT 2 •	7	
		8	Total gross sales or receipts fro						8	
		9	Contributions, gifts, grants, and	l similar am	ounts paid		STA	T.EMENT. 2 •	9	·
		10	Disbursements to or for member	ers toro and tr			CEE CUV	- ΛΕΜΕΝΙΦ <i>1</i>	10	
		11 12	Compensation of officers, direct	tors, and tri	isiees		SEE SIE		12	0 4 = 4 04 4
Expen	ا ءء		Other salaries and wages						13	<u> </u>
and	363		Interest Taxes						14	
Disbur	rse-		Rents						15	
ments		16	Depreciation and depletion (Sec	e instruction	s)			•	16	
		17	Other Expenses and Disbursem	ents	· · · · · · · · · · · · · · · · · · ·		SEE STA	TEMENT 5 •	17	
		18	Total expenses and disburseme	ents. Add lir	e 9 through line	17. Enter	here and on Side 1. P	art I, line 9	18	
Sche	edul				Beginning				d of tax	xable year
Assets	3				(a)		(b)	(c)		(d)
1 Ca	ash						1,358,668.			• 1,542,919.
2 Ne	et acc	ounts	receivable				676,905.			• 1,724,121.
3 Ne	et not	es rec	ceivable							•
4 In	vento	ries .								•
			state government obligations							•
			in other bonds							•
			in stock							•
	ortga	-								•
9 Ot	ther ir	ivestr	ments		8,084			8,08	1	•
10 a	Debi	eciabi	le assets mulated depreciation	(4,223.	•	3,861.			2,500.
11 La				(4,225	1	3,001.	3,30-	- /	•
	ther a	este	STMT 6				92,472.			• 42,147.
13 To	ntala	ssets	·				2,131,906.			3,311,687.
			et worth				_,,			7,522,755
			yable				120,989.			• 265,302.
			s, gifts, or grants payable							•
			otes payable							•
17 M	ortga	ges p	ayable							•
18 Ot										
19 Ca	apital	stock	or principal fund							•
			tal surplus. Attach reconciliation				0 010 015			0 0 1 6 0 0 5
			nings or income fund				2,010,917.			• 3,046,385.
			ties and net worth			_	2,131,906.			3,311,687.
Sche	eaui	e iv	1-1 Reconciliation of income Do not complete this sche				e 13 column (d) is le	ss than \$50 000		
1 M	at inco	nmo r	•		1,035,		7 Income recorded	<u> </u>		
			oer books me tax	······ <u>F</u>	1,033,	1 00•	not included in t			•
			me tax pital losses over capital gains					nis return. is return not charged		
			recorded on books this year					ome this year		•
			corded on books this year not				9 Total. Add line 7			
			this return	•			10 Net income per r			
			ne 1 through line 5		1,035,	468.	Subtract line 9 fr			1,035,468.
			•	I	<u> </u>		1			-

FORM 199	CASH CONTRIBUTIONS CLUDED ON PART I, LINE 3	ST	ATEMENT 1
CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
WILLIAM AND FLORA HEWLETT FOUNDATION	2121 SAND HILL ROAD MENLO PARK, CA 94025	12/31/16	1,358,000.
JOHN D. AND CATHERINE T. MACARTHUR FOUNDATION	140 SOUTH DEARBORN STREET SUITE 1200 CHICAGO, IL 60603	12/31/16	500,000.
RAI SERVICES COMPANY	P.O. BOX 464 WINSTON-SALEM, NC 27102	12/31/16	450,001.
STATE FARM	3 STATE FARM PLAZA BLOOMINGTON, IL 61791-0001	12/31/16	391,000.
GOOGLE INC.	1600 AMPHITHEATRE PARKWAY MOUNTAIN VIEW, CA 94043	12/31/16	350,000.
THE ENERGY FOUNDATION	301 BATTERY ST. 5TH FLOOR SAN FRANCISCO, CA 94111	12/31/16	348,000.
PMI GLOBAL SERVICES INC.	1399 NEW YORK AVENUE SUITE 400 WASHINGTON, DC 20005	12/31/16	310,000.
RENAISSANCERE SERVICES LTD	805 15TH ST NW WASHINGTON, DC 20002	12/31/16	230,000.
CLEARPATH	1355 GREENWOOD CLIFF, SUITE 301 SUITE 301 CHARLOTTE, NC 28204	12/31/16	200,000.
LINDEN TRUST FOR CONSERVATION	156 W 56TH STREET SUITE 900 NEW YORK, NY 10019	12/31/16	200,000.
WALTON FAMILY FOUNDATION	PO BOX 2030 BENTONVILLE, AR 72712	12/31/16	155,000.
OPEN SOCIETY FOUNDATION	224 W. 57TH STREET NEW YORK, NY 10019	12/31/16	150,000.
PUBLIC WELFARE FOUNDATION	1200 U ST. NW WASHINGTON, DC 20009	12/31/16	100,000.
UBER TECHNOLOGIES INC.	1455 MARKET ST. STE 400 SAN FRANCISCO, CA 94103	12/31/16	100,000.
MITCHELL FAMILY FOUNDATION	PO BOX 8937 THE WOODLANDS, TX 77384-8937	12/31/16	75,000.

R STREET INSTITUTE			26-3477125
ASSOCIATION OF BERMUDA INSURERS AND REINSURERS	1445 NEW YORK AVENUE 7TH FLOOR WASHINGTON, DC 20005	12/31/16	55,000.
EBAY INC.	1250 I STREET NW* SUITE 1002 WASHINGTON, DC 20005	12/31/16	50,000.
ORAM FOUNDATION VIA FIDELITY CHARITABLE	345 E. LINDEN AVE. ENGLEWOOD, NJ 07631	12/31/16	50,000.
SEARLE FOUNDATION	1055 THOMAS JEFFERSON ST NW SUITE L 26 WASHINGTON, DC 20007	12/31/16	50,000.
USAA	9800 FREDERICKSBURG RD. SAN ANTONIO, CA 78288	12/31/16	50,000.
WALMART	702 SW 8TH STREET BENTONVILLE, AR 72716	12/31/16	50,000.
APPLE INC.	901 15TH ST NW SUITE 1000 WASHINGTON, DC 20005	12/31/16	48,500.
ARCH CAPITAL SERVICES INC.	360 HAMILTON AVE. SUITE 600 WHITE PLAINS, NY 10601	12/31/16	40,000.
CONSUMER TECHNOLOGY ASSOCIATION	1919 S. EADS ST. ARLINGTON, VA 22202	12/31/16	40,000.
LYFT INC.	185 BERRY ST. SUITE 5000 SAN FRANCISCO, CA 94107	12/31/16	40,000.
UPS	316 PENNSYLVANIA AVE SE WASHINGTON, DC 20003	12/31/16	40,000.
ZENEFITS	303 SECOND ST. SUITE 401 SAN FRANCISCO, CA 94107	12/31/16	37,000.
SCHWAB CHARITABLE FUND	211 MAIN STREET FLOOR 11 SAN FRANCISCO, CA 94105	12/31/16	35,000.
PANDORA	2101 WEBSTER STREET, 16TH FLOOR OAKLAND, CA 94612	12/31/16	31,000.
CHICAGO MERCANTILE EXCHANGE	20 SOUTH WACKER DR. CHICAGO, IL 60606	12/31/16	30,000.
FACEBOOK	1601 WILLOW ROAD MENLO PARK, CA 94025	12/31/16	30,000.
1-800 CONTACTS	51 WEST CENTER STREET OREM, UT 84057	12/31/16	27,000.
ALLIED WORLD ASSURANCE	199 WATER STREET 24TH & 29TH FLOORS NEW YORK, NY 10038	12/31/16	25,000.

R STREET INSTITUTE			26-3477125
ALTRIA	101 CONSTITUTION AVE NW SUITE 400W WASHINGTON, DC 20001	12/31/16	25,000.
DCI GROUP	1828 L STREET, NW SUITE 400 WASHINGTON, DC 20036	12/31/16	25,000.
ELECTRONIC PAYMENTS COALITION	1909 K ST NW STE 500 WASHINGTON, DC 20006-1117	12/31/16	25,000.
TESLA	101 CONSTITUTION AVE. NW STE. 525 WASHINGTON, DC 20001	12/31/16	25,000.
WALKER FOUNDATION	1729 COVENTRY PLACE DECATUR, GA 30030	12/31/16	25,000.
CREDIT UNION NATIONAL ASSOCIATION	PO BOX 431 MADISON, WI 53701	12/31/16	20,000.
TRAVEL TECH	3033 WILSON BLVD. STE 700 ARLINGTON, VA 22201	12/31/16	19,740.
AIRBNB	888 BRANNAN STREET FOURTH FLOOR SAN FRANCISCO, CA 94103	12/31/16	10,000.
DISTILLED SPIRITS COUNCIL	1250 I ST NW #400 WASHINGTON, DC 20005	12/31/16	10,000.
HUGH PERRINE	36432 CAMP CREEK ROAD SPRINGFIELD, OR 97478	12/31/16	10,000.
NATIONAL ASSOCIATION OF BROADCASTERS	1771 N STREET NW WASHINGTON, DC 20036	12/31/16	10,000.
TRAMMELL CROW	2100 MCKINNEY AVE. SUITE 800 DALLAS, TX 75201	12/31/16	10,000.
YELP	706 MISSION ST. SAN FRANCISCO, CA 94103	12/31/16	10,000.
INSTACART INC.	50 BEALE ST #600 BLUE SHIELD OF CALIFORNIA BUILDING SAN FRANCISCO, CA 94105	12/31/16	5,000.
SMITH RICHARDSON FUND	701 GREEN VALLEY RD. STE 300 GREENSBORO, NC 27408	12/31/16	5,000.
TOTAL INCLUDED ON LINE 3			5,880,241.

FORM 199	OTHER INCOME		STATEMENT	2
DESCRIPTION			AMOUNT	
MISCELLANEOUS		-	7,08	39.
TOTAL TO FORM 199,	PART II, LINE 7	=	7,08	39.
FORM 199	CASH CONTRIBUTIONS, GIFTS, GRANTS AND SIMILAR AMOUNTS PAID	S	STATEMENT	3
	ATION: GRANTS TO ORGANIZATIONS			_
DONEES NAME	DONEES ADDRESS	RELATIONSHIP	rauoma 	[
AMERICAN CONSUMER INSTITUTE	PO BOX 2161 - RESTON, VA 20195	NONE	65,00	00.
DONEES NAME	DONEES ADDRESS	RELATIONSHIP	PUOMA	ľ
JOHN LOCKE FOUNDATION	200 W. MORGAN STREET STE 200 - RALEIGH, NC 27601	NONE	15,00	00.
DONEES NAME	DONEES ADDRESS	RELATIONSHIP	PUOMA	ľ
JAMES MADISON INSTITUTE	100 N DUVAL ST TALLAHASSEE, FL 32301	NONE	47,00	00.
DONEES NAME	DONEES ADDRESS	RELATIONSHIP	PUNOMA	r
FREEDOMWORKS FOUNDATION	400 N CAPITOL STREET NW STE 765 - WASHINGTON, DC 20001	NONE	25,00	00.
DONEES NAME	DONEES ADDRESS	RELATIONSHIP	rnuoma	<u>r</u>
TEXAS PUBLIC POLIC FOUNDATION	900 CONGRESS ST. STE 400 - AUSTIN, TX 78701	NONE	115,00	00.

DONEES NAME DO	ONEES ADDRESS		RELATIONSHIP	AMOUNT	
SI	/O R STREET, 105 TREET NW, #1150 ASHINGTON, DC 20	_	NONE	2,20)1.
тс	OTAL FOR THIS AC	CTIVITY		269,20)1.
TOTAL INCLUDED ON FORM 1	199, PART II, L	INE 9		269,20)1.
FORM 199 COMPENSATION	ON OF OFFICERS,	DIRECTORS AND	D TRUSTEES	STATEMENT	4
NAME AND ADDRESS		TITLE AVERAGE HRS	-	COMPENSATI	ON
MARNI SOUPCOFF 1050 17TH STREET, N.W., WASHINGTON, DC 20036	NO. 1150	BOARD CHAIR 0.50			0.
TEVI TROY 1050 17TH STREET, N.W., WASHINGTON, DC 20036	NO. 1150	BOARD MEMBER 0.50			0.
MICHAEL COHEN 1050 17TH STREET, N.W., WASHINGTON, DC 20036	NO. 1150	BOARD MEMBER 0.50			0.
ROBERT WATKINS 1050 17TH STREET, N.W., WASHINGTON, DC 20036	NO. 1150	BOARD MEMBER 0.50			0.
ROBERT INGLIS 1050 17TH STREET, N.W., WASHINGTON, DC 20036	NO. 1150	BOARD MEMBER 0.50			0.
RYAN ALEXANDER 1050 17TH STREET, N.W., WASHINGTON, DC 20036	NO. 1150	BOARD MEMBER 0.50			0.
ELI LEHRER 1050 17TH STREET, N.W., WASHINGTON, DC 20036	NO. 1150	PRESIDENT AND 40.00	D BOARD VICE (C 240,31	.3.

R STREET INSTITUTE		26-3477125
ERICA SCHODER 1050 17TH STREET, N.W., NO. 1150 WASHINGTON, DC 20036	OPERATIONS DIR. & COR 40.00	P. TR 173,636.
ANDREW MOYLAN 1050 17TH STREET, N.W., NO. 1150 WASHINGTON, DC 20036	EXECUTIVE DIRECTOR 40.00	192,825.
TOTAL TO FORM 199, PART II, LINE 11		606,774.
FORM 199 OT	HER EXPENSES	STATEMENT 5
DESCRIPTION		AMOUNT
DUES & SUBSCRIPTIONS TRAINING & PROF. DEV'L GRAPHIC DESIGN PENSION ADMIN EXP. PENSION PLAN CONTRIBUTIONS OTHER EMPLOYEE BENEFITS LEGAL FEES ACCOUNTING FEES OTHER PROFESSIONAL FEES ADVERTISING AND PROMOTION OFFICE EXPENSES INFORMATION TECHNOLOGY TRAVEL CONFERENCES AND CONVENTIONS INSURANCE ALL OTHER EXPENSES TOTAL TO FORM 199, PART II, LINE 17		95,290. 12,900. 7,200. 1,686. 65,097. 186,115. 8,436. 22,800. 391,582. 8,734. 123,227. 86,097. 241,308. 186,338. 17,620. 2,914.
FORM 199 OT	HER ASSETS	STATEMENT 6
DESCRIPTION	BEG. OF YE	AR END OF YEAR
PREPAID EXPENSES AND DEFERRED CHARG	SES 53,3 39,1	
TOTAL TO FORM 199, SCHEDULE L, LINE	92,4	72. 42,147.

FORM 199	FUND BALANCES		STATEMENT 7
DESCRIPTION		BEG. OF YEAR	END OF YEAR
UNRESTRICTED ASSETS TEMPORARILY RESTRICTED ASSETS		1,556,208.	1,180,685. 1,865,700.
TOTAL TO FORM 199, SCHEDULE L, L	INE 21	2,010,917.	3,046,385.

629181 10-27-16 CALIFORNIA FORM

Political or Legislative Activities by Section 23701d Organizations

3509

	r year 2016 or fiscal year beginning (mm/dd/yyyy orm 199. FTB 199N filers see instructions.	y),	and ending (mm/dd/yyyy)	·	
	Organization name			California corporati	on number
R STRE	ET INSTITUTE			3994047	
	ess (suite, room, or PMB no.) 7TH STREET, N.W., NO. 11	.50		FEIN 26-3477125	
City WASHIN	GTON	State DC	ZIP code 20036		
Part I - P	Political Activities				
Complete if	the organization supported or opposed a candic	date for public office. See	instructions.		
	organization participated or intervened in any portion describe the activities. Provide a summary of an			candidate? 1	Yes X
organiza If "Yes,"	organization contributed funds to support or op ations formed to support or oppose a public offic describe the activities. Include the name of the unt paid, and date of contribution.	ce candidate?			Yes X
Complete if 3 Has the	egislative Activities the organization attempted to influence legislation organization attempted to influence any national form 5768, Election/Revocation of Election by an	al, state or local legislation			
to Influe	nce Legislation? See instructions.		• •		Yes X
If "Yes," This fulf	organization, during the 2016 taxable year, filed attach a copy of federal Form 5768 filed with the fills the organization's need to file an election for go to question 4b and see instructions.	ne Internal Revenue Servi		4a	Yes X 1
Note: Th	organization filed a federal Form 5768 in a prior ne organization cannot make this election if it is foundation, or an affiliated organization.			4b 🔲	Yes X I
Furnish the	following financial information for the taxable yea	ar:			
	Purpose Expenditures				2 100 1
	Il amount paid or incurred to accomplish the cha	aritable, educational, relig	ious, etc. purpose	5 <u>\$ 4 , 85</u>	3,122. ₀
-	ng Expenditures amount expended for the purpose of influencing legisk	ation through communication	n with any member or		
	e of a legislative body or any government official or em		•	6 \$ 3	7,555.
	loots Expenditures			<u></u>	
	ount expended to influence any legislation through		•	^	0,000.
				·	

Date Accepted

TAXABLE YEAR

California e-file Return Authorization for Exempt Organizations

FORM **8453-EO**

Exempt Organizations	
Exempt Organization name	Identifying number
R STREET INSTITUTE	26-3477125
Part I Electronic Return Information (whole dollars only)	
1 Total gross receipts (Form 199, line 4)	1_5,946,145.00
2 Total gross income (Form 199, line 8)	2 5,946,145.00
3 Total expenses and disbursements (Form 199, line 9)	3 4,910,677.00
Part II Settle Your Account Electronically for Taxable Year 2016	
4 Electronic funds withdrawal 4a Amount 4b Wi	thdrawal date (mm/dd/yyyy)
Part III Banking Information (Have you verified the exempt organization's banking informat	tion?)
5 Routing number	
6 Account number 7 Type of ac	ccount: Checking Savings
Part IV Declaration of Officer	
I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, Box 4, on line 4a. Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the California electronic return. To the best of my knowledge and belief, the exempt organization's return is true a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely pay organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exe statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. If the proce delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the Signature of officer Date PRESIDE Title	mation I provided to my electronic return originator (ERO), e corresponding lines of the exempt organization's 2016 e, correct, and complete. If the exempt organization is filing yment of the exempt organization's fee liability, the exempt empt organization return and accompanying schedules and ssing of the exempt organization's return or refund is ne delay.
Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer. I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453 am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt of accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB a provided the organization officer with a copy of all forms and information that I will file with the FTB, and I he 1345, 2016 e-file Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for four years the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon redeclare that I have examined the above exempt organization's return and accompanying schedules and stater, correct, and complete. I make this declaration based on all information of which I have knowledge.	organization's return. I declare, however, that form FTB 8Å53-EO 8453-EO before transmitting this return to the FTB, I have lave followed all other requirements described in FTB Pub. ars from the due date of the return or four years from the date request. If I am also the paid preparer, under penalties of perjury,

ERO	ERO's- signature		Date	also paid	Check if self- employed	ERO's PTIN
Must	Firm's name (or yours if self-employed)	GELMAN, ROSENBERG &	FREEDMAN		FEIN	52-1392008
Sign	and address	4550 MONTGOMERY AVE	SUITE 650N			
		BETHESDA, MD			ZIP cod	de 20814-2930
Under ner	nalties of periury I declare	that I have examined the above organization's	s return and accompanyin	a schedules and stat	tements and to	the hest of my knowledge

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Paid Preparer	Paid preparer's signature	Date Check if self-employed	Paid preparer's PTIN
Must	Firm's name (or yours	GELMAN, ROSENBERG & FREEDMAN	FEIN 52-1392008
Sign	if self-employed) and address	4550 MONTGOMERY AVE SUITE 650N	
		BETHESDA, MD	ZIP code 20814-2930

For Privacy Notice, get FTB 1131 ENG/SP.

FTB 8453-EO 2016

TAX RETURN FILING INSTRUCTIONS

CALIFORNIA FORM RRF-1

FOR THE YEAR ENDING

DECEMBER 31, 2016

Prepared for	R STREET INSTITUTE 1050 17TH STREET, N.W. NO. 1150 WASHINGTON, DC 20036
Prepared by	GELMAN, ROSENBERG & FREEDMAN 4550 MONTGOMERY AVE SUITE 650N BETHESDA, MD 20814-2930
Amount due or refund	BALANCE DUE OF \$150.00
Make check payable to	ATTORNEY GENERAL REGISTRY OF CHARITABLE TRUSTS
Mail tax return and check (if applicable) to	REGISTRY OF CHARITABLE TRUSTS P.O. BOX 903447 SACRAMENTO, CA 94203-4470
Return must be mailed on or before	PLEASE MAIL AS SOON AS POSSIBLE.
Special Instructions	THE REPORT SHOULD BE SIGNED AND DATED BY THE AUTHORIZED INDIVIDUAL(S).

MAIL TO: Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470 Telephone: (916) 445-2021

WEB SITE ADDRESS:

http://ag.ca.gov/charities/

ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code 11 Cal. Code Regs. sections 301-307, 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties as defined in Government Code section 12586.1. IRS extensions will be honored.

State Charity Registration Number: CT 0252504		Check if:			
		nge of address			
R STREET INSTITUTE Name of Organization	. Ame	ended report			
1050 17TH STREET, N.W., NO. 1150 Address (Number and Street)	Corporate	or Organization No. 3994047			
WASHINGTON, DC 20036 City or Town, State and ZIP Code	Federal En	nployer I.D. No. 26-3477125			
ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311 and 312) Make Check Payable to Attorney General's Registry of Charitable Trusts					
Gross Annual Revenue Fee Gross Annual Revenue	Fee	Gross Annual Revenue	Fee	<u> </u>	
Less than \$25,000 0 Between \$100,001 and \$250,00 Between \$25,000 and \$100,000 \$25 Between \$250,001 and \$1 milli		Between \$1,000,001 and \$10 million Between \$10,000,001 and \$50 million Greater than \$50 million	\$15 \$22 \$30	25	
PART A - ACTIVITIES					
For your most recent full accounting period (beginning $\frac{01/01/2}{5,946,145}$ Total assets \$	016 endi 3,	ing 12/31/2016) list: 311,687.			
PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOR	D OF THIS RE	PORT			
Note: If you answer "yes" to any of the questions below, you must attach a and details for each "yes" response. Please review RRF-1 instruction					
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization			Yes	No	
and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?				Х	
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?				Х	
3. During this reporting period, did non-program expenditures exceed 50% of	gross revenue	s?		Х	
4. During this reporting period, were any organization funds used to pay any p with the Internal Revenue Service, attach a copy.	enalty, fine or	judgment? If you filed a Form 4720		Х	
5. During this reporting period, were the services of a commercial fundraiser of If "yes," provide an attachment listing the name, address, and telephone number of the services of a commercial fundraiser of the services of	_			х	
 During this reporting period, did the organization receive any governmental name of the agency, mailing address, contact person, and telephone numb 	•	, provide an attachment listing the		Х	
 During this reporting period, did the organization hold a raffle for charitable the number of raffles and the date(s) they occurred. 				Х	
 Does the organization conduct a vehicle donation program? If "yes," provided operated by the charity or whether the organization contracts with a commendation. 				Х	
			х		
Organization's area code and telephone number 202-525-5717					
Organization's e-mail address					
I declare under penalty of perjury that I have examined this report, including accompany correct and complete.	ying documents	, and to the best of my knowledge and belief, i	t is tru	e,	
ELIAS ROTHENBERG-LEH		RESIDENT			
Signature of authorized officer Printed Name Title Date					

** 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)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Α	For the	2016 calendar year, or tax year beginning	and	ending	_	
В	Check if applicable	C Name of organization			D Employer identifi	cation number
	Addres	R STREET INSTITUTE				
	Name change				26-3	477125
L	Initial return Final return/	Number and street (or P.O. box if mail is not delived 1050 17TH STREET, N.W.		Room/suite 1150	E Telephone numbe	r 525-5717
	termin- ated				G Gross receipts \$	5,946,145.
Г	Ameno		ir or foreign postar code		H(a) Is this a group re	
	Applic		S ROTHENBERG-L	EHRER	for subordinates	
	pendir	g SAME AS C ABOVE			H(b) Are all subordinates in	
$\overline{\Gamma}$	Tax-exe	empt status: X 501(c)(3) 501(c)((insert no.) 4947(a)(1)	or 527	1	list. (see instructions)
J	Websit	e: WWW.RSTREET.ORG			H(c) Group exemptio	, ,
			ociation Other >	L Year		A State of legal domicile: DC
		Summary				
О	1	Briefly describe the organization's mission or most s	ignificant activities: SEE	PART I	II, LINE 1.	
Š						
Governance	2	Check this box 🕨 🔲 if the organization discont	inued its operations or dispo	sed of more	than 25% of its net as	ssets.
8	3	Number of voting members of the governing body (F	Part VI, line 1a)		3	6
ص ص	4	Number of independent voting members of the gove	erning body (Part VI, line 1b)			6
Activities &	5	Total number of individuals employed in calendar ye	ar 2016 (Part V, line 2a)		5	32
ĬĘ		Total number of volunteers (estimate if necessary) $_{\dots}$				6
Act	7 a	Total unrelated business revenue from Part VIII, colu	mn (C), line 12		7a	0.
_	b	Net unrelated business taxable income from Form 9	90-T, line 34		7b	0.
					Prior Year	Current Year
e		Contributions and grants (Part VIII, line 1h)			4,069,963.	5,887,086.
Revenue					0.	0.
Be		Investment income (Part VIII, column (A), lines 3, 4, a			1,051. 93,934.	1,190.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9				57,869.
_		Total revenue - add lines 8 through 11 (must equal P			4,164,948.	5,946,145. 269,201.
		Grants and similar amounts paid (Part IX, column (A)			24,901.	209,201.
	1	Benefits paid to or for members (Part IX, column (A),			2,277,056.	3,226,561.
Expenses	15	Salaries, other compensation, employee benefits (Pa			0.	0.
Sen	loa	Professional fundraising fees (Part IX, column (A), lin		39	<u> </u>	0.
ă	17	Total fundraising expenses (Part IX, column (D), line Other expenses (Part IX, column (A), lines 11a-11d, ⁻			1,169,284.	1,414,915.
		Total expenses. Add lines 13-17 (must equal Part IX,			3,471,241.	4,910,677.
		Revenue less expenses. Subtract line 18 from line 1			693,707.	
Or Sec	 .~				ginning of Current Year	End of Year
Net Assets or Find Ralances	20	Total assets (Part X, line 16)			2,131,906.	3,311,687.
ASS	21	T			120,989.	265,302.
ESE ESE	22	Net assets or fund balances. Subtract line 21 from li			2,010,917.	3,046,385.
P	art II	Signature Block				
Und	der pena	lties of perjury, I declare that I have examined this return, in	cluding accompanying schedule	es and statem	ents, and to the best of m	y knowledge and belief, it is
true	e, correc	t, and complete. Declaration of preparer (other than officer)	is based on all information of w	hich preparer	has any knowledge.	
Sig	ın	Signature of officer			Date	
He	re	ELIAS ROTHENBERG-LEHRER Type or print name and title	, PRESIDENT			
		· · ·	Preparer's signature	10	Date Check	PTIN
Pai	d	Time Type proparer 3 mains	roparor o orginaluro		if	
	parer	Firm's name GELMAN, ROSENBERG	& FREEDMAN		self-employ Firm's EIN ▶	52-1392008
	Only	Firm's address 4550 MONTGOMERY A			THIII 3 LIIV	<u> </u>
		BETHESDA, MD 2081	4-2930		Phone no. (3	01) 951-9090
Ma	v the IF	RS discuss this return with the preparer shown above			1	X Yes No

Pai	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:
	R STREET IS A NATIONAL, FREE MARKET THINK TANK THAT SUPPORTS LIMITED,
	EFFECTIVE GOVERNMENT AND RESPONSIBLE ENVIRONMENTAL STEWARDSHIP. IT
	STRIVES TO CRAFT PRAGMATIC SOLUTIONS TO DOMESTIC POLICY CHALLENGES
	INVOLVING REGULATION, PUBLIC HEALTH, THE ENVIRONMENT, TAX REFORM, AND
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$1, 276, 091 • including grants of \$ 654 •) (Revenue \$)
	ENERGY & ENVIRONMENT: R STREET'S ENERGY & ENVIRONMENT PROGRAM FOCUSES
	ON THREE MAIN CHALLENGES. FIRST, IT STRIVES TO BUILD ON RONALD REAGAN'S
	CONSERVATION LEGACY BY IDENTIFYING AREAS WHERE GOVERNMENT SUBSIDIES AND
	REGULATIONS RESULT IN ENVIRONMENTALLY HARMFUL ACTIVITY. SECOND, IT
	PROMOTES FLOURISHING ENERGY MARKETS BY PROPOSING FREE-ENTERPRISE
	SOLUTIONS TO OUR NATION'S ENERGY CHALLENGES. FINALLY, IT ADDRESSES THE
	THREATS PRESENTED BY CLIMATE CHANGE THROUGH MARKET-ORIENTED SOLUTIONS
	DESIGNED TO CURB GREENHOUSE GAS EMISSIONS.
	IN 2016, R STREET MADE ELECTRICITY MARKET REFORM A DISTINCT FOCUS,
	PUBLISHING ACADEMIC PAPERS, WHITE PAPERS, EDUCATIONAL DOCUMENTS, AND
	OP-EDS ON A VARIETY OF ISSUES RELATED TO PROPOSED AND ACTIVE REFORM
4b	(Code:) (Expenses \$ 810,793 • including grants of \$ 25,647 •) (Revenue \$
	TECHNOLOGY POLICY: THE PURPOSE OF R STREET'S TECHNOLOGY POLICY PROGRAM
	(TPP) IS TO CONDUCT MARKET-ORIENTED RESEARCH AND ADVOCACY AROUND THE
	PUBLIC POLICY FRAMEWORK THAT GOVERNS BOTH ESTABLISHED AND EMERGING
	TECHNOLOGIES.
	FOR ESTABLISHED TECH SECTORS (SUCH AS TELECOM OR INTERNET GOVERNANCE),
	OUR GOAL IS TO OPERATE AT THE POINTS OF TENSION BETWEEN STAKEHOLDERS
	(SUCH AS GOVERNMENT AGENCIES AND INTERNET COMPANIES), AND PUSH BACK
	AGAINST REGULATIONS THAT UNNECESSARILY IMPEDE ECONOMIC PROGRESS OR
	INDIVIDUAL LIBERTY.
	FOR EMERGING TECH, OUR GOAL IS TO ADVANCE POLICY SOLUTIONS THAT WILL
4c	(Code:) (Expenses \$657,964 • including grants of \$127,337 •) (Revenue \$)
	FINANCIAL SERVICES: AN IMPORTANT THEME FOR R STREET'S ONGOING WORK IS
	CENTRAL BANKING, ITS NATURE, EFFECTS AND RISKS-NOT TO MENTION ITS
	PRETENSE OF KNOWLEDGE. NEGATIVE REAL AND NOMINAL INTEREST RATES, THE
	RESULTING ASSET PRICE BUBBLES, AND RELATED SYSTEMIC RISK WILL GIVE
	CONTINUING ESSENTIAL ISSUES FOR OUR WORK. HIGHLY RELATED TO THAT IS THE
	IMPACT ON SAVERS OF THE FED'S (AND OTHER CENTRAL BANKS') ACTIONS. IT
	LOOKS LIKE THE FED HAS TRANSFERRED FROM SAVERS MORE THAN \$1 TRILLION TO
	GIVE IT TO BORROWERS AND LEVERAGED SPECULATION. THIS IS A DEEPLY
	POLITICAL ACT, WHICH NEEDS FOCUS AND UNDERSTANDING.
	HOUSING FINANCE AND CYCLES OF BOOMS AND BUSTS ARE A LARGE PART OF R
	STREET'S WORK. WITH ANOTHER HOUSE PRICE INFLATION WELL UNDER WAY, WE
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 1,487,038 • including grants of \$ 115,563 •) (Revenue \$)
<u>4e</u>	Total program service expenses ► 4,231,886.

11051110 745960 28560

Form 990 (2016) R STREET INS 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?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			v
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	4.		Х
4-7	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-7		х
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		Х
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		-21
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		Х
	complete Schedule G, Part III	19		77

Form 990 (2016) R STREET INSTITUTE Part IV Checklist of Required Schedules (continued)

			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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	<u> </u>
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	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			۱
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			.,
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			37
	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 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		Х
	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 in Schedule O for Part VI, lines 11b and 19?			1
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V				Ш
_		2 4		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	34			
b					
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		4.	Х	
0-	(gambling) winnings to prize winners?		1c	Λ	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	32			
	filed for the calendar year ending with or within the year covered by this return 2		Ola	Х	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b		
20	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		За		Х
			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority of		30		
Tu	financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		x
h	If "Yes," enter the name of the foreign country:		-u		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (I	FRAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
b			5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	-	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organiz				
	any contributions that were not tax deductible as charitable contributions?		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gif				
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provi	ded to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was require	d			
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		<u> X</u>
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		7g 7h		
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	N/A			
_	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.	N/A	0-		
	, , , , , , , , , , , , , , , , , , , ,	N/A N/A	9a 9b		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	·····-	อเม		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b				
11	Section 501(c)(12) organizations. Enter:				
	Gross income from members or shareholders N/A 11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against				
-	amounts due or received from them.)				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	İ			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?	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				
	Enter the amount of reserves on hand				
	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 in Schedule O		14b	255	<u> </u>
			Form	990	(2016)

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	X	77
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			37
_	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
<u> </u>	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed CA, FL	nuc:1-1	lo.	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avallab	ie	
	for public inspection. Indicate how you made these available. Check all that apply.			
40	X Own website X Another's website X Upon request Other (explain in Schedule O)	J 41	-:-!	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and the transfer and its policy and the transfer and its governing documents.	זוחan נ	ciai	
00	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: ► JOI WASHINGTON - 202-525-5717			
	1050 17TH STREET,NW, SUITE 1150, WASHINGTON, DC 20036			
	TOOU TITE DINDER, MAD TITE TION, MAD TITED TON, DC 40000			

11051110 745960 28560

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 instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)							(D)	(E)	(F)
Name and Title	Average	(do		Pos		than	one	Reportable	Able tation from related organizations (W-2/1099-MISC) 0.	Estimated
	hours per	box	, unle	ss pe	rson	is bot or/trus	h an	compensation	•	amount of
	week	_	OOI UII		1 0010)	100)	. from the		
	(list any hours for	directo				_		organization	•	
	related	e or	stee			nsate		(W-2/1099-MISC)	(** 2) 1000 (**100)	organization
	organizations	trust	ıal tru)yee	ompe		,		and related
	below	Individual trustee or director	Institutional trustee	je,	Key employee	Highest compensated employee	ner			organizations
	line)	lndi	Inst	Officer	Key	High	Former			
	0.50	١							0	
BOARD CHAIR	0.50	Х		Х				0.	0.	0
	0.50	١,,							0	_
	0.50	Х						0.	0.	0
	0.50	ļ ,,							0	_
	0.50	Х						0.	0.	0
	0.50	x						_	0	_
	0.50	^						0.	0.	0
	0.30	X						٥	0	0
	0.50	^						0.	0.	
	0.50	x						0.	0.	0
	40.00	123							•	
PRESIDENT AND BOARD VICE CHAIR	1000	1		x				216,700.	0.	23,613
(8) ERICA SCHODER	40.00							, , ,		
OPERATIONS DIR. & CORP. TREAS.		1		x				162,617.	0.	11,019
(9) ANDREW MOYLAN	40.00							-		-
EXECUTIVE DIRECTOR		1			X			179,311.	0.	13,514
(10) KEVIN KOSAR	40.00									
DIRECTOR OF GOVERNANCE PROGRAM		1				Х		164,250.	0.	5,335
(11) DAVID CAMERON SMITH	40.00									
DIRECTOR OF STATE PROGRAMS						Х		146,356.	0.	22,248
(12) CATRINA RORKE	40.00									
DIRECTOR OF ENERGY PROGRAM						Х		131,227.	0.	8,686
(13) RAY LEHMANN	40.00								_	
EDITOR IN CHIEF						Х		130,696.	0.	18,040
(14) LORI SANDERS	40.00	1						444 00-	_	
DIRECTOR OF OUTREACH						Х		116,885.	0.	17,542
		1								
		<u> </u>								
	<u> </u>	4								
	-	<u> </u>	-		-	_				
		-								
DARD CHAIR DARD CHAIR DARD CHAIR DARD MEMBER MICHAEL COHEN DARD MEMBER MICHAEL CHAIR MICHAEL	_1									Form 990 (2016

	t VII Section A. Officers, Directors, Trus (A)	(B)				<u>2</u> C)	<u></u>		(D)	(E)			(F)	
	Name and title	Average Position					1		Reportable	l ` ´	Reportable			nd.
	Name and title	hours per					than		· .	compensation		1		
		week					or/trus		from	from related		organization de la constant de la co		O1
		(list any	tor						the	organization			tion	
		hours for	direc				eg		organization	(W-2/1099-MIS			•	
		related	tee o	ustee			ensat		(W-2/1099-MISC)		and rel		anizat	ion
		organizations	l trus	nal tr		oyee	dwo							
		below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	mer				orga	anizati	ons
		line)	Pul	lns)#J	Key	Hig	-F						
			-											
	Cub total								1,248,042.		0	11	9 9	97
	Sub-total Total from continuation sheets to Part V								0.		0.		<i>,</i> ,	0.
									1,248,042.		0.	11	9 9	
<u>u</u>	Total (add lines 1b and 1c) Total number of individuals (including but r									000 of rapartab			,,,	
_	compensation from the organization	iot iiiriited to ti	1030	ilott	ou a	DOV	C) WI	10 1	eceived more triair wroc	,,000 or reportab	10			10
	ormonication normanic organization												Yes	No
3	Did the organization list any former officer.	director, or tru	uste	e, ke	ev er	nplo	oyee	, or	highest compensated e	mployee on				
	line 1a? If "Yes," complete Schedule J for s				-	-	•					3		Х
4	For any individual listed on line 1a, is the si													
	and related organizations greater than \$15											4	Х	
5	Did any person listed on line 1a receive or	-				-			ted organization or indiv	idual for services				37
Sec	rendered to the organization? If "Yes," contion B. Independent Contractors	nplete Schedul	e J t	for s	uch	pers	son					5		Х
1	Complete this table for your five highest co	mpensated in	dep	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of con	npens	sation 1	rom	
	the organization. Report compensation for	the calendar y	ear	endi	ing v	vith	or w	rithir I		year.				
	(A) Name and business	address	N	INC	E				(B) Description of services			(C) Compensation		
								_						
	Total number of independent contractors (including but n	not li	mito	nd to	tho	ا می	ster	d above) who received m	nore than				
	\$100,000 of compensation from the organ		iot II	mie	.u 10		0	ادحاد	above, who received in	IOI & III AII				
									·			Form	aan /	2016

		(== : =)	ET INST	ITUTE			26-347	7125 Page 9
Pa	rt VI							
		Check if Schedule O contain	ns a response	or note to any li		(B) I	(0)	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues						
s, (Am	(Fundraising events	1c					
a E	c	Related organizations						
imi	•	Government grants (contribution	ns) 1e					
tior S	f	All other contributions, gifts, grants,						
ibu He		similar amounts not included above	1f 5,	887,086.				
d C	ç	Noncash contributions included in lines 1a	-1f: \$					
g E	ŀ	Total. Add lines 1a-1f			5,887,086.			
				Business Code	9			
ce	2 8	a						
ezi Ie	k							
o Si	(÷						
ran ?ev	(d						
Program Service Revenue	6	·						
₾	f	. •						
	Ç	Total. Add lines 2a-2f						
	3	Investment income (including di			1 100			1 100
		other similar amounts)			1,190.			1,190.
	4	Income from investment of tax-e						
	5	Royalties						
		<u> </u>	(i) Real	(ii) Personal	_			
	6 a		50,780.					
	k	Less: rental expenses	0.					
	•	· ,	50,780.	·	E0 700			E0 700
		· · · -			50,780.			50,780.
	7 8		(i) Securities	(ii) Other				
	_	assets other than inventory						
	k	Less: cost or other basis						
		and sales expenses						
		Gain or (loss)		<u> </u>				
		Net gain or (loss)						
ıne	8 8	Gross income from fundraising e	•					
ver		including \$ contributions reported on line 10						
Other Revenue		'	,					
her	L	Part IV, line 18						
ō		Net income or (loss) from fundra						
		Gross income from gaming active	•	>				
		Part IV, line 19						
	ŀ	Less: direct expenses						
		Net income or (loss) from gamin						
		Gross sales of inventory, less re	-					
		and allowances		1				
	ŀ	Less: cost of goods sold						
		Net income or (loss) from sales						
		Miscellaneous Revenue	<u>,</u>	Business Code	e			
	11 a	MET COULT A MEDITO		900099	7,089.			7,089.
	k							
	(·						
		All other revenue						

e Total. Add lines 11a-11d

Total revenue. See instructions.

7,089. 5,946,145.

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).

D-	Check if Schedule O contains a respon	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	0.60 0.01	0.60 0.04		
	and domestic governments. See Part IV, line 21	269,201.	269,201.		
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,	COC 774	200 052	202 502	1 4 410
	trustees, and key employees	606,774.	389,852.	202,503.	14,419
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0 104 014	1 040 616	100 475	40 702
7	Other salaries and wages	2,174,814.	1,942,616.	189,475.	42,723
8	Pension plan accruals and contributions (include	CE 007	E7 400	c 355	1 050
	section 401(k) and 403(b) employer contributions)	65,097.	57,492.	6,355.	1,250
9	Other employee benefits	186,115.	154,340.	29,844.	1,931
10	Payroll taxes	193,761.	165,117.	24,481.	4,163
11	Fees for services (non-employees):				
а	Management	0.426	6 500	1 506	445
b		8,436.	6,793.	1,526.	117
С	Accounting	22,800.	18,359.	4,123.	318
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	,				
	column (A) amount, list line 11g expenses on Sch 0.)	391,582.	368,369.	21,553.	1,660
12	Advertising and promotion	8,734.	7,639.	1,017.	78
13	Office expenses	123,227.	95,983.	25,662.	1,582
14	Information technology	86,097.	83,651.	2,271.	175
15	Royalties				
16	Occupancy	207,422.	167,021.	37,512.	2,889
17	Travel	241,308.	219,554.	20,199.	1,555
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	186,338.	168,858.	16,071.	1,409
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,361.	1,096.	246.	19
23	Insurance	17,620.	14,188.	3,187.	245
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а		95,290.	80,748.	13,502.	1,040
b	TRAINING & PROF. DEV'L	12,900.	10,505.	2,224.	171
С	GRAPHIC DESIGN	7,200.	7,152.	45.	3
d	PENSION ADMIN EXP.	1,686.	1,385.	277.	24
е	All other expenses	2,914.	1,967.	879.	68
25	Total functional expenses. Add lines 1 through 24e	4,910,677.	4,231,886.	602,952.	75,839
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)				

Pa	πλ	Balance Sheet					
		Check if Schedule O contains a response or not	e to ar	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			242,259.	1	414,623.
	2	Savings and temporary cash investments			1,116,409.	2	1,128,296.
	3	Pledges and grants receivable, net				3	
Assets	4	Accounts receivable, net	676,905.	4	1,724,121.		
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensation	ated er	nployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sec	ion 50	1(c)(9) voluntary			
		employees' beneficiary organizations (see instr).				6	
	7	Notes and loans receivable, net				7	
ĕ	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			53,359.	9	19,519.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	8,084.			
	b	Less: accumulated depreciation		5,584.	3,861.	10c	2,500.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	39,113.	15	22,628.		
	16	Total assets. Add lines 1 through 15 (must equ			2,131,906.	16	3,311,687.
	17	Accounts payable and accrued expenses	120,989.	17	265,302.		
	18	Grants payable			18		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
S	22	Loans and other payables to current and former	office	rs, directors, trustees,			
≝		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L	•			22	
=	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	17-24). Complete Part X of			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			120,989.	26	265,302.
		Organizations that follow SFAS 117 (ASC 958), ched	k here X and			
Se		complete lines 27 through 29, and lines 33 an					
ŭ	27	Unrestricted net assets			1,556,208.	27	1,180,685.
Sala	28	Temporarily restricted net assets	454,709.	28	1,865,700.		
ğ	29	Permanently restricted net assets				29	
Fund Balances		Organizations that do not follow SFAS 117 (A					
		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
SS	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or	32	Retained earnings, endowment, accumulated in				32	
ž	33	Total net assets or fund balances			2,010,917.	33	3,046,385.
	34	Total liabilities and net assets/fund balances			2,131,906.	34	3,311,687.

Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
			_					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,94				
2	Total expenses (must equal Part IX, column (A), line 25)	2		,91				
3	Revenue less expenses. Subtract line 2 from line 1	3		.,03				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2	,01	0,9	17.		
5	Net unrealized gains (losses) on investments	5						
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,							
	column (B))	10	3	,04	6,3	85.		
Pa	rt XII Financial Statements and Reporting		,					
	Check if Schedule O contains a response or note to any line in this Part XII							
			,		Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	b Were the organization's financial statements audited by an independent accountant?							
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,	,					
	consolidated basis, or both:							
	X Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,						
	review, or compilation of its financial statements and selection of an independent accountant?							
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O	1_					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit					
	Act and OMB Circular A-133?			За		Х		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired aud	tit					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b				

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Name of the organization

		REET INSTI						6-3477125			
Part I	Reason for Public	Charity Status (All organizations must co	mplete th	is part.) Se	ee instructions					
he organ	nization is not a private found										
1	A church, convention of ch			•		IVAVi)					
2	•	•				,,,,,,,,					
	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
3							(:::\ F-+	41 1 '4 - 11			
4 📖	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) . Enter the hospital's name,										
	city, and state:										
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.)										
6 📖	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7 X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in										
	section 170(b)(1)(A)(vi). (C	omplete Part II.)					-	•			
8	A community trust describe		(1)(A)(vi), (Complete Part	· II)							
9 🔲	An agricultural research org				ed in coni	inction with a	and-arant	college			
<i>3</i>											
	or university or a non-land-o	grant college or agric	ulture (see instructions).	cillei lile	riairie, city	, and state of	trie colleg	e or			
🖂	university:										
10 📖	An organization that norma										
	activities related to its exen	npt functions - subje	ct to certain exceptions,	and (2) no	more tha	n 33 1/3% of i	ts support	t from gross investm	ent		
	income and unrelated busin	ness taxable income	(less section 511 tax) fro	om busine	sses acqu	ired by the or	ganization	after June 30, 1975			
	See section 509(a)(2). (Co	mplete Part III.)									
11 📖	An organization organized	and operated exclus	ively to test for public sa	fety. See	section 50)9(a)(4).					
12 🔲	An organization organized	and operated exclus	sively for the benefit of, to	perform t	the functio	ns of, or to ca	rry out the	purposes of one or			
	more publicly supported or	ganizations describe	ed in section 509(a)(1) o	section :	509(a)(2).	See section 5	09(a)(3). (Check the box in			
	lines 12a through 12d that	-									
а	Type I. A supporting orga							aivina			
	the supported organization										
				i majority v	or the direc	otors or truste	55 OF 1110 S	аррогинд			
	organization. You must o			والماليان والماليا			(-) - · ·	i.a. a.			
b											
	control or management of			ame perso	ons that co	ontrol or mana	ge the sup	ported			
	organization(s). You mus										
С	☐ Type III functionally integrated in the property of th	egrated. A supportin	g organization operated	in connec	tion with, a	and functional	y integrate	ed with,			
_	_ its supported organizatio	n(s) (see instructions	s). You must complete F	Part IV, Se	ections A,	D, and E.					
d L		y integrated. A supp	oorting organization oper	ated in co	nnection v	vith its suppor	ted organi	zation(s)			
	that is not functionally int	tegrated. The organia	zation generally must sat	isfy a dist	ribution re	quirement and	l an attent	iveness			
	requirement (see instruct	ions). You must cor	nplete Part IV, Sections	A and D,	and Part	V.					
е 🗆	Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	Type I, Type	II, Type III				
	functionally integrated, o					, , , , , , , , , , , , , , , , , , ,	, ,,				
f Ent	er the number of supported										
	vide the following information										
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	nization listed	(v) Amount of	monetary	(vi) Amount of othe	r		
	organization		(described on lines 1-10	in your governi Yes	No No	support (see in:	•	support (see instruction			
			above (see instructions))	163	140						
						1					

Total

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

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

Sec	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	791,833.	2,353,072.	2,832,801.	4,069,963.	5,887,086.	15,934,755.		
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	791,833.	2,353,072.	2,832,801.	4,069,963.	5,887,086.	15,934,755.		
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)						6,635,367.		
6	Public support. Subtract line 5 from line 4.						9,299,388.		
	ction B. Total Support						, , ,		
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total		
	Amounts from line 4	791,833.	2,353,072.	2,832,801.	4,069,963.	5,887,086.	15,934,755.		
	Gross income from interest,	,	, ,	, ,	, ,	, ,			
•	dividends, payments received on								
	securities loans, rents, royalties								
	and income from similar sources	66.	920.	6,819.	68,724.	51,970.	128,499.		
a	Net income from unrelated business			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		0 = 70 : 0 :			
·	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)	223.	15,488.	26,253.	26,261.	7,089.	75,314.		
11		2231	23,1331	20,2001	20,2021	. , 0030	16,138,568.		
12	Gross receipts from related activities,	etc (see instruction	one)			12	625.		
13	First five years. If the Form 990 is for			I fourth or fifth tax					
.0	organization, check this box and stor						>		
Sec	ction C. Computation of Publ								
14	Public support percentage for 2016 (I	ine 6. column (f) di	vided by line 11. co	olumn (f))		14	57.62 %		
15	Public support percentage from 2015					15	56.85 %		
16a	33 1/3% support test - 2016. If the d					nore, check this bo	x and		
	stop here. The organization qualifies						\triangleright X		
b	33 1/3% support test - 2015. If the c						is box		
	and stop here. The organization qual	ifies as a publicly s	supported organiza	tion		,	ightharpoonup		
17a	10% -facts-and-circumstances tes						or more.		
	and if the organization meets the "fac	•					•		
	meets the "facts-and-circumstances"								
h	10% -facts-and-circumstances tes								
	more, and if the organization meets the								
	organization meets the "facts-and-circ		•						
12	•			•					
	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions								

Schedule A (Form 990 or 990-EZ) 2016

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	qualify under the tests listed be ction A. Public Support	elow, please com	plete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Gifts, grants, contributions, and	(a) 2012	(b) 2013	(6) 2014	(u) 2013	(e) 2010	(i) iotai
•	membership fees received. (Do not						
	include any "unusual grants.")						
2	******						
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						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
C	: Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🖊	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	: Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital						
13	assets (Explain in Part VI.)						
	First five years. If the Form 990 is for	the organization'	s first second this	L d fourth or fifth t	av vear as a sectio	n 501(c)(3) organi:	zation
••	check this box and stop here	· ·		, ,	•	()()	
Sec	ction C. Computation of Publi						
	Public support percentage for 2016 (li			column (fl)		15	%
	Public support percentage from 2015					16	<u> </u>
	ction D. Computation of Inves					1 .0 1	70
17						17	%
18	Investment income percentage from 2					18	
	33 1/3% support tests - 2016. If the						
.56	more than 33 1/3%, check this box ar						
ı	33 1/3% support tests - 2015. If the						
	line 18 is not more than 33 1/3%, che						
20							
	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions						

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
3с		
4-		
4a		
4b		
4c		
5a		
5b		
5с		
6		
7		
8		
0-		
9a		
9b		
9с		
10a		
10b		

Pai	rt IV	Supporting Organizations (continued)			
		continuedy		Yes	No
11	Has th	ne organization accepted a gift or contribution from any of the following persons?			
		son who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
-		r, the governing body of a supported organization?	11a		
h		ily member of a person described in (a) above?	11b		
		6 controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
		3. Type I Supporting Organizations	110		
000		5. Typo i oupporting organizations		Yes	No
1	Did th	e directors, trustees, or membership of one or more supported organizations have the power to		163	140
•		· · · · · · · · · · · · · · · · · · ·			
		arly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
		ear? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
		blled the organization's activities. If the organization had more than one supported organization,			
		ibe how the powers to appoint and/or remove directors or trustees were allocated among the supported	4		
•		izations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		e organization operate for the benefit of any supported organization other than the supported			
		ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		/I how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		vised, or controlled the supporting organization.	2		
Sec	tion (C. Type II Supporting Organizations			
				Yes	No
1		a majority of the organization's directors or trustees during the tax year also a majority of the directors			
		stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
		nagement of the supporting organization was vested in the same persons that controlled or managed			
		pported organization(s).	1		
Sec	tion L	D. All Type III Supporting Organizations			
		·		Yes	No
1		e organization provide to each of its supported organizations, by the last day of the fifth month of the			
		ization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organ	ization'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			
		ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the or	ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By rea	ason of the relationship described in (2), did the organization's supported organizations have a			
	signifi	cant voice in the organization's investment policies and in directing the use of the organization's			
	incom	ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		orted organizations played in this regard.	3		
<u>Sec</u>	tion E	E. Type III Functionally Integrated Supporting Organizations			
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
а	Щ	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 government entity (see instr	ructions).	
2	Activit	ties Test. Answer (a) and (b) below.		Yes	No
а	Did su	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the su	upported 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 ti	he organization was responsive to those supported organizations, and how the organization determined			
	that th	nese activities constituted substantially all of its activities.	2 a		
b	Did th	e activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the	organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasor	ns for the organization's position that its supported organization(s) would have engaged in these			
		ies but for the organization's involvement.	2b		
3		t of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а		e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
		es of each of the supported organizations? Provide details in Part VI.	За		
b		e organization exercise a substantial degree of direction over the policies, programs, and activities of each			
		supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

11051110 745960 28560

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	nizations			
1						
	other Type III non-functionally integrated supporting organizations must co	mplete S	ections A through E.			
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other					
	factors (explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,					
	see instructions)	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by .035	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions)	6				
7	Check here if the current year is the organization's first as a non-functional	ly integrat	ed Type III supporting org	anization (see		
	instructions).					

Schedule A (Form 990 or 990-EZ) 2016

Par	ιν	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _(continued)	
Secti	on D -	Distributions			Current Year
1	Amour	nts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported				
	organi	zations, in excess of income from activity			
3	Admin	istrative expenses paid to accomplish exempt purpose	IS		
4	Amour	nts paid to acquire exempt-use assets			
5	Qualifi	ed set-aside amounts (prior IRS approval required)			
6	Other	distributions (describe in Part VI). See instructions			
7	Total a	annual distributions. Add lines 1 through 6			
8	Distrib	utions to attentive supported organizations to which the	ne organization is responsive	e	
	(provic	de details in Part VI). See instructions			
9	Distrib	utable amount for 2016 from Section C, line 6			
10	Line 8	amount divided by Line 9 amount			
			(i)	(ii) Underdistributions	(iii) Distributable
Secti	on E -	Distribution Allocations (see instructions)	Excess Distributions	Pre-2016	Amount for 2016
1	Distrib	utable amount for 2016 from Section C, line 6			
2		distributions, if any, for years prior to 2016 (reason-			
	able ca	ause required- explain in Part VI). See instructions			
3		s distributions carryover, if any, to 2016:			
а					
b					
С	From 2	2013			
d	From 2	2014			
е	From 2	2015			
f	Total	of lines 3a through e			
		d to underdistributions of prior years			
h	Applie	d to 2016 distributable amount			
i	Carryo	over from 2011 not applied (see instructions)			
j	Remai	nder. Subtract lines 3g, 3h, and 3i from 3f.			
4		utions for 2016 from Section D,			
	line 7:	\$			
а	Applie	d to underdistributions of prior years			
b	Applie	d to 2016 distributable amount			
С	Remai	nder. Subtract lines 4a and 4b from 4			
5	Remai	ning underdistributions for years prior to 2016, if			
	any. S	ubtract lines 3g and 4a from line 2. For result greater			
	than z	ero, explain in Part VI. See instructions			
6	Remai	ning underdistributions for 2016. Subtract lines 3h			
	and 4b	o from line 1. For result greater than zero, explain in			
	Part V	I. See instructions			
7	Exces	s distributions carryover to 2017. Add lines 3j			
	and 4d				
8	Break	down of line 7:			
а					
b	Excess	s from 2013			
С	Excess	s from 2014			
d	Excess	s from 2015			
е	Excess	s from 2016			

Schedule A (Form 990 or 990-EZ) 2016

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 .

OMB No. 1545-0047

Name of the organization

Employer identification number

26-3477125 R STREET INSTITUTE Organization type (check one):

, games 1, per (0, 10, 10, 10, 10, 10, 10, 10, 10, 10, 1					
Filers of:	Section:				
Form 990 or 990-EZ	$\boxed{\textbf{X}}$ 501(c)(3) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	s covered by the General Rule or a Special Rule. (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					
sections 509(a)(1) any one contribute	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from or, 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, line 1. Complete Parts I and II.				
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for cruelty to children or animals. Complete Parts I, II, and III.				
year, contributions is checked, enter l purpose. Don't co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the seculusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., mplete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year \bigsim \$\$				
but it must answer "No" on	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to				

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

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		\$1,358,000.	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		
2		\$500,000.	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		
3		\$\$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
4		\$\$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
5		\$\$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
6		\$\$48,000.	Person X Payroll		

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		
7		\$\$310,000.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
8	Name, address, and Zir + +	\$ 230,000.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
9		\$ 200,000.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
10		\$\$\$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
11		\$ 155,000.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
12		\$ 150,000.	Person X Payroll		

R STREET INSTITUTE

26-3477125

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

Name of organization Employer identification number 26-3477125 R STREET INSTITUTE 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 Part III 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. `fŕom Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (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

11051110 745960 28560

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047
2016

Open to Public Inspection

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

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

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

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

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

Tax) (see separate instructions), then				
 Section 501(c)(4), (5), or (6) organiza 	ations: Complete Part III.			
Name of organization			E	mployer identification number
	ET INSTITUTE			26-3477125
Part I-A Complete if the or	ganization is exempt unde	er section 501(c)	or is a section 52	7 organization.
1 Provide a description of the organi	zation's direct and indirect politica	l campaign activities	in Part IV.	
2 Political campaign activity expendi	tures)	> \$
3 Volunteer hours for political campa	aign activities			
Part I-B Complete if the or	ganization is exempt unde	er section 501(c)	(3).	
1 Enter the amount of any excise tax	incurred by the organization unde	er section 4955		> \$
2 Enter the amount of any excise tax	incurred by organization manager	rs under section 4955	5	▶\$
3 If the organization incurred a section	on 4955 tax, did it file Form 4720 f	or this year?		Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV.				
Part I-C Complete if the or	ganization is exempt unde	er section 501(c)	, except section 5	01(c)(3).
1 Enter the amount directly expende	ed by the filing organization for sec	tion 527 exempt fund	tion activities	> \$
2 Enter the amount of the filing organ	nization's funds contributed to oth	er organizations for s	ection 527	
exempt function activities				> \$
3 Total exempt function expenditure	s. Add lines 1 and 2. Enter here an	d on Form 1120-POL	- ,	
line 17b				> \$
4 Did the filing organization file Form	1120-POL for this year?			Yes L No
5 Enter the names, addresses and e	mployer identification number (EIN) of all section 527 po	olitical organizations to v	which the filing organization
made payments. For each organiza	ation listed, enter the amount paid	from the filing organi	zation's funds. Also ente	er the amount of political
contributions received that were p				parate segregated fund or a
political action committee (PAC). If	additional space is needed, provide	de information in Part	t IV.	
(a) Name	(b) Address	(c) EIN	(d) Amount paid fro	
			filing organization's	
			funds. If none, enter	delivered to a separate
				political organization.
				If none, enter -0
	1	1	1	1

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

Schedule C (Form 990 or 990-EZ) 2016

LHA

632041 11-10-16

4-Year Averaging Period Under section 501(h)

i If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

reporting section 4911 tax for this year?

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total				
2a Lobbying nontaxable amount	242,267.	268,027.	323,562.	395,534.	1,229,390.				
b Lobbying ceiling amount (150% of line 2a, column(e))					1,844,085.				
c Total lobbying expenditures	8,590.	5,438.	12,057.	57,555.	83,640.				
d Grassroots nontaxable amount	60,567.	67,007.	80,891.	98,884.	307,349.				
e Grassroots ceiling amount (150% of line 2d, column (e))					461,024.				
f Grassroots lobbying expenditures		2,058.	500.	20,000.	22,558.				

Schedule C (Form 990 or 990-EZ) 2016

Yes

No

Schedule C (Form 990 or 990-EZ) 2016 R STREET INSTITUTE 26-347712 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)).

1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? C Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f 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 1 through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 d if the filing organization incurred a section 4912 tax, did if file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 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? 3 Did the organization make only in house lobbying and political campaign activity expenditures from the prior year? 3 Did the organization make only in house lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2 Section 162(e) condeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2 Description of the excess does the organization agree to carryover to the reasonable estimate of nondeducti	For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f 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 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 d If the filing organization incurred a section 4912 tax, clid it file Form 4720 for this year? Part III-A] Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only inhouse lobbying expenditures of \$2,000 or less? 2 Did the organization make only inhouse lobbying expenditures of \$2,000 or less? 2 Did the organization make only inhouse lobbying expenditures of \$2,000 or less? 2 Did the organization and the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) condeductible lobbying and political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total c Section 162(e) condeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 5 Taxable amount of lobbying and political expenditures	of the lobbying activity.	Yes	No	Amo	ount
or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Raillies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred under section 4912 d If the filling organization incurred a section 4912 tax (if it life Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No 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? 1 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 1 Dues, assessments and similar amounts from members 2 Section 162(e) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 2 Did the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure expenditure next year? 4 If notices were sent and the amount on line 2c exceeds the amount on	During the year, did the filing organization attempt to influence foreign, national, state or				
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f 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 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 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? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did (c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 182(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2 Carryover from last year 2 Ca 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (se					
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	 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground) 	he prior yea on 501(c) I "No," Ol cal	2 3 (5), or s R (b) Pa 2a 2b 2c 3	rt III-A, lii	ne 3, is
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	 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground) 	he prior yea on 501(c) I "No," Ol cal	2 3 (5), or s R (b) Pa 2a 2b 2c 3	rt III-A, lii	ne 3, is

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.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

R STREET INSTITUTE

Employer identification number 26-3477125

Par	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the				
	organization answered "Yes" on Form 990, Part IV, lin						
		(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	_					
	are the organization's property, subject to the organization's						
6	Did the organization inform all grantees, donors, and donor a						
	for charitable purposes and not for the benefit of the donor of						
Da	impermissible private benefit?						
Par		-	Part IV, line 7.				
1	Purpose(s) of conservation easements held by the organizati						
	Preservation of land for public use (e.g., recreation or e		torically important land area				
	Protection of natural habitat	Preservation of a cer	rtified historic structure				
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form					
	day of the tax year.		Held at the End of the Tax Year				
а	Total number of conservation easements						
b	Total acreage restricted by conservation easements						
C	Number of conservation easements on a certified historic str						
d	Number of conservation easements included in (c) acquired	•					
_	listed in the National Register		2d				
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by tr	ne organization during the tax				
	year						
4	Number of states where property subject to conservation ear						
5	Does the organization have a written policy regarding the per						
_	violations, and enforcement of the conservation easements i						
6	Staff and volunteer hours devoted to monitoring, inspecting,	nandling of violations, and enforcing cor	iservation easements during the year				
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ention consuments during the year				
'	\$	alling of violations, and emorcing conserv	ation easements during the year				
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17	O(b)(4)(B)(i)				
Ü							
9							
•	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for						
	conservation easements.	tion o initiation statements that describes	s the organization of accounting for				
Par	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or C	Other Similar Assets.				
	Complete if the organization answered "Yes" on Form	-					
	If the organization elected, as permitted under SFAS 116 (AS		ement and balance sheet works of art.				
	historical treasures, or other similar assets held for public ext						
	the text of the footnote to its financial statements that descri		a,				
b	If the organization elected, as permitted under SFAS 116 (AS		nt and balance sheet works of art, historical				
_	treasures, or other similar assets held for public exhibition, ed						
	relating to these items:		aano een 1100, promise 1110 nemening anneamie				
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$				
			> \$				
2	If the organization received or held works of art, historical tre						
_	the following amounts required to be reported under SFAS 1		J , F				
а	Revenue included on Form 990, Part VIII, line 1		> \$				
	Assets included in Form 990, Part X						

Schedule D (Form 990) 2016

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

Par	t III Organizations Maintaining C	collections of A	rt, Hist	torical Tr	easures, c	or Other	Similar A	ssets(contin	nued)
3	Using the organization's acquisition, accessi	on, and other record	ls, check	any of the	following tha	t are a sign	ificant use o	f its collection	n items
	(check all that apply):								
а	Public exhibition	d	ı 🔲 ı	Loan or exc	hange progra	ams			
b	Scholarly research	е		Other					
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	n how th	ey further t	the organizati	on's exemp	t purpose in	Part XIII.	
5	During the year, did the organization solicit of								
	to be sold to raise funds rather than to be ma	aintained as part of t	the organ	nization's c	ollection?			Yes	☐ No
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the	organizatio	n answered '	'Yes" on Fo	orm 990, Par	t IV, line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.							
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	ns or other as	sets not inc	cluded		
	on Form 990, Part X?							· Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII								
								Amount	t
С	Beginning balance						1c		
	Additions during the year						1d		
	Distributions during the year						1e		
f	f Ending balance 1f								
2a	Did the organization include an amount on F						?	Yes	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	xplanatio	n has beer	n provided on	Part XIII			
Par	t V Endowment Funds. Complete i	f the organization ar	swered	"Yes" on Fo	orm 990, Part	IV, line 10.			
		(a) Current year		rior year				oack (e) Four	years back
1a	Beginning of year balance	· ·	` '	•					
	Contributions								
	Net investment earnings, gains, and losses								
	Grants or scholarships								
	Other expenditures for facilities								
_	and programs								
f	Administrative expenses								
	End of year balance								
2	Provide the estimated percentage of the curr	rent vear end haland	e (line 1	a column (a)) held as:	L		I	
	Board designated or quasi-endowment	•	%	9, 00,0,1,1,1	ajj riola ao.				
	Permanent endowment	%	_′°						
	Temporarily restricted endowment								
·	The percentages on lines 2a, 2b, and 2c sho								
32	Are there endowment funds not in the posse		ation tha	nt are held s	and administs	rad for the	organization	•	
oa		331011 Of the organiz	ation the	it are ricid t	and administe	ica ioi tiic	organization	·	Yes No
	by: (i) unrelated organizations							3a(i)	163 140
	(ii) related organizations								
h	If "Yes" on line 3a(ii), are the related organiza								
4	Describe in Part XIII the intended uses of the								
_	t VI Land, Buildings, and Equipm		WITIETT	urius.					
	Complete if the organization answere) Part IV	/ line 11a 9	See Form 990	Part X lin	10 م		
	Description of property	(a) Cost or o						(d) Pool	k voluo
	Description of property	basis (investr			t or other (other)		umulated ciation	(d) Bool	k value
	Land	- ` ` `	110111)	کادمان	(00101)	debie	- CIGUIOI I	_	
	Land							-	
	Buildings							-	
	Leasehold improvements				8,084.		5,584.	 	2,500.
	Equipment				0,004.		J, JU4.	 	4,500.
	Other		V colum	an (D) line	100)				2,500.
iotal	- Aug iiies ta iiiiougit te. (Coluttiii (a) thust e	yuarı orri 550, Part	A, COIUII	, וווו (ט), וווו	100.)				_,

Schedule D (Form 990) 2016

Schedule D (Form 990) 2016 R STREET IN	STITUTE		26	-3477125	Page
Part VII Investments - Other Securities.					i age
Complete if the organization answered "Yes"	on Form 990. Part I\	/. line 11b. See Form 990.	Part X. line 12.		
(a) Description of Security or category (including name of security)	(b) Book value		aluation: Cost or end	-of-year market	value
(1) Financial derivatives	, ,	· · · ·		,	
(2) (1) (1) (1) (1)					
(2) Closely-held equity interests					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII Investments - Program Related.					
Complete if the organization answered "Yes"	on Form 990. Part I\	/. line 11c. See Form 990.	Part X. line 13.		
(a) Description of investment	(b) Book value		valuation: Cost or end	-of-year market	value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX Other Assets.					
Complete if the organization answered "Yes"	on Form 990, Part IV	/, line 11d. See Form 990,	Part X, line 15.		
(a)	Description			(b) Book va	alue
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		>		
Part X Other Liabilities.					
Complete if the organization answered "Yes"	on Form 990, Part I		n 990, Part X, line 25		
1. (a) Description of liability		(b) Book value			
(1) Federal income taxes					

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2016

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.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization R STREET	INSTITUTE	3					Employer identification number $26-3477125$
Part I General Information on Grants a							
 Does the organization maintain records criteria used to award the grants or assis Describe in Part IV the organization's pro 	stance?						tion X Yes No
Part II Grants and Other Assistance to	Domestic Organ	izations and Domest	ic Governments. C	omplete if the orga	anization answered "\	es" on Form 990, Part	t IV, line 21, for any
recipient that received more than	\$5,000. Part II ca	n be duplicated if addi	tional space is need	led.	(2) 11		
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
AMERICAN CONSUMER INSTITUTE PO BOX 2161							SUBGRANT - PROGRAM
RESTON, VA 20195	20-8601897	501(C)(3)	65,000.	0.			SUPPORT
JOHN LOCKE FOUNDATION 200 W. MORGAN ST., STE 200 RALEIGH, NC 27601	59-2811908	501(C)(3)	15,000.	0.			SUBGRANT - PROGRAM SUPPORT
JAMES MADISON INSTITUTE 100 N DUVAL ST. TALLAHASSEE, FL 32301	56-1656943	501(C)(3)	47,000.	0.			SUBGRANT - PROGRAM SUPPORT
FREEDOMWORKS FOUNDATION 400 N CAPITOL ST. NW, STE 765 WASHINGTON, DC 20001	52-1526916	501(C)(3)	25,000.	0.			SUBGRANT - PROGRAM SUPPORT
TEXAS PUBLIC POLICY FOUNDATION 900 CONGRESS ST., STE 400 AUSTIN, TX 78701	74-2524057	501(C)(3)	115,000.	0.			SUBGRANT - PROGRAM SUPPORT
 2 Enter total number of section 501(c)(3) a 3 Enter total number of other organization: 	-	-	he line 1 table			1	5. • 0.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information	required in Part I, lin	e 2; Part III, columr	n (b); and any other a	dditional information.	
PART I, LINE 2:					
SUBGRANTS ARE MONITORED BY THE F	ROGRAM STA	FF AND, DE	EPENDING ON	THE	
REQUIREMENTS IN EACH SUBGRANT AG	REEMENT, F	INAL AND/O	OR INTERIM	NARRATIVE AND	
FINANCIAL REPORTS ARE SUBMITTED	BY SUBGRAN'	TEE. THESE	E REPORTS A	RE REVIEWED	
AND APPROVED BY THE PROGRAM STAF	F AND BY T	HE FINANCE	E DIRECTOR.	AT A	
MINIMUM, ALL SUBGRANTS REQUIRE A	FINAL NAR	RATIVE RE	PORT.		

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.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

R STREET INSTITUTE

Employer identification number 26-3477125

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
3	Indicate which, if any, of the following the filing 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.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the very did any payon listed on Form 000 Part VIII. Continue A. line 10 with respect to the filing			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
_	organization or a related organization:	40		Х
a h	Receive a severance payment or change-of-control payment? Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4a 4b		X
D	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	The totally of lines are persons and provide the applicable amounts for each termination.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		77	
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	_		37
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		<u></u>

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

Schedule J (Form 990) 2016

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(6)(1)-(0)	reported as deferred on prior Form 990
(1) ELI LEHRER	(i)	181,439.	35,261.	0.	6,928.	16,685.	240,313.	0.
PRESIDENT AND BOARD VICE CHAIR	(ii)	0.	0.	0.	0.	0.		0.
(2) ERICA SCHODER	(i)	148,617.	14,000.	0.	4,973.	6,046.	173,636.	0.
OPERATIONS DIR. & CORP. TREAS.	(ii)	0.	0.	0.	0.	0.		0.
(3) ANDREW MOYLAN	(i)	165,811.	13,500.	0.	5,472.	8,042.		0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KEVIN KOSAR	(i)	150,750.	13,500.	0.	4,928.	407.		0.
DIRECTOR OF GOVERNANCE PROGRAM	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) DAVID CAMERON SMITH	(i)	135,231.	11,125.	0.	4,312.	17,936.		0.
DIRECTOR OF STATE PROGRAMS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
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Schedule J (Form 990) 2016 R STREET INSTITUTE	26-3477125	Page 3
Part III Supplemental Information		
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete	e this part for any additional information.	
PART I, LINE 1A:		
R STREET PROVIDES A TAXABLE HEALTH CLUB BENEFIT TO ALL FULL-TIME EMPLOYEES.		
UPON PROOF OF PAYMENT, R STREET REIMBURSES UP TO \$50 PER MONTH FOR HEALTH		
CLUB DUES.		
PART I, LINE 7:		
THE ORGANIZATION PROVIDED BONUSES TO THE FOLLOWING OFFICERS/EMPLOYEES:		
ANDREW MOYLAN \$13,500		
ERICA SCHODER \$14,000		
KEVIN KOSAR \$13,500		
DAVID CAMERON SMITH \$11,125		
CATRINA RORKE \$9,250		
RAY LEHMANN \$13,750		
LORI SANDERS \$9,500		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2016

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number 26-3477125

Name of the organization

R STREET INSTITUTE

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE FEDERAL BUDGET.

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

ISSUES. WE'VE CONTINUED OUR EFFORTS ON CARBON PRICING, PUBLISHING A

SERIES OF PAPERS LAYING THE FOUNDATION FOR OUR PRINCIPLED WORK ON A

REVENUE NEUTRAL CARBON TAX. IN COLLABORATION WITH THE AMERICAN

CONSERVATIVE, WE PUBLISHED A SERIES OF PIECES LAYING OUT A CONSERVATIVE

VISION FOR ENVIRONMENTAL AND ENERGY POLICY. WE CONTINUE TO PLACE

EMPHASIS ON FEDERAL CONGRESSIONAL STAFF EDUCATION, AN ESPECIALLY HIGH

PRIORITY IN PREPARATION FOR THE NEXT CONGRESS. WE ALSO EXPANDED OUR

WORK IN CROP INSURANCE REFORM IN 2016 THROUGH FIVE RESEARCH PAPERS AND

INCREASED CONGRESSIONAL EDUCATION. OTHER 2016 PROJECTS INCLUDE WORK ON

THE RENEWABLE FUEL STANDARD, THE GREENSCISSORS COALITION, NUCLEAR POWER

PLANT RETIREMENTS, AND TRENDS IN DIVESTMENT.

IN 2017, R STREET IS CONTINUING ITS WORK ON ELECTRICITY MARKET REFORM,

INCLUDING WORK ON REMOVING REGULATORY BARRIERS FOR CLEAN ENERGY AND

ENERGY INNOVATION. KEY WORK INCLUDES A WHITE PAPER ON BASELOAD

RETIREMENTS, MEETINGS WITH KEY STAKEHOLDERS AND POLICYMAKERS AT THE

STATE LEVEL ON CARBON PRICING AND REFORMING ELECTRICITY MARKETS, AND

OUTREACH TO CONSERVATIVES ON A PRINCIPLED, MARKET-BASED ENERGY POLICY.

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

MAKE THE FUTURE HAPPEN SOONER. WHETHER IT'S AUTONOMOUS VEHICLES,

AUGMENTED REALITY, OR HEALTH INNOVATIONS - WE BELIEVE DELAYING NEW

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

Schedule O (Form 990 or 990-EZ) (2016)

632211 08-25-16

Name of the organization R STREET INSTITUTE Employer identification number 26-3477125

TECHNOLOGIES HAS A REAL HUMAN COST THAT WOULD-BE REGULATORS DON'T ADEQUATELY CONSIDER.

BROADLY SPEAKING, WE EMBRACE THE CONCEPT OF "PERMISSIONLESS INNOVATION"

OVER THE "PRECAUTIONARY PRINCIPLE" - NAMELY, THAT THE BURDEN OF PROOF

IS ON THOSE WHO BELIEVE NEW INNOVATIONS SHOULD BE REGULATED TO

DEMONSTRATE POTENTIAL HARM. YET, WE ALSO SEEK TO OPERATE AT A DEEPER

LEVEL THAN JUST REASONING FROM FIRST PRINCIPLES. OUR MOTTO ISN'T MERELY

ABOUT "FREE MARKETS," IT'S ABOUT "REAL SOLUTIONS." THUS, WE WANT TO BE

IN THE WEEDS AND IN THE OVERTON WINDOW OF WHERE A POLICY DEBATE IS

HAPPENING. WHAT WE ADVOCATE FOR WON'T ALWAYS BE THE PERFECT LIBERTARIAN

SOLUTION, BUT IT WILL INCREMENTALLY ADVANCE THE CAUSE OF LIBERTY.

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

ARE HEADING FOR SOME DIFFICULT FUTURE RECKONING. CAN WE EVER GET THE

HOUSING FINANCE SECTOR TO IMPLEMENT COUNTER-CYCLICAL REFORMS? CAN WE

EVER GET FANNIE AND FREDDIE INTO SOME RATIONAL STRUCTURE? WITH THE NEXT

FINANCIAL CRISIS ALWAYS NEARER TO US THAN WE REALIZE, CONSTANT FOCUS ON

THE REPEATING HISTORY OF CYCLES IS NEEDED. A MARK OF OUR WORK GOING

FORWARD IS VIEWING FINANCIAL ISSUES IN THEIR LONG-TERM HISTORICAL

PERSPECTIVE, SO LITTLE UNDERSTOOD AND SO LITTLE KNOWN BY MOST FINANCIAL

PROFESSIONALS, LET ALONE THE AVERAGE PERSON. THIS INCLUDES THE

EVOLUTION OF THE BANKING SECTOR.

R STREET WORKS ON A VARIETY OF OTHER ISSUES RELATED TO FINANCIAL

CRISES, BANKING AND FINANCIAL REGULATION, RETIREMENT FINANCE, STUDENT

LOANS, AND RISK AND UNCERTAINTY. PUERTO RICO IS THE BIGGEST MUNICIPAL

INSOLVENCY IN HISTORY AND TRICKY IN POLITICS, ECONOMICS, FINANCE. R

632212 08-25-16 Schedule O (Form 990 or 990-EZ) (2016)

UNCERTAINTY AND RISK WILL REMAIN KEY THEMES.

Name of the organization

Employer identification number

R STREET INSTITUTE 26-3477125

STREET WILL STAY INVOLVED. ANTI-PRODUCTIVE FINANCIAL REGULATION NEEDS

REFORM. HERE WE FIND MORE UNJUSTIFIED PRETENSE OF KNOWLEDGE. ALSO

HIGHLY RELATED ARE THE GROWING INSOLVENCIES OF PENSION PLANS AND THE

GOVERNMENT'S GUARANTEES OF THEM. WHAT KIND OF BAILOUTS WILL BE

ATTEMPTED AND WHAT REFORMS CAN WE SUGGEST INSTEAD OR IN ADDITION?

FINALLY, FINANCIAL EVENTS ARE MARKED BY FUNDAMENTAL UNCERTAINTY.

IN ALL THESE AREAS, R STREET CONTINUES TO BE IN SUBSTANTIVE DISCUSSION
WITH THE RELEVANT CONGRESSIONAL CONTACTS, WORKING ON THE POLITICAL AS
WELL AS THE INTELLECTUAL DISCUSSIONS IN THE ABOVE AREAS. A VERY
PRODUCTIVE ACTIVITY IS MAINTAINING ACTIVE COLLABORATION AND TEAMWORK
WITH FRIENDS AND COLLEAGUES AT AEI. R STREET SHOULD CONTINUE FREQUENT
CONFERENCES ON VARIOUS IMPORTANT ISSUES THERE. OTHER IMPORTANT
COMMUNICATIONS ARE WITH OTHER THINK TANKS, ACADEMICS, JOURNALISTS,
EDITORS, FINANCIAL PRACTITIONERS, AND ANYBODY WITH INTERESTING IDEAS IN
THE FIELD. WE'VE CONTINUED TO BUILD OUR PROFILE IN THE FINANCIAL AND
FINANCIAL POLICY WORLD.

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

PUBLIC HEALTH: R STREET'S PUBLIC HEALTH PROGRAM EXAMINES HOW HARM

REDUCTION PROGRAMS AND POLICIES CAN POSITIVELY IMPACT THE CONSEQUENCES

THAT RISKY BEHAVIOR HAS ON BOTH INDIVIDUALS AND COMMUNITIES. WITH AN

EMPHASIS ON TOBACCO USE, IV DRUG USE, AND SEXUAL ACTIVITY OUR PUBLIC

HEALTH PROGRAM BRINGS A HARM REDUCTION PERSPECTIVE TO BOTH POSITIVE AND

NEGATIVE BEHAVIORS. OUR PRIMARY FOCUS REMAINS ON CURRENT TOPICS WHERE A

HARM REDUCTION APPROACH CAN HAVE A POSITIVE IMPACT. EXAMPLES INCLUDE

PROMOTING PUBLIC POLICIES THAT ENCOURAGE SMOKERS TO SWITCH TO LESS

Schedule O (Form 990 or 990-EZ) (2016) Page 2 Name of the organization **Employer identification number** R STREET INSTITUTE 26-3477125 HARMFUL NICOTINE PRODUCTS, LIKE ELECTRONIC CIGARETTES, THAT INCREASE CLEAN SYRINGE ACCESS TO STOP THE SPREAD OF INFECTIOUS DISEASE AND THAT ALLOW PEOPLE TO ENGAGE IN SAFE SEX. IN 2016 AND 2017, R STREET CONTINUED TO PUBLISH STUDIES AND OP-EDS ON HARM REDUCTION AND ENGAGED IN REGULATORY OUTREACH AND EDUCATION EFFORTS AROUND THE COUNTRY. EXPENSES \$ 441,684. INCLUDING GRANTS OF \$ 114. REVENUE \$ 0. CRIMINAL JUSTICE: R STREET'S CRIMINAL JUSTICE PROGRAM AIMS TO FORWARD A COMPREHENSIVE, SOLUTIONS-BASED CONSERVATIVE/LIBERTARIAN PROGRAM THAT DEALS WITH POLICING AND ADULT AND JUVENILE CORRECTIONS. R STREET'S ACTIVITIES INCLUDED LEADING THE WAY ON ISSUES OF JAIL REFORM, POLICING ISSUES, EMPLOYMENT FOR INDIVIDUALS WITH CRIMINAL HISTORY RECORDS, AND PLAYING A MAJOR ROLE IN EDUCATING THE PUBLIC AND LEGISLATORS ABOUT THE PROBLEMS INVOLVED IN THE PRACTICE OF INCLUDING JUVENILES ON SEX OFFENDER REGISTRIES. EXPENSES \$ 403,614. INCLUDING GRANTS OF \$ 115,152. REVENUE \$ 0. GOVERNANCE: THE GOVERNANCE PROJECT EXAMINES DEMOCRATIC DYSFUNCTION WITH A PARTICULAR FOCUS ON THE U.S. CONGRESS. THE AIM IS TO DIAGNOSE THE SOURCES OF THE DYSFUNCTION AND TO FIND REFORM PROPOSALS THAT PRODUCE MORE EFFECTIVE GOVERNANCE, AS INDICATED BY MORE TIMELY AND SUSTAINABLE BUDGETING, A REINVIGORATION OF CONGRESS AS THE FIRST BRANCH OF GOVERNMENT AND MORE CONSISTENT AND RESULTS-FOCUSED OVERSIGHT OF THE EXECUTIVE BRANCH. THE CENTERPIECE OF THE PROJECT IS THE LEGISLATIVE BRANCH CAPACITY WORKING GROUP (LBCWG), A JOINT PROJECT OF THE R STREET INSTITUTE AND NEW AMERICA. THE LBCWG IS A MONTHLY MEETING OF

Schedule O (Form 990 or 990-EZ) (2016)

CONGRESSIONAL STAFF AND EXPERTS HELD IN THE U.S. CAPITOL. THE GROUP

DISCUSSES VARIOUS ASPECTS OF CONGRESSIONAL CAPACITY, SUCH AS STAFFING

Name of the organization **Employer identification number** R STREET INSTITUTE 26-3477125 AND LEGISLATIVE BRANCH ORGANIZATION AND RESOURCES. THE INFORMATION HUB FOR THE LBCWG IS LEGBRANCH.COM, WHICH CARRIES NEW INFORMATIVE CONTENT AND ANALYSES EACH WEEK. THE GOVERNANCE PROJECT HAS PRODUCED RESEARCH ON CONGRESSIONAL OVERSIGHT, THE FEDERAL BUDGET, LEGISLATIVE SUPPORT AGENCIES, AND BUREAUCRACY. EXPENSES \$ 365,271. INCLUDING GRANTS OF \$ 183. REVENUE \$ 0. TAX & EXPENDITURE: R STREET'S TAX & EXPENDITURE PROGRAM PROMOTES SOUND TAX POLICY AND RESPONSIBLE LIMITS ON SPENDING. R STREET HAS ESTABLISHED ITSELF AS A NATIONAL LEADER ON INTERNET SALES TAX POLICY. IN 2015 AND 2016, R STREET WORKED DILIGENTLY ON CAPITOL HILL TO HELP CRAFT AN ALTERNATIVE APPROACH TO THE FLAWED MARKETPLACE FAIRNESS ACT. WE WERE ALSO AN ACTIVE PARTICIPANT IN ONGOING COALITIONS TO REFORM PROGRAMS LIKE THE MISGUIDED EXPORT-IMPORT BANK AND DISTORTIONARY TAX PREFERENCES FOR ENERGY SOURCES. WE MADE THE PRINCIPLED CASE FOR REFORMING SIGNIFICANTLY--AND ULTIMATELY ELIMINATING--STRUCTURALLY DEFICIENT LEVIES, LIKE THE CORPORATE INCOME TAX AND THE DEATH TAX. R STREET STAFF ALSO ENGAGED HEAVILY IN STATE-LEVEL BUDGET FIGHTS IN STATES LIKE FLORIDA, TEXAS, CALIFORNIA AND ALABAMA. EXPENSES \$ 154,608. INCLUDING GRANTS OF \$ 81. REVENUE \$ 0. INCOME MOBILITY: R STREET'S WORK ON INCOME MOBILITY EXAMINES POLICY SOLUTIONS, CENTERED ON WORK, FAMILY AND COMMUNITY--THAT ENSURE ALL AMERICANS HAVE ACCESS TO THE FUNDAMENTAL TOOLS NECESSARY TO ACCESS OPPORTUNITY. OUR 2016 WORK FOCUSED ON THE DIFFERENCE IN THE REAL VALUE OF EITC PAYMENTS BASED ON VARYING COSTS OF LIVING, AS WELL AS ON

Schedule O (Form 990 or 990-EZ) (2016)

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POTENTIAL REFORMS TO WIC. IN 2017, R STREET HAS PUBLISHED ON REFORMING

OCCUPATIONAL LICENSING REQUIREMENTS AND CONTINUED OUR WORK ON HOW

Name of the organization R STREET INSTITUTE

Employer identification number 26-3477125

POLICY CAN EMPOWER WORKERS TO ENTER INTO THE 'GIG ECONOMY' IN ORDER TO ENHANCE OPPORTUNITY.

EXPENSES \$ 121,861. INCLUDING GRANTS OF \$ 33. 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 OPERATIONS DIRECTOR 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.

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

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

COMMITTEE AFTER REVIEWING COMPARABILITY DATA AND IS DOCUMENTED. THE

COMPENSATION OF ALL OTHER EMPLOYEES IS EVALUATED AND SET BY THE

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

SALARY REVIEW TOOK PLACE IN DECEMBER 2016.

Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization R STREET INSTITUTE	Employer identification number 26-3477125
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT	OF INTEREST
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC	UPON REQUEST.