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Form	990-T	Exempt Organization Business Income Tax Return q							rn q	ОМЕ	3 No 1545-0687				
- 10111									0 1 9	. 9 9M1 <b>Q</b>					
Depa	rtment of the Treasury	Go to www.irs.gov/Form990T for instructions and the latest information.									<i>C</i>	<u> </u>			
-	al Revenue Service	▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)										Public Inspection for ) Organizations Only			
Α _	Check box if address changed		Name of organization ( Check box if name changed and see instructions )  THE FEDERALIST SOCIETY FOR LAW AND  D Employer identification (Employees' trust, see in the control of the contro										fication number see instructions )		
B Ex	empt under section	1	PUBLIC POLICY STUDIES												
Х	501( C( 3 )	Print											36-3235550		
	408(e) 220(e)	Type	Type										E Unrelated business activity code (See instructions )		
	408A530(a)	1776 I STREET, NW 300													
	529(a) ok value of all assets	-	City or town, state or province, country, and ZIP or foreign postal code												
	end of year	WASHINGTON, DC 20006-3774									<del>-</del> -				
	F Group exemption number (See Instructions )										Other trust				
— Н Е	nter the number of		inization's unrelated trad				•	<u> </u>	1 30 1(0		escribi		y (or first)		
	ade or business he			200 Or 200mic				If or	ilv one.			_		e, describe the	
			end of the previous s	entence, co	mplete	Parts I	and	_		•					
	ade or business, th														
	_		corporation a subsidia	ry ın an affıl	ated g	oup or a	a par	rent-sub	sidiary	controlled	group?		▶	Yes X No	
			identifying number of		rporation	on 🕨									
			HE FEDERALIST					Т	elephor	e number	<b>▶</b> (2	02)82	2-8138		
Pa	rt Unrelated	Trade o	or Business Incon	ne	r		(A)	Income		(B)	Exper	ses	ļ	(C) Net	
1a	Gross receipts or	sales													
J				c Balance	<u> </u>										
2	-		ule A, line 7)		2								-		
= <sup>3</sup>			2 from line 1c		3						<u> </u>				
= 4a			ittach Schedule D)		4a										
_			Part II, line 17) (attach Fo		4b		_					1			
o c			rusts		4c			<del>- R</del> E	<del>CE</del>	VED					
5 0 0 0			r an S corporation (attach state		-		က			76744	73			•	
3 <sub>7</sub>			come (Schedule E)		7		33	M	<b>AR 3</b>	0 2020	TŸ	i	1		
8			ents from a controlled organization				Ö	1417	111 0		182			<del></del>	
9			1(c)(7), (9), or (17) organizati					~	<u> </u>	1 1 17	<del></del>				
10			ncome (Schedule I) .					<u>U</u>	<del>ODE</del>	v, U 1					
11	Advertising incon	ne (Sched	fule J)		11										
12			tions, attach schedule)		12										
13			ough 12						0.					,	
Pa			Taken Elsewhere	•							ns ) (l	Except	for conti	ributions,	
			be directly conne										т		
14			directors, and trustees										<del></del>		
15															
16	•												1		
17			(see instructions)										1		
18 19	•	,	(see instructions)									· ·	1		
20			See instructions for limit										<b>†</b>	· · ·	
21			4562)					1	1	<b></b>			1	_	
22			on Schedule A and els										1		
23	-											<del></del>	<del></del>		
24			compensation plans .									1			
25			·											<u>-</u>	
26	Excess exempt ex	φenses (S	Schedule I)									26			
27	Excess readership	p costs (S	chedule J)			<i>.</i>						27	1		
28		•	chedule)										<del> </del>	<del></del>	
29			s 14 through 28											·	
30			le income before ne												
31		-	g loss arising in tax ye										1		
32 For 1			e income Subtract line lotice, see instructions		30	<del></del>	<del></del>	· · · ·	•••	<u> .</u>	<u></u>	32		orm <b>990-T</b> (2018)	
8X27	40 1,000 29W05F T36	5Y		•			C	1		905771	2/JC	S	r	om 330-1 (2018)	

	990-T (2			Page 2
Pai	t III	Total Unrelated Business Taxable Income	, —,	
33		of unrelated business taxable income computed from all unrelated trades or businesses (see		
		ions),	<del></del>	·
34		ts paid for disallowed fringes	34	
35		ion for net operating loss arising in tax years beginning before January 1, 2018 (see		
		ions)	35	
36	Total o	of unrelated business taxable income before specific deduction. Subtract line 35 from the sum		
		33 and 34	36	
37	Specifi	deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	
38		ed business taxable income. Subtract line 37 from line 36 If line 37 is greater than line 36.		
		ne smaller of zero or line 36	38	0.
Par		Tax Computation	100 1	
39		eations Taxable as Corporations. Multiply line 38 by 21% (0 21)	39	
40		Taxable at Trust Rates. See instructions for tax computation, Income tax on		
70		ount on line 38 from Tax rate schedule or Schedule D (Form 1041)	40	
44		ax. See instructions		
41		tive minimum tax (trusts only)		
42 43		Noncompliant Facility Income. See instructions		
44		Add lines 41, 42, and 43 to line 39 or 40, whichever applies		
Par		Tax and Payments	44	
			T	
	_	tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a		
		redits (see instructions)	- 1	
		I business credit Attach Form 3800 (see instructions)		
		or prior year minimum tax (attach Form 8801 or 8827)	****	
		redits. Add lines 45a through 45d	45e	<u></u>
46		t line 45e from line 44	46	
47		xes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule).		
48		x. Add lines 46 and 47 (see instructions)	48	0.
49		et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	
	-	nts A 2017 overpayment credited to 2018	·~·	
		stimated tax payments	` •	
		osited with Form 8868	-	
		organizations Tax paid or withheld at source (see instructions)		
е		withholding (see instructions)	) pr.	
f		or small employer health insurance premiums (attach Form 8941)	35	
g	Other c	edits, adjustments, and payments Form 2439		
	F	orm 4136 Other Total ▶ 50g		
51		ayments. Add lines 50a through 50g	51	2,112.
52		ed tax penalty (see instructions) Check if Form 2220 is attached	52	
53		e. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	
54	Очегра	yment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	2,112.
55		a amount of line 54 you want Credited to 2019 estimated tax	55	2,112.
Par	t VI	Statements Regarding Certain Activities and Other Information (see instruction		<del></del>
56	•	time during the 2018 calendar year, did the organization have an interest in or a signature or		· <del></del>
		financial account (bank, securities, or other) in a foreign country? If "Yes," the organization ma		, , , , , , , , , , , , , , , , , , ,
	FinCEN	Form 114, Report of Foreign Bank and Financial Accounts, if "Yes," enter the name of the	foreign	7867 ASSAGE A CASEC MACE
	here <b>&gt;</b>			X
57	During	the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a forei	gn trust?.	<u>X</u>
	If "Yes,"	see instructions for other forms the organization may have to file		(1) 1 (1)
58		e amount of tax-exempt interest received or accrued during the tax year 🕨 \$		
_	l to	nder penalties of penury. I declare that I have examined this return, including accompanying schedules and statements, and to the bite, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	est of my	knowledge and belief, it is
Sign	١ 👠	M	y the IR	S discuss this return
Her		- light 13. Meyer 3/01/10 / RESCUENT with	h the pr	eparer shown below
	s		nstructions :	المستخصصات والمستحدث
Deta		Print/Type preparer's name Preparer's signature Date Check	ا، لـــا ،	PTIN
Paid			mployed	P00234075
•	arer Only			22-2027092
	y	Firm's address ▶ 4600 EAST WEST HWY 900, BETHESDA, MD 20814-3423 Phone	no 301	-272-6000
ICA				Form <b>990-T</b> (2018)

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## THE FEDERALIST SOCIETY FOR LAW AND

Form 990-1 (2018)						,				,	Page 3		
Schedule A - Cost of Go	oods Sold. Er	iter method	d of inven	tory v	aluation	<u> </u>	<u>.</u>						
1 Inventory at beginning of y	rear . 1			6	Inventory	at end of yea	ar	6					
2 Purchases	2					goods so							
3 Cost of labor				1	6 from	line 5 Er	nter here and in						
4a Additional section 263A co	osts			1	Part I, line	2		7					
(attach schedule)	4a						section 263A (v		espect to	Yes	No		
b Other costs (attach schedu				1		roperty produced or acquired for resale) apply							
5 Total. Add lines 1 through		-		to the organization?									
Schedule C - Rent Income		roperty a	nd Perso	nal F	roperty	Leased V	Vith Real Prope	rtv)					
(see instructions)	(, , , , , , , , , , , , , , , , , , ,							-,,					
Description of property		<del></del>											
(1)													
(2)													
(3)													
(4)		<del></del>					<del>-</del>						
(1)	2. Rent recei	ved or accru	ed										
(-) Farm against a second (files	-				201 200 200	/f the	3(a) Dadwatiana d	rooth, o		the mee			
(a) From personal property (if the for personal property is more th			rom real and age of rent f					directly connected with the income 2(a) and 2(b) (attach schedule)					
more than 50%)				is based on profit or income)			, , , , , , , , , , , , , , , , , , , ,						
(1)		_				<del></del>							
(1)													
(2)													
(3)													
(4) T-A-1		Takal											
Total	-1 0(-) 10(	Total					(b) Total deduction						
(c) Total income. Add totals of c							Enter here and or Part I, line 6, colur						
here and on page 1, Part I, line 6 Schedule E - Unrelated D			o instruct	tions\			Fart I, line o, colui	Ш (В)			——		
Schedule E - Officiated D	ept-Financeu i	ilcome (se				3 [	Deductions directly cor	nected	with or allocab	le to			
1 Description of del	ot-financed property			s income from or to debt-financed				ced property					
1 Description of del	or-imaneed property			property			ht line depreciation ich schedule)	(b) Other deductions (attach schedule)					
<b></b>			l			(aita	icii scriedule)		(attaci scree	iuie)			
(1)													
(2)	_												
(3)	-												
(4)	F A	-1											
4 Amount of average acquisition debt on or	5 Average adju of or alloca			Colum		7 Gross	income reportable	8 Allocable deductions					
allocable to debt-financed	allocable to debt-financed debt-financed property			divide columi			n 2 x column 6)	(colu	mn 6 x total c: 3(a) and 3(l		ns		
property (attach schedule)	(attach sche	edule)	.,	Oolalliii									
(1)					%								
(2)					%								
(3)			<del> </del>		<u>%</u>								
(4)			L		%								
							re and on page 1, ne 7, column (A)		r here and o				
						1 4111, 111	13 7, 301411111 (71)		, ,	۵. ۱۱۱۱ ( ۱	''		
Totals													
Total dividends-received deduct	ions included in co	olumn 8					<b>▶</b>						

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Schedule F-Interest, Annu	inioo, itoyanio	, , , , , , , , , , , , , , , , , , ,		ntrolled Org					0110)	<del></del>	
Name of controlled     organization	zation identification number 3 Net unrelated income 4		•	al of specified included		of column 4 that is d in the controlling tion's gross income		6 Deductions directly connected with income in column 5			
(1)											
(2)											
(3)	<del></del> -										
(4)				<u>-</u>						<u> </u>	
Nonexempt Controlled Organiz	zations	<del> </del>				40	3. d. d d	0.45-4	1 4		
7 Taxable Income	8 Net unrelated in (loss) (see instruc			Total of specific ayments made		ıncl	Part of column uded in the co nization's gros	ntrolling		11 Deductions directly connected with income in column 10	
(1)											
(2)		_							ļ		
(3)		_							-		
(4)							d columns 5 a		<u> </u>	id columns 6 and 11	
Totals	come of a Sec		(c)(7),	(9), or (17		Pai		mn (A)		er here and on page 1, rt I, line 8, column (B)	
1 Description of income	2 Amount of	rincome		directly cor	Deductions 4 Set-asides ctly connected (attach schedule) (attach schedule)					and set-asides (col 3 plus col 4)	
(1)											
(2)			+			-			-		
(3)			+			+					
Totals ▶ Schedule I – Exploited Exe	Enter here and Part I, line 9, co	olumn (A)	her Th	an Adverti	sing Ir	ocome	/see instri	ictions)		Enter here and on page 1 Part I, line 9, column (B)	
Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expe direc connecte producti unrela business	nses tly ed with ion of ited	4 Net incon from unrelat or business 2 minus col If a gain, co cols 5 thro	come (loss) elated trade ess (column oclumn 3) i, compute the street of the column activity that is not unrelated occlumn column.		able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)			
(1)											
(2)			-								
(3)											
(4)								1			
	Enter here and on page 1, Part I, Ine 10, col (A)	Enter here page 1, I line 10, c	⊃art I,							Enter here and on page 1, Part II, line 26	
Totals			Consoli	idated Bas	is						
1 Name of periodical	2 Gross advertising income	3 Dir advertisini	ect	4. Advertising gain or (loss) (col 5 Ci		5 Circulation 6 Reade cost		•	7 Excess readership costs (column 6 minus column 5, but not more than column 4)		
(1)											
(2)				]						_]	
(3)				]						_	
(4)		. ==-									
Totals (carry to Part II, line (5))							_				
										Form <b>990-T</b> (2018	

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Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis )

1. Namè of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)_					_	
(2)						
(3)						
(4)						
Totals from Part I ▶			1	- ,	-	
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)	,	· · ·		Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5) ▶				<u> </u>	_	

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	Compensation attributable to     unrelated business
(1)		%	
(2)	-	%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			

Form 990-T (2018)

## THE FEDERALIST SOCIETY FOR LAW AND PUBLIC POLICY STUDIES

36-3235550

## FORM 990-T (2018), PART III, LINE 34

DUE TO THE RETROACTIVE REPEAL OF IRC SECTION 512(A)(7), THIS RETURN IS BEING FILED SOLELY TO REPORT AND RECEIVE A REFUND OF THE TAXES PAID TO THE TAXPAYERS ACCOUNT ON RECORD FOR THE 2018 FORM 990-T.