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

A For the 2018 calendar year, or tax year beginning

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

and ending

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

Open to Public Inspection

В	Check if applicable:	C Name of organization	D Employer identific	cation number
Г	□Address	FOREIGN POLICY RESEARCH INSTITUTE		
H	change Name change	Doing business as	- 23-1	731998
F	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/su		
F	Final return/	1528 WALNUT STREET 610		732-3774
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	2,072,939.
	Amende return	PHILADELPHIA, PA 19102	H(a) Is this a group re	eturn
	Applica-	F Name and address of principal officer: ALAN LUXENBERG	for subordinates	
	pending	SAME AS C ABOVE	H(b) Are all subordinates in	ncluded? Yes No
				list. (see instructions)
		WWW.FPRI.ORG	H(c) Group exemptio	
			ear of formation: 1970 N	1 State of legal domicile: $\overline{ extbf{DE}}$
P		Summary	OTTAL TIME COLOT	ADCUTD AND
S	1 B	riefly describe the organization's mission or most significant activities: HIGHEST (ONPARTISAN POLICY ANALYSIS FOCUSED ON U.S. I	CORLLIE SCHOL	AKSUIL AND
Governance	2	heck this box I if the organization discontinued its operations or disposed of m		
Veri	2 C	· · · · · · · · · · · · · · · · · · ·		46
	4 N	umber of voting members of the governing body (Part VI, line 1a) umber of independent voting members of the governing body (Part VI, line 1b)	4	46
<u>ფ</u>		otal number of individuals employed in calendar year 2018 (Part V, line 2a)		13
iţie	6 T	otal number of volunteers (estimate if necessary)		75
Activities &	7a T	otal unrelated business revenue from Part VIII, column (C), line 12	7a	0.
⋖		et unrelated business taxable income from Form 990-T, line 38		0.
			Prior Year	Current Year
ø	8 C	ontributions and grants (Part VIII, line 1h)	2,271,469.	1,616,432.
ž	9 P	rogram service revenue (Part VIII, line 2g)	346,331.	349,776.
Revenue	10 Ir	vestment income (Part VIII, column (A), lines 3, 4, and 7d)	-1,058.	2,969.
<u>~</u>	11 0	ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	67,115.	67,084.
	12 T	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,683,857.	2,036,261.
	13 G	rants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14 B	enefits paid to or for members (Part IX, column (A), line 4)	0.	0.
es	15 S	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	835,819.	925,768.
Expenses	16a P	rofessional fundraising fees (Part IX, column (A), line 11e)	0.	0.
ă	b T	otal fundraising expenses (Part IX, column (D), line 25) 176,574.	1 (12 100	1 554 106
ш	17 0	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,613,422.	1,554,106.
	1	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,449,241.	2,479,874.
<u> </u>		evenue less expenses. Subtract line 18 from line 12	234,616.	-443,613.
Net Assets or Find Balances	6		Beginning of Current Year 1,914,290.	End of Year 1,462,433.
ASSE	20 T	otal assets (Part X, line 16) otal liabilities (Part X, line 26)	302,267.	294,023.
let /	21 T	et assets or fund balances. Subtract line 21 from line 20	1,612,023.	1,168,410.
		Signature Block	1,012,023	1/100/1100
		es of perjury, I declare that I have examined this return, including accompanying schedules and stat	ements, and to the best of m	y knowledge and belief, it is
		and complete. Declaration of preparer (other than officer) is based on all information of which prepa		,
Sig	ın 📗	Signature of officer	Date	
He			INANCE	
		Type or print name and title		
		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Pai	_	ONNIE M. LIRA CONNIE M. LIRA	8/13/19 self-employ	P00481097
	· –	irm's name CLIFTONLARSONALLEN LLP	Firm's EIN	41-0746749
Use	Only	irm's address 610 W. GERMANTOWN PIKE, STE. 400		F (42 2000
_		PLYMOUTH MEETING, PA 19462	Phone no.21	5-643-3900
Ma	y the IRS	6 discuss this return with the preparer shown above? (see instructions)		Yes No

Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: THE FOREIGN POLICY RESEARCH INSTITUTE (FPRI) IS DEDICATED TO PRODUCING	G
	THE HIGHEST QUALITY SCHOLARSHIP AND NONPARTISAN POLICY ANALYSIS	
	FOCUSED ON CRUCIAL FOREIGN POLICY AND NATIONAL SECURITY CHALLENGES	
	FACING THE UNITED STATES. WE EDUCATE THOSE WHO MAKE AND INFLUENCE	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	No
	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? If "Yes," describe these changes on Schedule O.] No
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	1 420 720	<u>4</u> . \
4 a	RESEARCH: FPRI BRINGS THE INSIGHTS OF SCHOLARSHIP TO BEAR ON THE DEVELOPMENT OF POLICIES THAT ADVANCE U.S. NATIONAL INTERESTS ABROAD,	 ,
	ADDING PERSPECTIVE TO EVENTS BY FITTING THEM INTO LONGER-RANGE PATTERNS, AND DEVELOPING ALTERNATIVE POLICIES TO DEAL WITH PRESSING	
	U.S. INTERNATIONAL PROBLEMS. MAJOR RESEARCH PROGRAMS ARE: PROGRAM ON	
	NATIONAL SECURITY; CENTER FOR THE STUDY OF AMERICA AND THE WEST; ASIA	
	PROGRAM; PROGRAM ON THE MIDDLE EAST; EURASIA PROGRAM; AND THINK TANKS	
	AND FOREIGN POLICY.	
	222 000	
4b	(Code:) (Expenses \$ 333,988 • including grants of \$ 0 •) (Revenue \$ 178,655	<u>5•</u>)
	LECTURES & SEMINARS: FPRI HOSTS NUMEROUS EVENTS THROUGHOUT THE YEAR,	
	SUCH AS BRIEFINGS, BOOKTALKS, AND LECTURES ON ALL ASPECTS OF FOREIGN	
	AFFAIRS. THESE LECTURES AND SEMINARS INCLUDE: AN ANNUAL DINNER WHERE WAS AND ANNUAL DINNER WAS AND ANNUAL DINNER WAS AND	WE.
	AWARD THE BENJAMIN FRANKLIN AWARD FOR PUBLIC SERVICE TO A LEADING	
	FIGURE IN INTERNATIONAL RELATIONS (AWARDEES HAVE INCLUDED HENRY	
	KISSINGER, JAMES MATTIS, MICHAEL HAYDEN, AND ASH CARTER); THE ANNUAL	
	GINSBURG-SATELL LECTURE ON AMERICAN IDENTITY AND CHARACTER; THE ANNUAL	
	TEMPLETON LECTURE ON RELIGION AND WORLD AFFAIRS; AN ANNUAL BRUNCH WITH	
	LEADING INTERNATIONAL SCHOLARS AND PLAYERS; GEOPOLITICS WITH GRANIERI	
	(A MONTHLY EVENT FEATURING INTERVIEWS WITH GUEST SCHOLARS ON SUBJECTS	
	IN THE NEWS); OTHER REGULAR BRIEFINGS ARE HELD IN THE PHILADELPHIA	
	SUBURBS, PRINCETON-NJ, WASHINGTON-DC, AND ELSEWHERE; MONTHLY SALONS	
4c	(Code:) (Expenses \$ 111,681. including grants of \$ 0.) (Revenue \$ 167,304	<u>4 •</u>)
	PUBLICATIONS: FPRI SPONSORS AND PUBLISHES A WIDE ARRAY OF ARTICLES,	
	PAPERS, BOOKS, E-BOOKS, AND OTHER PUBLICATIONS FOR POLICYMAKERS, FOR	
	EDUCATORS, AND FOR THE PUBLIC. THESE INCLUDE: ORBIS: FPRI'S JOURNAL OR	
	WORLD AFFAIRS; GEOPOLITICUS: THE FPRI BLOG; E-NOTES (REGULAR BULLETINS	
	COVERING TOPICS IN THE NEWS; FOOTNOTES (AN FPRI BULLETIN INTENDED FOR	
	EDUCATORS); AND E-BOOKS (WEB-BASED MONOGRAPHS AND ESSAY COLLECTIONS).	
	FPRI ALSO PROVIDES ACCESS TO AND DISTRIBUTES AUDIO-VISUAL MATERIALS,	
	INCLUDING: A YOU-TUBE CHANNEL; REGULAR PODCASTS; V-NOTES (VIDEO ESSAYS	S
	FUSING SCHOLARLY RIGOR, RARE FOOTAGE, AND INNOVATIVE ANALYSIS ABOUT	
	AMERICAN FOREIGN POLICY TOWARD THE ARAB WORLD AND BEYOND); FPRI RADIO	
	(PODCASTS BETWEEN MEMBERS OF THE FPRI STAFF AND LEADING EXPERTS ON	
	CURRENT EVENTS RELATING TO AND AFFECTING WORLD AFFAIRS). THE EURASIA	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 200,350 • including grants of \$) (Revenue \$ 8,163 •)	
4e		
	Form 990 (2018)

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)?		х	
0	If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		-25	
3		3		x
4	public office? If "Yes," complete Schedule C, Part I 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	Ť		
	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,	_		X
0	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-		
3	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in 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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			,,
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		Х	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Λ	
ıza	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?	IZa	-25	
b	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		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			,.
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			_v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		x
20-	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19		X
20a b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
	Control of the contro			

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24 a	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	4		٠,,
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease		•	
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
D	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	0Eh		х
26	Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	25b		22
26	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
		26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
_,	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		х
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		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			l
	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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
0-	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
a	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	254		
26	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
36	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	30		
51	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?			
	Note. All Form 990 filers are required to complete Schedule O	38	х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 61			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		Х

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Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 13			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule 0)	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authority over, a	4		
	financial account in a foreign country (such as a bank account, securities account, or other financial a	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ►		4		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	1 /		•	
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction.		5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
ьа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		6-		x
h	any contributions that were not tax deductible as charitable contributions?		6a		22
D		ons or girts	6b		
7	Organizations that may receive deductible contributions under section 170(c).	^	OD		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a	Х	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	to file Form 8282?		7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c	ontract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control	act?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the			
			8		
9	Sponsoring organizations maintaining donor advised funds.		_		
а			9a		
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	10a			
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:	100			
	Gross income from members or shareholders	11a			
	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
b	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.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1			
	organization is licensed to issue qualified health plans	13b			
	Enter the amount of reserves on hand	13c			v
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule to the agreement(s) of more than \$1,000,000 in regular		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune		45		X
	excess parachute payment(s) during the year?		15		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t income?	16		Х
	If "Yes," complete Form 4720, Schedule O.	t income?	10		
	11 100, Complete Feminariza, Conocido O.		Form	990	/2010

Form **990** (2018

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 1a 46			
	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 46			
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		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		Х
6	Did the organization have members or stockholders?	6		Х
7a				
	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	
	Each committee with authority to act on behalf of the governing body?	8b	Х	
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		X
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		X
	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	Х	
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	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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	
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			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►PA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)	s only	availa	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	I finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	THE ORGANIZATION - 215-732-3774			
	1528 WALNUT STREET, NO. 610, PHILADELPHIA, PA 19102			

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)	orge		(0	C)		iout	(D)	(E)	(F)
Name and Title	Average	(do	not c	Posi heck	more	than	one	Reportable	Reportable	Estimated
	hours per week					is bot or/trus		compensation from	compensation from related	amount of other
	(list any	ctor						the	organizations	compensation
	hours for	or director				ted		organization	(W-2/1099-MISC)	from the
	related	ıstee (truste		يو	beusa		(W-2/1099-MISC)		organization
	organizations below	ual tru	ional		ploye	t com				and related organizations
	line)	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Forme			organizations
(1) JAMES H. AVERILL	2.00									
TRUSTEE		Х						0.	0.	0.
(2) MAUREEN AUSTIN	2.00						-			•
TRUSTEE	0 00	Х						0.	0.	0.
(3) J. MICHAEL BARRON	2.00	,,						_	0	0
TRUSTEE	2 00	Х				_		0.	0.	0.
(4) AMB. ADRIAN A. BASORA TRUSTEE	2.00	x	1					0.	0.	0.
(5) EDWARD T. BISHOP	2.00	42		_		-		•	•	<u> </u>
TRUSTEE	2.00	Х						0.	0.	0.
(6) RAZA BOKHARI	2.00					\vdash				
TRUSTEE		х						0.	0.	0.
(7) GWEN BOROWSKY	2.00									
TRUSTEE		Х						0.	0.	0.
(8) RUTH BRAMSON	2.00									
TRUSTEE		Х						0.	0.	0.
(9) RICHARD P. BROWN, JR.	2.00									
TRUSTEE		Х						0.	0.	0.
(10) ROBERT E. CARR	2.00								_	
TRUSTEE		Х						0.	0.	0.
(11) AHMED CHARAI	2.00							•		•
TRUSTEE	2 00	Х						0.	0.	0.
(12) WINSTON J. CHURCHILL	2.00	х						0.	0.	0.
TRUSTEE (13) WILLIAM L. CONRAD	2.00	Λ				\vdash		0.	0.	0.
TRUSTEE	2.00	х						0.	0.	0.
(14) GERARD CUDDY	2.00	Λ				\vdash		0.	0.	<u> </u>
TRUSTEE	2.00	х						0.	0.	0.
(15) GENE CUNNINGHAM	2.00							•	•	
TRUSTEE		х						0.	0.	0.
(16) PETER DACHOWSKI	2.00								<u> </u>	
TRUSTEE		х						0.	0.	0.
(17) JOSEPH FIELD	2.00									
TRUSTEE		Х						0.	0.	0.

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Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ighe	st C	compensated Employe	es (continued)			
(A)	(B)			(((D)	(E)		(F)	
Name and title	Average		not c	Pos heck	more	than		Reportable	Reportable		Estimat	
	hours per week			ss pe				compensation	compensation	8	amount	
	(list any	Η.					Ú	from the	from related organizations		other	
	hours for	direct				-		organization	(W-2/1099-MISC)		mpensa from th	
	related	ee or	stee			nsate		(W-2/1099-MISC)	(** 2, 1000 111100)	ı	rganiza	
	organizations	Individual trustee or director	Institutional trustee		yee	Highest compensated employee				ı	nd rela	
	below	vidual	tutior	ser	Key employee	lest c	ner			or	ganizat	ions
	line)	Indi	Inst	Officer	Key	High	Former			$\perp \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \!$		
(18) ROBERT A. FOX	2.00								4	+4		
TRUSTEE		Х						0.	0			0.
(19) JAMES H. GATELY	2.00									"		^
TRUSTEE	2 00	X						0.	0	-		0.
(20) SUSAN H. GOLDBERG	2.00	\ \ -						0.				^
TRUSTEE (21) TOWN B. HATNING	2.00	Х						0.	U	+		0.
(21) JOHN R. HAINES TRUSTEE	2.00	Х						0.	0			0.
(22) JAMES T. HITCH, III	2.00	^				-		0.	U	+		<u> </u>
TRUSTEE	2.00	Х						0.	0			0.
(23) SA IBRAHIM	2.00							0.	0	\div		<u> </u>
TRUSTEE	2.00	Х						0.	0			0.
(24) DONALD R. KARDON	2.00							0.		╧		••
TRUSTEE		x						0.	0			0.
(25) MARINA KATS	2.00								-	+		
TRUSTEE		х						0.	0			0.
(26) HON. JOHN F. LEHMAN	2.00									\top		
TRUSTEE		х						0.	0			0.
1b Sub-total							-	0.	0			0.
c Total from continuation sheets to Part VI	I, Section A						>	347,310.	0		44,8	
d Total (add lines 1b and 1c)								347,310.	0	• .	44,8	47.
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bove	e) wł	no re	eceived more than \$100	0,000 of reportable			_
compensation from the organization											_	1
											Yes	No
3 Did the organization list any former officer,												37
line 1a? If "Yes," complete Schedule J for s										. 3		X
4 For any individual listed on line 1a, is the su											x	
and related organizations greater than \$150										4	↑ ^	
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	-				-			-		. 5		х
Section B. Independent Contractors	piete Scriedui	e	Or St	ucn	pers	SOII .				3		22
Complete this table for your five highest co	mnensated in	dene	ande	ent c	onti	racto	ore t	hat received more than	\$100,000 of compe	neation	from	
the organization. Report compensation for	="	-							· · · · · · · · · · · · · · · · · · ·	isatioi	1110111	
(A)	ario calcinaar y	<u>oui</u>	<u> </u>	<u>g</u> .	*****	<u> </u>	T	(B)	your.		(C)	
Name and business	address	N	INC	Ξ				Description of s	services		ensatio	n
							\dashv					
O Tatal mumb on afting to a subject a subject to the control of th	a ali calia e le cel	-4 11		al 4 -	- مالد	"	1	1 ab a a) b a a . b	and then			
2 Total number of independent contractors (i		III TOI	mite	u to	เทอ	se II: N	stec	above) who received h	iore trian			
\$100,000 of compensation from the organi		ידי	JII/	<u> Т</u>	רסז	<u>v</u>	SHI	EETS		Forr	n 990	(2018)

Form 990 FOREIGN	POLICY I	RES	SEA	ARC	<u> </u>	II	<u> 181</u>	PITUTE	23-173	1998
Part VII Section A. Officers, Directors, Tr	rustees, Key E	mplo	oyee	s, a	nd F	ligh	est	Compensated Employ	rees (continued)	
(A)	(B)			(((D)	(E)	(F)
Name and title	Average			Posi				Reportable	Reportable	Estimated
	hours	(cl	heck				ly)	compensation	compensation	amount of
	per						Ė	from	from related	other
	week					oyee		the	organizations	compensation
	(list any	director				empl		organization	(W-2/1099-MISC)	from the
	hours for	or di	ee			sated		(W-2/1099-MISC)		organization
	related organizations	rustee	l trust		ee	ubeu				and related organizations
	below	Individual trustee or	Institutional trustee		nploy	st cor	_			Organizations
	line)	Indivi	Institu	Officer	Key employee	Highest compensated employee	Former			
(27) MURRAY S. LEVIN	2.00									
TRUSTEE		X						0.	0.	0.
(28) DAVID MARSHALL	2.00									
TRUSTEE		X						0.	0.	0.
(29) SARAH J.M. MARSHALL	2.00									
TRUSTEE		Х						0.	0.	0.
(30) JAMES MEYER	2.00									
TRUSTEE		Х						0.	0.	0.
(31) RONALD J. NAPLES	2.00									
TRUSTEE		Х						0.	0.	0.
(32) MICHAEL NOVAKOVIC	2.00									
TRUSTEE		X						0.	0.	0.
(33) EDWARD OCONNOR	2.00									
TRUSTEE		Х						0.	0.	0.
(34) ROBERT ODONNELL	2.00									
TRUSTEE		Х					4	0.	0.	0.
(35) MARSHALL W. PAGON	2.00									
TRUSTEE		Х						0.	0.	0.
(36) JAMES M. PAPADA, III	2.00									
TRUSTEE		Х						0.	0.	0.
(37) JOHN W. PIASECKI	2.00									
TRUSTEE		X						0.	0.	0.
(38) EILEEN ROSENAU	2.00									
TRUSTEE		Х						0.	0.	0.
(39) ADELE K. SCHAEFFER	2.00									
TRUSTEE		Х						0.	0.	0.
(40) HILLARD R. TORGERSON	2.00									
TRUSTEE		Х						0.	0.	0.
(41) LEE WOOLLEY	2.00	ļ								
TRUSTEE		Х						0.	0.	0.
(42) GARY A. FRANK	2.00	ļ								
TRUSTEE		Х						0.	0.	0.
(43) ALAN L. REED	2.00	ļ								
TRUSTEE		Х						0.	0.	0.
(44) LIONEL SAVADOVE	2.00	۱								•
TRUSTEE	1	Х	Ш			<u> </u>		0.	0.	0.
(45) EDWARD L. SNITZER	2.00	1								_
TRUSTEE	1	Х	Ш			_		0.	0.	0.
(46) ROBERT L. FREEDMAN	2.00	1								_
CHAIRMAN		X		X				0.	0.	0.
Total to Part VII, Section A, line 1c										

Form 990 FOREIGN	POLICY I	RES	SEZ	ARC	CH	II	<u> 181</u>	TITUTE	23-173	1998
Part VII Section A. Officers, Directors, Tru	ustees, Key Eı	mple	oyee	s, a	nd l	High	est	Compensated Employ	ees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Pos	ition	1		Reportable	Reportable	Estimated
	hours	(c	heck	k all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensation
	(list any	recto				em pl		organization	(W-2/1099-MISC)	from the
	hours for	or di	98			sated		(W-2/1099-MISC)		organization
	related organizations	rustee	l frust		ee	npen				and related organizations
	below	dual t	tiona	١.	nploy	stcor				organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) DEVON CROSS	2.00									
VICE CHAIR		Х		Х				0.	0.	0.
(48) SAMUEL J. SAVITZ	2.00									
VICE CHAIR		Х		Х				0.	0.	0.
(49) HON. DOV S. ZAKHEIM	2.00			l						•
VICE CHAIR	0.00	Х		Х				0.	0.	0.
(50) HON. JOHN HILLEN	2.00			7.				1 0		0
TREASURER (51) ALAN H. LUXENBERG	40.00	Х	-	Х		-		0.	0.	0.
PRESIDENT	40.00	\mathbf{I}		x				176,460.	0.	18,423.
(52) GEORGE C. BURGWIN	40.00			^				170,400.	0.	10,423
ASST. TREASURER/DIR. FINANCE	10.00	ł		x				90,808.	0.	13,705.
(53) ELI S. GILMAN	40.00						-	7777		
SECRETARY/VP OPERATIONS/COO		1		х				80,042.	0.	12,719.
										•
				١.,						
							_			
				,						
		1								
		1								
		-								
		-								
▼						\vdash				
			L			L				
								0.45		44.645
Total to Part VII, Section A, line 1c								347,310.		44,847.

Pa	rt V	111				=			
			Check if Schedule O contain	ins a response	or note to any lir	ne in this Part VIII (A)	(B)	(C)	<u> </u>
						Total revenue	Related or	Unrelated	Revenue excluded from tax under
							exempt function revenue	business revenue	sections 512 - 514
र र	1 :	_	Federated campaigns	1a			Tovondo	Tovondo	312 - 314
ran			Membership dues						
mc mc			Fundraising events						
iifts ar A			Related organizations	······					
s, G mila			Government grants (contribution	······					1
ion Si			All other contributions, gifts, grants	′ 				4	
but			similar amounts not included above		616,432.				
ntri d O	(g	Noncash contributions included in lines 1		36,678.				·
Contributions, Gifts, Grants and Other Similar Amounts			Total. Add lines 1a-1f		>	1,616,432.			
					Business Code				
မွ	2 8		MEMBERSHIPS & PA	ARTNERS	928120	228,428.			
e Ž	ı	b	PUBLICATIONS		511120	100,114.	100,114.		
Program Service Revenue	(С	LECTURES & SEMIN	NARS	713990	21,234.	21,234.		
ran }ev	(d							
rog	(е							
Ъ			All other program service reven			242 556			
		g	Total. Add lines 2a-2f			349,776.			
	3		Investment income (including d			4 777			4 777
			other similar amounts)			4,777.			4,777.
	4		Income from investment of tax-		•	62,640.	62,640.		
	5		Royalties			02,040.	02,040.		
	6 /	_	Green rents	(i) Real	(ii) Personal				
			Gross rents Less: rental expenses						
			Rental income or (loss)						
			Net rental income or (loss)						
			Gross amount from sales of	(i) Securities	(ii) Other				
	•	_	assets other than inventory	34,870.	(1)				
	ı	b	Less: cost or other basis						
			and sales expenses	36,678.					
	(С	Gain or (loss)	-1,808.					
	(d	Net gain or (loss)			-1,808.			-1,808.
<u>e</u>	8 8	а	Gross income from fundraising	events (not					
enr			including \$	of of					
3ev			contributions reported on line 1						
Other Revenue			Part IV, line 18						
O#			Less: direct expenses						
			Net income or (loss) from fundr						
	9 8	а	Gross income from gaming acti						
		L	Part IV, line 19 Less: direct expenses						
		- 4	Net income or (loss) from gamir						
		-	Gross sales of inventory, less re	-					
		u	and allowances						
		b	Less: cost of goods sold						
			Net income or (loss) from sales		>				
			Miscellaneous Revenue		Business Code				
	11 8	a	OTHER INCOME		900099	3,871.			3,871.
	ı	b	MERCHANDISE REVI	ENUE	900099	573.			573.
	(С							
			All other revenue						
		е	Total. Add lines 11a-11d			4,444.	410 416		F 440
	12		Total revenue. See instructions .			2,036,261.	412,416.	0.	7,413.

<u> </u>	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 and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				/
5	Compensation of current officers, directors,				
	trustees, and key employees	392,157.	177,497.	121,680.	92,980
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	424,061.	421,793.	1,329.	939
8	Pension plan accruals and contributions (include	4 - 44	4.4.0		
	section 401(k) and 403(b) employer contributions)	15,039.	14,955.	35.	49
9	Other employee benefits	35,504.	30,528.	2,516.	2,460
10	Payroll taxes	59,007.	41,641.	9,688.	7,678
11	Fees for services (non-employees):				
а	Management				
b	Legal	10.560	10 101		4 05
С	Accounting	19,562.	12,421.	5,287.	1,854
	Lobbying				
е	Professional fundraising services. See Part IV, line 17	5,500	5 500	4 0 4 4	4.4
f	Investment management fees	7,688.	5,599.	1,941.	148
g	Other. (If line 11g amount exceeds 10% of line 25,	4 024	0 561	1 000	202
	column (A) amount, list line 11g expenses on Sch O.)	4,034.	2,561.	1,090.	383
12	Advertising and promotion	84,727.	37,839.	15 220	46,888
13	Office expenses	81,176.	63,223.	15,339.	2,614
14	Information technology	49,177.	33,155.	14,392.	1,630
15	Royalties	101 /15	05 060	22 026	10 605
16	Occupancy	121,415.	85,962.	22,826.	12,627 1,381
17	Travel	218,535.	212,862.	4,292.	1,301
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	220,736.	212,342.	6,967.	1,427
19	Conferences, conventions, and meetings	220,730.	212,342.	0,907.	1,44/
20	Interest				
21	Payments to affiliates	15,918.	10,824.	4,733.	361
22	Depreciation, depletion, and amortization	14,532.	9,881.	4,321.	330
23 24	Other expenses. Itemize expenses not covered	11,332.	3,001.	1,321.	330
24	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	HONORARIA & STIPEND	654,862.	653,602.	1,260.	
b	SUBS. & MEMBERSHIPS	12,697.	3,836.	6,036.	2,825
c					-
d					
е	All other expenses	49,047.	46,236.	2,811.	
25	Total functional expenses. Add lines 1 through 24e	2,479,874.	2,076,757.	226,543.	176,574
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)				

Form 990 (2018)

Part X | Balance Sheet

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	te to ar	y line in this Part X			
					(A) Beginning of year 956,463.		(B) End of year
	1	Cash - non-interest-bearing	erest-bearing				582,744.
	2	Savings and temporary cash investments			228,581.	2	287,443.
	3	Pledges and grants receivable, net			615,400.	3	496,878.
	4	Accounts receivable, net			72,295.	4	64,724.
	5	Loans and other receivables from current and for					4
		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	1 4958(c)(3)(B), and contributing		4	
		employers and sponsoring organizations of sec	tion 50	1(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instr).	Comp	lete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net				7	
ď	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			14,185.	9	10,335.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	139,315.			
	b	Less: accumulated depreciation	10b	132,961.	22,273.	10c	6,354.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line	11			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			5,093.	15	13,955.
	16	Total assets. Add lines 1 through 15 (must equ	al line (34)	1,914,290.	16	1,462,433.
	17	Accounts payable and accrued expenses			122,348.	17	107,764.
	18	Grants payable				18	
	19	Deferred revenue			179,919.	19	186,259.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to current and former					
Ħ		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	3 17-24). Complete Part X of			
		Schedule D			302,267.	25	294,023.
	26	Total liabilities. Add lines 17 through 25			302,207.	26	234,023.
		Organizations that follow SFAS 117 (ASC 958		ck nere 🚩 🔼 and			
Ses		complete lines 27 through 29, and lines 33 and lines 33 and lines 34 and lines 35 and lines 35 and lines 36 and lines 36 and lines 36 and lines 37 through 29, and lines 38 an			-24,429.	07	51,818.
lan	27	Unrestricted net assets			1,636,452.	27 28	1,116,592.
Ba	28	Temporarily restricted net assets			1,030,432.	29	1,110,352.
Ρ̈́	29			O) abaak basa N		29	
Ē		Organizations that do not follow SFAS 117 (A	SC 95	s), check here			
S		and complete lines 30 through 34.				20	
set	30	Capital stock or trust principal, or current funds				30	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or ed				31	
Ret	32	Retained earnings, endowment, accumulated in			1,612,023.	32 33	1,168,410.
	33	Total liabilities and not posets/fund balances			1,914,290.	33	1,462,433.
	34	Total liabilities and net assets/fund balances			1,714,470.	34	1, 102, 133.

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			6,2	
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,	47	9,8	74.
3	Revenue less expenses. Subtract line 2 from line 1	3				13.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,	61	<u>2,0</u>	23.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6		4		
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,	K				
	column (B))	10	1,	16	8,4	10.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<i></i>			Ш
			_		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	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Auc	lit			
	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 requi	ired aud	it			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization FOREIGN POLICY RESEARCH INSTITUTE **Employer identification number** 23-1731998

Pa	rt I	Reason for Public (Charity Status (All organizations must co	omplete th	is part.) Se	ee instructions.				
Γhe	organ	ization is not a private found	lation because it is: (For lines 1 through 12, o	check only	one box.)					
1		A church, convention of ch	urches, or association	on of churches describe	d in sectio	n 170(b)(1)(A)(i).				
2		A school described in sect i									
3		A hospital or a cooperative					ii).				
4	一	A medical research organiz						the hospital's name			
•		city, and state:	a operatea ee.	.,,				, included in the state of the			
5			An organization operated for the benefit of a college or university owned or operated by a governmental unit described in								
9		section 170(b)(1)(A)(iv). (C		liege of difficulty owner	а ог орста	ica by a g	overnmental and desem	oca iii			
6				nontal unit described in	coetion 17	70/6\/4\/4\	(4)				
6	X	A federal, state, or local gov						nublic described in			
′	21	An organization that norma		initial part of its support i	rom a gov	emmentai	unit or from the general	public described in			
		section 170(b)(1)(A)(vi). (C	. ,	(4)(A)(vi) (Camaniata Day	. 11 \						
8		A community trust describe						a alla ma			
9		An agricultural research org									
		or university or a non-land-g	grant college of agric	culture (see instructions).	. Enter the	name, city	y, and state of the colleg	je or			
10		university: An organization that norma	Illy reasily as (1) mars	than 22 1/20/ of its our	nort from	oontributi	ana mambarahin fasa s	and grace receipts from			
10		~	•	•							
		activities related to its exen									
		income and unrelated busin		(less section 511 tax) if	om busine	sses acqu	lired by the organization	aπer June 30, 1975.			
		See section 509(a)(2). (Cor	'		data Can		20/-1/4)				
11		An organization organized	•								
12		An organization organized a									
		more publicly supported or	-					Sheck the box in			
_		lines 12a through 12d that						, airina			
а		☐ Type I. A supporting orga									
		the supported organization			a majority (or the aire	ctors or trustees of the s	supporting			
		organization. You must o			4: · · · · · · · · · · · · · · · · ·		iti(-)				
D		☐ Type II. A supporting org									
		control or management o			ame perso	ons that co	ontrol or manage the sup	ропеа			
_		organization(s). You mus			:	. حادث		مالاند، الم			
C		☐ Type III functionally inte						ea with,			
		its supported organization Type III non-functionally						ization(a)			
u			- 1				• • • •				
		that is not functionally int requirement (see instruct						iveriess			
_		Check this box if the orga									
е		functionally integrated, or					a type i, type ii, type iii				
f	Ente	er the number of supported of		rially integrated support	ing organiz	zation.					
		vide the following information	•	ed organization(s)							
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of monetary	(vi) Amount of other			
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)			
				asove (see mondenemen)							
Γ∩t≤	31						i e	1			

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

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

Sec	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						_
	membership fees received. (Do not						
	include any "unusual grants.")	1,298,460.	1,212,188.	2,189,475.	2,271,469.	1,616,432.	8,588,024.
2	Tax revenues levied for the organ-						4
	ization's benefit and either paid to						1
	or expended on its behalf					4	
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1,298,460.	1,212,188.	2,189,475.	2,271,469.	1,616,432.	8,588,024.
5	The portion of total contributions						
	by each person (other than a					1	
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,				\circ		
	column (f)						4,572,405.
	Public support. Subtract line 5 from line 4.						4,015,619.
	ction B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	1,298,460.	1,212,188.	2,189,475.	2,271,469.	1,616,432.	8,588,024.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	2.0	1.1	204	1 410	4 555	6 560
	and income from similar sources	30.	11,	324.	1,418.	4,777.	6,560.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital			9,127.	1,150.	1 111	1 / 721
	assets (Explain in Part VI.)	<u> </u>		9,147.	1,150.	4,444.	
	Total support. Add lines 7 through 10	1 () 1	,			10 2	8,609,305. ,178,634.
12	·	•					,170,034.
13	First five years. If the Form 990 is for				•		. □
Sec	organization, check this box and stor ction C. Computation of Publ	ic Support Pe	rcentage				<u></u>
	Public support percentage for 2018 (I			olumn (fl)		14	46.64 %
	Public support percentage from 2017					15	43.60 %
	33 1/3% support test - 2018. If the o						
	stop here. The organization qualifies	-					
b	33 1/3% support test - 2017. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes						
	more, and if the organization meets the	_					
	organization meets the "facts-and-circ	cumstances" test.	The organization q	ualifies as a public	cly supported orga	anization	 ▶□
18	Private foundation. If the organization						s ▶
						dule A (Form 990	

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	elow, please comp	Diete i ait ii.)				
	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Gifts, grants, contributions, and	(-,	() =	(-,	(-)	(-,	(4)
	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						
2	organization's tax-exempt purpose Gross receipts from activities that						
3	'						
	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						
	Total. Add lines 1 through 5						
7	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	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						
8	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support					_	
Cale	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(Add lines 10a and 10b	1					
	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	firet econd this	d fourth or fifth t	tay year as a secti	n 501(c)(3) organia	I
17	along the base of the same	· ·	,		•		ation,
Se	ction C. Computation of Publ	ic Support Pe					
	Public support percentage for 2018 (I			column (f))		15	%
16	Public support percentage from 2017					16	
	ction D. Computation of Inves					1 10	70
	Investment income percentage for 20			ine 13 column (f))		17	%
	Investment income percentage from 2					18	%
	a 33 1/3% support tests - 2018. If the						
.50	more than 33 1/3%, check this box a						▶
	33 1/3% support tests - 2017. If the						and
•	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization						

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
4			
	2		
X	3a		
	Ja		
	3b		
	3с		
	55		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	_		
	7		
	8		
	9a		
	Ja		
	9b		
	9с		
	46		
	10a		
	10b		
m 9	90 or 99	0-E7	2018

Pai	rt IV	Supporting Organizations (continued)			
		ontinuosy		Yes	No
11	Has th	ne organization accepted a gift or contribution from any of the following persons?			
а		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		
b		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			
				Yes	No
1	Did th	e directors, trustees, or membership of one or more supported organizations have the power to			110
•		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			
		olled 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			
		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		C. Type II Supporting Organizations			
000	tion (5. Type if cupporting organizations		Yes	No
1	Mora	a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	140
•		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			
		upported organization(s).	1		
Sec		D. All Type III Supporting Organizations			
		5. 7th Type in Supporting Organizations		Yes	No
1	Did th	e organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
•		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			
		ization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2		any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	-		
2		ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
		ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3		ason of the relationship described in (2), did the organization's supported organizations have a			
3		cant voice in the organization's investment policies and in directing the use of the organization's			
		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.	2		
Sec		E. Type III Functionally Integrated Supporting Organizations	3		
1		k the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
' a		The organization satisfied the Activities Test. Complete line 2 below.	'		
b		The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
c		The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	2)	
2		ties Test. Answer (a) and (b) below.	1	Yes	No
a		ubstantially all of the organization's activities during the tax year directly further the exempt purposes of		100	110
u		apported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
		supported organizations and explain how these activities directly furthered their exempt purposes,			
		he organization was responsive to those supported organizations, and how the organization determined			
		nese activities constituted substantially all of its activities.	2a		
b		e activities described in (a) constitute activities that, but for the organization's involvement, one or more	Lu		
		organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
		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. Answer (a) and (b) below.	20		
о a		e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а		es of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
b		es of each of the supported organizations? Provide details in Part VI.	Ja		
J		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) Supporting	Org	anizations	j
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust c	on Nov. 20, 1970 (explain in	Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must com	plete	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		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-functionally	integr	ated Type III supporting org	anization (see

Schedule A (Form 990 or 990-EZ) 2018

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

Schedule A (Form 990 or 990-EZ) 2018

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;

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 IIII IV, Section B, lines 1 and 2; Part IV, Section B, lines 1; Part IV, Section	n C, art V,
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:	
OTHER INCOME	
2016 AMOUNT: \$ 9,127.	
2017 AMOUNT: \$ 1,150.	
2018 AMOUNT: \$ 3,871.	
MERCHANDISE REVENUE	
2018 AMOUNT: \$ 573.	
.6	
.05	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

FOREIGN POLICY RESEARCH INSTITUTE

Employer identification number 23-1731998

Schedule D (Form 990) 2018

Pai	t 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		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		4
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 advise	ed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be u	used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose o	conferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, Pa	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a histo	rically important land area
	Protection of natural habitat	Preservation of a certif	ied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form o	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	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		organization during the tax
	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 i	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	ervation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservati	ion easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h	n)(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 t	he organization's accounting for
	conservation easements.		
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statem	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	nibition, education, or research in furtheran	ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	bes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ea	ducation, or research in furtherance of pub	lic 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		> \$
b	Assets included in Form 990, Part X		> \$

832051 10-29-18

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

Pai	t III Organizations Maintaining C	collections of Ar	t, Historical T	reasures, o	or Other S	Similar Ass	e ts (continue	ed)
3	Using the organization's acquisition, accessi	on, and other records	s, check any of the	following tha	t are a signi	ficant use of its	s collection i	tems
	(check all that apply):							
а	Public exhibition	d	Loan or exc	change progra	ams			
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	how they further	the organizati	on's exempt	purpose in Pa	ırt XIII.	
5	During the year, did the organization solicit of		•	•			_	
_	to be sold to raise funds rather than to be ma						Yes	<u> </u>
Pai	reported an amount on Form 990, Par	-	te if the organization	on answered '	'Yes" on For	m 990, Part IV	, line 9, or	
1a	Is the organization an agent, trustee, custod	ian or other intermedi	ary for contributio	ns or other as	sets not inc	luded		
	on Form 990, Part X?					L	Yes	└── No
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing table:					
							Amount	
	Beginning balance					1c		
	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
	Did the organization include an amount on F					L	Yes	├─ No
	If "Yes," explain the arrangement in Part XIII.							
Pai	T V Endowment Funds. Complete i					-	1	
		(a) Current year	(b) Prior year	(c) Two year	s back (d)	Three years back	((e) Four ye	ears back
	Beginning of year balance							
	Contributions							
	Net investment earnings, gains, and losses)				
	Grants or scholarships			1				
е	Other expenditures for facilities							
	and programs			1				
	Administrative expenses							
	End of year balance		(i) d					
2	Provide the estimated percentage of the curr	rent year end balance		a)) neid as:				
a	Board designated or quasi-endowment	. 2	_%					
	Permanent endowment							
С	Temporarily restricted endowment	%						
0-	The percentages on lines 2a, 2b, and 2c sho		41 414 11-I					
3a	Are there endowment funds not in the posse	ession of the organiza	tion that are held a	and administe	erea for the c	organization	[v	N-
	by:							es No
	(i) unrelated organizations						3a(i)	-
.	(ii) related organizations	ations listed as require	nd on Cohodulo Di				3a(ii)	-
_	Describe in Part XIII the intended uses of the			·			3b	
Par	t VI Land, Buildings, and Equipm		willetti turius.					
	Complete if the organization answere		Part IV line 11a	See Form 990) Part X line	10		
	Description of property	(a) Cost or ot	<u> </u>	t or other	(c) Accui		(d) Book v	valuo.
	Description of property	basis (investm		(other)	depred		(u) Book v	alue
19	Land	,	200	(/	300.00			
	Buildings		 					
	Leasehold improvements							
	Equipment		13	39,315.	13:	2,961.	6	,354.
	Other			•		.		
	I. Add lines 1a through 1e. (Column (d) must e		K. column (B). line	10c.)		—	6	,354.
	(2)	,	,	/				

Schedule D (Form 990) 2018

Schoolule D (Form 000) 2019 FOREICN POI.	ICY RESEARCH	TNSTTTTTE	23-1731998 _{Page}
Part VII Investments - Other Securities.	ICI KEDEMICII	INDITIOID	23 1731990 Page
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11b. See Form 990, Part X,	, line 12.
(a) Description of security or category (including name of security)	(b) Book value		n: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			4
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			· · · · · · · · · · · · · · · · · · ·
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11c. See Form 990, Part X,	line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation	n: 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	e 11d. See Form 990, Part X,	, line 15.
(a) l	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	9 15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line		Part X, line 25.
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(0)			

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)	7)	
(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) 2018

Pa	t XI Reconciliation of Revenue per Audited Financial Statem	nents With Reven	ue per Retur	'n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.		
1	Total revenue, gains, and other support per audited financial statements		1	2,036,261.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	2,036,261.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b			0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			2,036,261.
Pa	t XII Reconciliation of Expenses per Audited Financial Stater		nses per Ret	urn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12			1 0 450 054
1	Total expenses and losses per audited financial statements			2,479,874.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities			
b	Prior year adjustments			
С	Other losses			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	2,479,874.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)	4b		
		40		_
	Add lines 4a and 4b			0.
с 5	Add lines 4a and 4b			0. 2,479,874.

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

PART X, LINE 2:

THE INSTITUTE IS EXEMPT FROM FEDERAL INCOME TAXES UNDER INTERNAL REVENUE CODE SECTION 501(C)(3) AND APPLICABLE STATE LAW.

THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. IF THE INSTITUTE WERE TO INCUR ANY INCOME TAX LIABILITY IN THE FUTURE, INTEREST ON ANY INCOME TAX LIABILITY WOULD BE REPORTED AS INTEREST EXPENSE AND PENALTIES ON INCOME TAX WOULD BE REPORTED AS INCOME TAXES. THERE ARE NO UNRECOGNIZED TAX BENEFITS IDENTIFIED OR RECORDED AS LIABILITIES AS OF AND FOR THE YEARS ENDED DECEMBER 31, 2018 AND 2017.

Schedule D (Form 990) 2018

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.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

Internal Revenue Service

FOREIGN POLICY RESEARCH INSTITUTE

Employer identification number 23-1731998

a Check the appropriate box(es) if the organization provided any of the following to or for a person isted 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				Yes	No
First class or charter travel	1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,	4		
Travel for companions		Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	1		
Tax indemnification and gross-up payments Personal services (such as maid, chauffeur, chief) 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 1b 1c 1b 1d 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?		First-class or charter travel Housing allowance or residence for personal use	4		
Discretionary spending account		Travel for companions Payments for business use of personal residence		>	
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors; trustees, and officers, including the CEO/Executive Director, regarding the Items checked on line 1a? 2 3 Indicate which, if any, of the following the 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.		Tax indemnification and gross-up payments Health or social club dues or initiation fees			
reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		Discretionary spending account Personal services (such as maid, chauffeur, chef)			
reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		() *			
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? 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.	b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 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.		reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
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.	2				
CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. X Compensation committee Independent compensation consultant Compensation survey or study X Form 990 of other organizations X Approval by the board or 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: a Receive a severance payment or change-of-control payment? 4 Participate in, or receive payment from, a supplemental nonqualified extrement plan? 4 Participate in, or receive payment from, an equity-based compensation arrangement? 4 If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. 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: a The organization? 5 A X Any related organization? 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: a The organization? 5 A X The organization? 6 A X The organization? 7 A X Were any line 6 a or 6b, describe in Part III. 7 A X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X 9 If "Yes" on line 6, did the organization also follow the rebuttable presumption procedure described in		trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. X Compensation committee Independent compensation consultant Compensation survey or study X Form 990 of other organizations X Approval by the board or 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: a Receive a severance payment or change-of-control payment? 4 Participate in, or receive payment from, a supplemental nonqualified extrement plan? 4 Participate in, or receive payment from, an equity-based compensation arrangement? 4 If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. 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: a The organization? 5 A X Any related organization? 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: a The organization? 5 A X The organization? 6 A X The organization? 7 A X Were any line 6 a or 6b, describe in Part III. 7 A X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X 9 If "Yes" on line 6, did the organization also follow the rebuttable presumption procedure described in					
establish compensation of the CEO/Executive Director, but explain in Part III. X Compensation committee Written employment contract Independent compensation consultant Compensation survey or study X Form 990 of other organizations X Approval by the board or 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: a Receive a severance payment or change-of-control payment? 4a X b Participate in, or receive payment from, a supplemental nonqualified extrement plan? 4b X c 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. 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: a The organization? 5a X b Any related organization? 5a X b 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: a The organization? 6a X b Any related organization? 6a X b Any related organization? 6a X c For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	3				
X Compensation committee					
Independent compensation consultant Compensation survey or study X Form 990 of other organizations X Approval by the board or compensation committee					
X Form 990 of other organizations X Approval by the board or compensation committee 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization: a Receive a severance payment or change-of-control payment? 4 A X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? 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: a The organization? 5 A X Any related organization? 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: a The organization? 5 A X 5 A X 5 A Y Participate in, or receive payment from, an equity-based compensation and the organization pay or accrue any compensation contingent on the net earnings of: a The organization? 6 A X 5 A Y Participate in, or receive payment from, a supplemental in the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958 4(a)(3)" If "Yes," describe in Part III 8 X					
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization: a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? lf "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? b Any related organization? lf "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: a The organization? b Any related organization? lf "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958.4(a)(3)? If "Yes," describe in Part III. 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in					
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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: a The organization? b Any related organization? f "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? b Any related organization? f "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958.4(a)(3)? If "Yes," describe in Part III. 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	С		4c		X
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: a The organization? b Any related organization? f "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? b Any related organization? f "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 X If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in		If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? b Any related organization? f "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? b Any related organization? f "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 X If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in					
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a The organization? b Any related organization? 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: a The organization? b Any related organization? f "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	5				
b Any related organization? 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: a The organization? b Any related organization? If "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	_				v
If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? Any related organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. In It is a subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. In It is a subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. In It is a subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," described in Part III.	a				
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: a The organization? b Any related organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	D		ac		72
contingent on the net earnings of: a The organization? b Any related organization? f "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	_				
The organization? b Any related organization? If "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	0				
b Any related organization? If "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	_		62		x
If "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	a h				
For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	U		UD		
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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	8		<u> </u>		
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	•		8		Х
	9		Ť		_ _
Regulations section 53.4958-6(c)?	Ū	Regulations section 53.4958-6(c)?	9		

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Schedule J (Form 990) 2018

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-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) ALAN H. LUXENBERG (i	156,460.	20,000.	0.	8,892.	9,531.	194,883.	0.
PRESIDENT (iii		0.	0.	0.			0.
(i)							
(ii							
(6)							
(ii							
(6)							
(ii							
(i)							
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(i)							
(ii							

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

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

FOREIGN POLICY RESEARCH INSTITUTE

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

Employer identification number 23-1731998

Pai	t I Types of Property							
		(a)	(b)	(c)	(d)			
		Check if applicable	Number of contributions or	Noncash contribution amounts reported on	Method of de noncash contribu		_	to
		арріісаріе		Form 990, Part VIII, line	Ig	ution a	nount	.s
1	Art - Works of art				4			
2	Art - Historical treasures						\	
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	6	36,678	B.FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other		(
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (
26	Other (
27	Other (
28	Other (
29	Number of Forms 8283 received by the organi	zation during	g the tax year for c	contributions				
	for which the organization completed Form 82	83, Part IV, I	Donee Acknowled	gement 29			0	
							Yes	No
30a	During the year, did the organization receive b	y contributio	on any property rep	ported in Part I, lines 1 th	ough 28, that it			
	must hold for at least three years from the dat	e of the initia	al contribution, and	d which isn't required to b	e used for			
	exempt purposes for the entire holding period	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that re	equires the review	of any nonstandard cont	ributions?	31		Х
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell nonca	sh			
	contributions?					32a		Х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in o	olumn (c) fo	r a type of propert	y for which column (a) is	checked,			
	describe in Part II.							

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832142 10-18-18 Schedule M (Form 990) 2018

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990 or 990-EZ.

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

2018
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

FOREIGN POLICY RESEARCH INSTITUTE

Employer identification number 23-1731998

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

POLICY, AS WELL AS THE PUBLIC AT LARGE, THROUGH THE LENS OF HISTORY,

GEOGRAPHY, AND CULTURE.

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

WITH LEADING THINKERS ARE ALSO HELD AT THE HOMES OF PRIVATE INDIVIDUALS

IN PHILADELPHIA, NEW YORK CITY, AND MIAMI, DRAWING ACADEMICS AND

BUSINESS LEADERS TOGETHER FOR INTIMATE DISCUSSIONS ON PRESSING ISSUES

OF THE DAY.

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

PROGRAM OFFERS SPECIAL REPORTS ON RUSSIAN FOREIGN POLICY AND THE

RUSSIAN ECONOMY, PLUS THE BALTIC BULLETIN AND A SERIES ON THE BLACK

SEA.

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

EDUCATION ACTIVIES: THE BUTCHER HISTORY INSTITUTE, CO-CHAIRED BY

PULITZER PRIZE-WINNING HISTORIAN WALTER A. MCDOUGALL AND FPRI SENIOR

FELLOW DAVID EISENHOWER, AIMS TO CONTIBUTE TO THE MORE EFFECTIVE

TEACHING OF HISTORY AND TO THE PUBLIC DISCOURSE OVER AMERICA'S IDENTITY

AND ITS ROLE IN THE WORLD. RECURRING HISTORY INSTITUTES ADDRESS

AMERICAN MILITARY HISTORY AND TOPICS CONCERNING THE MIDDLE EAST, AND

EURASIA. THE INSTITUTES ARE PRESENTED BY DISTINGUISHED SCHOLARS FROM

FPRI AND ELSEWHERE. THE INSTITUTES ARE WEEKEND-LONG SEMINARS PRESENTED

TO HIGH-SCHOOL TEACHERS FROM AROUND THE COUNTRY, WHOSE LODGING AND

TRAVEL COSTS ARE SUBSIDIZED BY FPRI. FPRI HAS INITIATED WEEK-LONG STUDY

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization

Employer identification number

FOREIGN POLICY RESEARCH INSTITUTE 23-1731998 TRIPS FOCUSED ON ASIA, WITH A TOUR OF SECONDARY SCHOOL TEACHERS TO SOUTH KOREA IN 2015, AND JAPAN IN 2016 AND 2018. FPRI PROVIDES THE KNOWLEDGE AND SERVICES OF ITS FELLOWS AND SCHOLARS TO ORGANIZATIONS AND INDIVIDUALS NEEDING EXPERTISE IN VARIOUS ASPECTS OF FOREIGN POLICY AND INTERNATIONAL RELATIONS. BUILDING ON OUR TWENTY YEARS OF WORK WITH HIGH SCHOOL TEACHERS, FPRI'S CENTER FOR THE STUDY OF AMERICA AND THE WEST HAS BEGUN AN AMBITIOUS PROGRAM IN CIVIC EDUCATION FOR STUDENTS. THIS INITIATIVE INCLUDES BOTH PARTNERSHIPS WITH LOCAL SCHOOLS AND THE PRODUCTION OF MATERIALS AIMED AT SCHOOL AUDIENCES, TO ENRICH YOUNG PEOPLE'S UNDERSTANDING OF THE INSTITUTIONS AND IDEAS THAT SHAPE AMERICAN POLITICAL LIFE. THROUGH THE DEVELOPMENT OF MULTIMEDIA PRIMERS ON IMPORTANT AMERICAN AND WESTERN INSTITUTIONS, AS WELL AS A SERIES OF EDUCATIONAL SIMULATION PROGRAMS ON THE FOUNDING AND THE CORNERSTONES OF AMERICAN LIBERTY, THE CENTER IS MAKING A TIMELY CONTRIBUTION TO CIVIC EDUCATION AND GOOD CITIZENSHIP NOT ONLY IN PHILADELPHIA BUT NATIONALLY. INCLUDING GRANTS OF \$ 0. REVENUE \$ 8,163.

FORM 990, PART VI, SECTION A, LINE 1:

EXPENSES \$ 200,350.

THE BOARD OF TRUSTEES MAY DESIGNATE AND APPOINT AN EXECUTIVE COMMITTEE OF FIVE OR MORE TRUSTEES, WHICH MAY EXERCISE THE AUTHORITY OF THE BOARD OF TRUSTEES IN THE MANAGEMENT OF THE CORPORATION; PROVIDED THAT THE EXECUTIVE COMMITTEE SHALL NOT HAVE THE AUTHORITY OF THE BOARD OF TRUSTEES TO ELECT OR REMOVE TRUSTEES, TO ELECT OR REMOVE OFFICERS, TO ADOPT AN AGREEMENT OF MERGER OR CONSOLIDATION, OR TO AMEND THE CERTIFICATE OF INCORPORATION OR THE BY-LAWS OF THE CORPORATION.

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

THE FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM. A DRAFT OF THE

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FORM 990 IS PROVIDED TO TRUSTEES AND SENIOR MANAGEMENT FOR THEIR REVIEW AND COMMENTARY. THE VERSION OF THE FORM 990 PREPARED FOR ELECTRONIC FILING IS THEN PROVIDED TO THE SAME INDIVIDUALS FOR FINAL REVIEW BEFORE E-FILING.

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

CONFLICT OF INTEREST CERTIFICATIONS ARE REQUESTED FROM TRUSTEES AND OTHER OFFICERS AT THE BEGINNING OF EACH CALENDAR YEAR. MANAGEMENT PROVIDES COPIES OF: 1) THE CONFLICT OF INTEREST POLICY; 2) A LIST OF VENDORS, FINANCIAL INSTITUTIONS, EMPLOYEES, AND INDEPENDENT CONTRACTORS WITH WHICH THE ORGANIZATION DOES BUSINESS, AND 3) A CERTIFICATION FORM TO BE RETURNED, CERTIFYING THAT: 1) THE INDIVIDUAL HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY AND 2) SPECIFYING THE INDIVIDUAL'S CONFLICTS OF INTEREST, IF ANY, OR SPECIFYING THAT THE INDIVIDUAL HAS NO CONFLICTS. INTERIM CERTIFICATION REQUESTS ARE SUBMITTED TO INDIVIDUALS FOR ACTUAL OR POTENTIAL CONFLICTS THAT ARISE BETWEEN ANNUAL CERTIFICATIONS. POTENTIAL CONFLICTS THAT ARE DISCLOSED ARE DISCUSSED AND ACTED UPON BY THE FULL BOARD OF TRUSTEES. BOARD ACTIONS MAY INCLUDE: DETERMINATION THAT NO ACTUAL CONFLICT EXISTS AND THAT NO FURTHER ACTION IS REQUIRED BASED ON ANY REASONABLE GROUNDS, INCLUDING THE NOMINAL NATURE OF ANY INTEREST INVOLVED. IF AN ACTUAL CONFLICT IS DETERMINED TO EXIST, NEITHER FPRI NOR THE INTERESTED PERSON SHALL ENTER INTO OR CONTINUE THE TRANSACTION OR ARRANGEMENT PRESENTING THE CONFLICT UNLESS IT IS APPROVED BY THE BOARD. IN APPROVING A TRANSACTION OR RELATIONSHIP WHERE THERE IS A CONFLICT, THE BOARD SHALL CONSIDER WHETHER A MORE FAVORABLE ALTERNATIVE TRANSACTION OR ARRANGEMENT IS AVAILABLE WITH A PARTY THAT DOES NOT PRESENT A CONFLICT. IF A MORE ADVANTAGEOUS NON-CONFLICT TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER THE CIRCUMSTANCES, THE BOARD SHALL DETERMINE, BY A MAJORITY VOTE OF THE DISINTERESTED TRUSTEES, WHETHER TO APPROVE A CONFLICT BY

Schedule O (Form 990 or 990-EZ) (2018) Page 2 Name of the organization **Employer identification number** FOREIGN POLICY RESEARCH INSTITUTE 23-1731998 CONSIDERING WHETHER SUCH CONFLICT IS IN THE ORGANIZATION'S BEST INTEREST AND WHETHER IT IS FAIR AND REASONABLE. INDIVIDUALS WHO HAVE CONFLICTS ARE NOT PERMITTED TO PARTICIPATE IN THE DISCUSSIONS OR DECISIONS CONCERNING CONFLICTS OF INTEREST. FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION OF THE PRESIDENT IS REVIEWED AND RECOMMENDED TO THE BOARD OF TRUSTEES BY THE BOARD'S COMPENSATION COMMITTEE AS PART OF THE PROCESS OF APPROVING THE ANNUAL BUDGET. CRITERIA USED IN THE COMMITTEE'S DELIBERATIONS INCLUDE: COMPENSATION PAID BY SIMILAR ORGANIZATIONS IN TERMS OF FOCUS/SIZE. THE BOARD OF TRUSTEES REVIEWS THE COMMITTEE'S RECOMMENDATION AND EITHER APPROVES THE RECOMMENDATION OR APPROVES A REVISED AMOUNT OF COMPENSATION. COMPENSATION OF OTHER OFFICERS IS DETERMINED BY SENIOR MANAGEMENT, IN CONSULTATION WITH THE FINANCE COMMITTEE, WITH REFERENCE TO COMPENSATION LEVELS FOR SIMILAR POSITIONS IN SIMILAR ORGANIZATIONS. DELIBERATIONS AND FINAL DETERMINATION OF COMPENSATION FOR THE PRESIDENT AND OTHER OFFICERS ARE TIMELY DOCUMENTED. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE: 1) POSTED ON THE ORGANIZATION'S WEBSITE, AND 2) AVAILABLE TO THE PUBLIC UPON REQUEST.