DLN: 93493225011010 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Internal Revenue Service For the 2019 calendar year, or tax year beginning 10-01-2018 , and ending 09-30-2019 C Name of organization D Employer identification number B Check if applicable Research Triangle Institute ☐ Address change 56-0686338 ☐ Name change Doing business as ☐ Initial return RTI International ☐ Final return/terminated Number and street (or P O $\,$ box if mail is not delivered to street address) PO BOX 12194 E Telephone number ☐ Amended return ☐ Application pending (919) 541-6000 City or town, state or province, country, and ZIP or foreign postal code Research Triangle Park, NC $\,$ 277092194 $\,$ G Gross receipts \$ 1,026,219,607 Name and address of principal officer H(a) Is this a group return for E Wayne Holden □Yes **☑**No subordinates? PO BOX 12194 H(b) Are all subordinates Research Triangle Park, NC 277092194 ☐ Yes ☐No included? Tax-exempt status **✓** 501(c)(3) ☐ 527 ☐ 501(c)() **(**(insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ▶ www.rti.ora L Year of formation 1958 M State of legal domicile NC K Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities Research Triangle Institute is one of the world's leading research institutes, dedicated(see Sch O) to improving the human condition by turning knowledge into practice. Our staff of more than 5,800 provides research and technical expertise to governments and businesses in more than 75 countries in the areas of health and pharmaceuticals, education and training, surveys and statistics, advanced technology, international development, economic and social policy, energy and the environment and laboratory and chemistry services Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 3 4 8 Number of independent voting members of the governing body (Part VI, line 1b) 5 4,146 Total number of individuals employed in calendar year 2018 (Part V, line 2a) Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 7a 8,614,781 b Net unrelated business taxable income from Form 990-T, line 34 7b 829,782 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . Ravenue 957,734,627 962,871,402 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 17,709,214 2,865,057 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -9,561,307 1,715,034 965,882,534 967,451,493 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 574,895 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 519.917 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 501,207,077 508,549,845 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 465,378,778 451,437,059 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 967,105,772 960,561,799 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) **19** Revenue less expenses Subtract line 18 from line 12 . -1,223,238 6,889,694 Net Assets or Fund Balances End of Year Beginning of Current Year ___ 682,393,309 707,333,261 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 292,491,524 273,090,585 Net assets or fund balances Subtract line 21 from line 20 . 414,841,737 409,302,724 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-08-12 Signature of officer Sign Here Michael H Kaelin Jr CFO Chief Financial Officer Type or print name and title Print/Type preparer's name Preparer's signature Check 🔲 ıf P00369623 **Paid** self-employed ▶ PRICEWATERHOUSECOOPERS LLP Firm's EIN > 13-4008324 Firm's name Preparer **Use Only** Firm's address ▶ 600 13TH ST NW STE 1000 Phone no (202) 414-1000 WASHINGTON, DC 20005 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018) Cat No 11282Y

Form	990 (2018)					Page 2
Pa	Statement of F	Program Servi	ce Accomplis	hments		
	Check If Schedule	O contains a resp	onse or note to	any line in this Part III		🗹
1	Briefly describe the organ	ization's mission				
pract busir	cice Our staff of more than nesses in more than 75 cou	5,800 provides r	esearch and tech s of health and p	nical (continued on Sch harmaceuticals, educat	improving the human condition ledule O, Part III, Line 1) expert ion and training, surveys and sta conment and laboratory and chem	ise to governments and atistics, advanced
2	Did the organization unde	, -		· ·	hich were not listed on	 □Yes ☑No
	the prior Form 990 or 990					⊔ Yes ⊻ No
3	If "Yes," describe these no Did the organization ceas			changes in how it condi	icto any program	
3	services?				acts, any program	☐ Yes ☑ No
4		1(c)(4) organizat	ions are required	to report the amount of	largest program services, as me of grants and allocations to other	
4a	(Code See Additional Data) (Expenses \$	610,015,096	including grants of \$	557,138) (Revenue \$	687,029,004)
4b	(Code See Additional Data) (Expenses \$	233,073,665	including grants of \$	17,757) (Revenue \$	276,007,980)
4c	(Code) (Expenses \$		ıncludıng grants of \$) (Revenue \$)
4d	Other program services (Describe in Sched	dule O)			
	(Expenses \$		cluding grants of	\$) (Revenue \$)
4e	Total program service	expenses >	843,088,7	61		

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Yes 1 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . 2 Nο No Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 3 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? 4 Yes Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 5 No 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? Nο 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, No 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? No R Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation No 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 No If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? Yes 11a Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Yes 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏 c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its Nο 11c total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 👺 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 No 11d ın Part X, line 16? If "Yes," complete Schedule D, Part IX 🕏 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏 11e Yes Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f Yes the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🕏 12a Did the organization obtain separate, independent audited financial statements for the tax year? 12a No b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Yes If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Nο 14a Did the organization maintain an office, employees, or agents outside of the United States? . . . 14a Yes 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 14b Yes valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Nο 15 foreign organization? If "Yes," complete Schedule F, Parts II and IV 🖠 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to No 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, Nο 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 No Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 No **20a** Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . 20a Nο b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic Yes 21 government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 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

Nο

rm '	990 (2018)			Page 4
Par	Checklist of Required Schedules (continued)			
:3	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current		Yes Yes	No
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	165	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
7	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
3	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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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		No
•	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
)	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
L	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
3	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		No
1	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
Ь	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
5	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
В	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	Yes	
Par				
	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 .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

 ${f c}$ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

1,168

1a

1b

Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during 8

9a Did the sponsoring organization make any taxable distributions under section 4966? . . . 9a **b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . 9h Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 . . . 10a 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

a Gross income from members or shareholders . 11a **b** Gross income from other sources (Do not net amounts due or paid to other sources 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 Section 501(c)(29) qualified nonprofit health insurance issuers.

a Is the organization licensed to issue qualified health plans in more than one state?

Note. See the instructions for additional information the organization must report on Schedule O 13a

Enter the amount of reserves the organization is required to maintain by the states in 13b which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

13c

14a

14b

15

No

No

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_
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_
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Yes No 10a No 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10h and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the 11a **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 Yes b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to 12b Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in 12c Yes 13 13 Yes 14 Did the organization have a written document retention and destruction policy? . 14 Yes 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? 15a Yes 15b 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 16a No 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 16b Section C. Disclosure List the States with which a copy of this Form 990 is required to be filed▶ Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website 🗹 Upon request 🗆 Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year 20

State the name, address, and telephone number of the person who possesses the organization's books and records ►Michael H Kaelin Jr Chief Financial Officer PO BOX 12194 Research Triangle Park, NC 277092194 (919) 541-6000 Part VII

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

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

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
 - f 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

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest

compensated employees, and former such persons

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

(A)

(B)

(C)

(D)

(E)

(F)

(F)

Average

hours per

than one box, unless person

week (list

is both an officer and a

from the

compensation

from related

compensation

from related

Name and Title	hours per week (list any hours for related	(ne bo oth a direct	amount of other compensation from the organization and						
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(Ŵ- 2/1099- MISC)	related organizations
See Additional Data Table										
										Form 990 (2018)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Page 8

(D)	(E)	(F	.,						
Reportable compensation from the organization (W-	Reportable compensation from related organizations (W	Estim amount o compen /- from	iated of other nsation the						
2/1099-MISC)	2/1099-MISC)	organizat relat organiz	ted						
		+							
	<u> </u>	+							
	 	-							
		+							
		+							
		+							
		+							
		+							
		L .							
9,485,315	3,229,469	,	1,307,565						
d Total (add lines 1b and 1c)									
		Yes	No						
hest compensated	employee on	3 Yes							
compensation from nedule J for such	1 the	4 Yes							
	ıvıdual for		 						
	· · · [5	No						
		pensation							
in the organization	n's tax year (B)	· 	<u>C)</u>						
	cription of services	Compe	nsation 1,605,983						
	~		.,						
Contract Lat	bor	20	0,442,741						
Construction	1 Labor	12	2,883,230						
Health Mana	agement	11	1,685,476						
Health Mana	agement	10	0,141,250						
) . f							
h core	compensation from the organization (W-2/1099-MISC) 9,485,315 yed more than \$1 nest compensated ompensation from edule J for such reganization or indi organization or indi contract Lat Contract Lat Contract Lat Construction Health Mana	compensation from the organization (W-2/1099-MISC) 9,485,315 9,485,315 3,229,469 Wed more than \$100,000 Description of services Contract Labor Construction Labor Health Management Compensation from the eldite J for such Contract Labor Contract Labor Construction Labor	compensation from the edule J for such eadule J for such eadule J for such enth organization or individual for the organization or individual for the organization or in the organization or individual for the organization of services are compensation or in the organization of services are contract Labor are contract.						

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

compensation from the organization ► 328

Part	VIII Statement of	Revenue							rage 3
	Check if Schedul	le O contains a r	esponse or	note to any l	ine in this Part VIII				<u> 🗆 </u>
					(A) Total revenue	Rel e> fu	(B) ated or empt nction	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a Federated campaig	ns	La			re	venue		512 - 514
nts ints	b Membership dues	_	Lb						
ira 10u	c Fundraising events		Lc						
s, (An	d Related organizatio	_	ld						
Sift lar	e Government grants (co		le						
im.	f All other contributions	· <u>L</u>	Le						
Contributions, Gifts, Grants and Other Similar Amounts	and similar amounts n	and the second could be all	1f						
the state	g Noncash contribution	ons included							
ĘĠ.	in lines 1a - 1f \$		_						
Cont	h Total. Add lines 1a	-1f		. •					
1				Business	Code				
Program Service Revenue	2a Research				541700 686,	910,878	678,436	5,812 8,474	,066
<u>چ</u>	b International Developme	ent		+		960,524	275,960),524	
Se F					311300				
er x	C -								
S	u								
gra	f All other program se	rvice revenue							
<u>&</u>	gTotal. Add lines 2a-2	2f	•	962,87	71,402				
	3 Investment income (i		ds. interest	and other					T
	sımılar amounts) .		•	•	4,188,73	37			4,188,737
	4 Income from investme								
	5 Royalties	(ı) Real		Personal					
	6a Gross rents	(I) Real	(11)	Personal					
	b Less rental expenses								
	c Rental income or								
	(loss)				ļ				
	d Net rental income o			ı) Other					
	7a Gross amount	(ı) Securities	(1	i) Other					
	from sales of assets other	50,350	,455	7,093,979					
	than inventory								
	b Less cost or other basis and	50,350	455	8,417,659					
	sales expenses	30,330							
	c Gain or (loss)d Net gain or (loss)		0	-1,323,680	-1,323,68	20			-1,323,680
	8a Gross income from f			<u> </u>	-1,323,00	,0			-1,323,000
<u>a</u>	(not including \$	of	.5						
듄	contributions reporte See Part IV, line 18		a						
e Se	b Less direct expense		ь						
er F	c Net income or (loss)		g events .	· •	I				
Other Revenue	9a Gross income from g See Part IV, line 19	jaming activities							
Ŭ	See Part IV, line 19		a						
	b Less direct expense	s	ь						
	c Net income or (loss)		tivities .	· •	ı				
	10a Gross sales of invent returns and allowand	tory, less							
	returns and anoward	.es	a						
	b Less cost of goods s	sold	ь						
	c Net income or (loss)		ventory .	. •					
	Miscellaneous		Busi	ness Code					
	11aAdoption of 606 Rev	venue		900099	1,549,45	52	0		1,549,452
	b Foreign Currency Ga	ain(Loss)		900099	165,58	32	165,582		0
	с								
	<u></u>								
	d All other revenue .								
	e Total. Add lines 11a	-11d		. •	1,715,03	34			
	12 Total revenue. See	Instructions .		•	967,451,49		954,562,918	8,474,06	4,414,509
					707,431,43	-1	22 1,202,310	0,4/4,00	Form 990 (2018)

Part IX Statement of Functional Expenses ection 501(c)(3) and 501(c)(4) organizations must complete all col	umns All other orga	inizations must comp	lete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX .			🗹
Do not include amounts reported on lines 6b, b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpense:
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	557,138	557,138		
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, line 15 and 16	17,757	17,757		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	10,337,544		10,337,544	
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	339,360,801	289,186,721	50,174,080	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	23,789,771	18,054,651	5,735,120	
9 Other employee benefits	111,380,269	84,529,268	26,851,001	
LO Payroll taxes	23,681,460	17,972,451	5,709,009	
L1 Fees for services (non-employees)				
a Management				
b Legal	1,779,336	140,473	1,638,863	
c Accounting	368,071	27,390	340,681	
d Lobbying	507,228		507,228	
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	299,588,076	294,403,766	5,184,310	
2 Advertising and promotion				
3 Office expenses	14,800,663	11,604,842	3,195,821	
4 Information technology	25,871,772	23,692,365	2,179,407	
.5 Royalties	1,126,831	727,031	399,800	
. 6 Occupancy	19,591,632	39,585,756	-19,994,124	
. 7 Travel	29,530,575	27,397,880	2,132,695	
.8 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
.9 Conferences, conventions, and meetings	27,091,400	25,955,877	1,135,523	
20 Interest	3,584,038		3,584,038	
1 Payments to affiliates				
2 Depreciation, depletion, and amortization	17,556,322	2,720,216	14,836,106	
23 Insurance	1,988,686	896,410	1,092,276	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a Miscellaneous	5,648,958	4,704,035	944,923	
b Memberships	1,055,174	428,064	627,110	
c Business Meals	761,722	486,417	275,305	
d Taxes	586,575	253	586,322	
e All other expenses				
Total functional expenses. Add lines 1 through 24e	960,561,799	843,088,761	117,473,038	
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 In it following SOP 98-2 (ASC 958-720)				

Inventories for sale or use .

Less accumulated depreciation

11

12

13

14

15

16

17

18

19

20

21

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Liabilities 22

Fund Balances

Assets or 30

Net

Prepaid expenses and deferred charges

10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

Total assets.Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here > 🗹 and

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Investments-program-related See Part IV, line 11

basis Complete Part VI of Schedule D

Intangible assets

Other assets See Part IV, line 11 .

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances .

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Total liabilities. Add lines 17 through 25 .

364,663,005

184,781,256

Page **11**

18.926.764

179,881,749

155,961,612

69.452.272

42.590.559

682.393.309

142.644.920

40.471.325

61,815,841

3.000.000

25.158.499

273.090.585

406.998.660

673,550

1.630.515

409,302,724

682,393,309

Form **990** (2018)

6

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10c

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22 23

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29

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31

32

33

34

20.437.054

184,223,989

175,594,576

67.187.616

6.313.541

32,168,793

707.333.261

155,366,611

46.425.610

67,575,003

3.000.000

20.124.300

292.491.524

412.531.611

603,277

1.706.850

414.841.737

707,333,261

End of year Beginning of year 1 Cash-non-interest-bearing .

2 Savings and temporary cash investments . . . 19,958,138 2 15,378,289 3 3 Pledges and grants receivable, net . . . 201,449,554 4 200,202,064 Accounts receivable, net . Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete 5

Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets

10a

10b

Notes and loans receivable, net .

3a

3b

Yes

Yes (2018)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

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

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

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

Environmental Research Services, and Laboratory & Chemistry Services, See Schedule O for expanded description of these program services

Name: Research Triangle Institute

EIN: 56-0686338

Form 990 (2018)

Form 990, Part III, Line 4a:

RESEARCH Multidisciplinary research & development and the application of science & technology in the areas of Health Research, Drug Discovery & Development, Education & Training Research, Survey Research Services. Statistics Research, Economic & Social Research, Advanced Technology Research & Development, Energy Research.

Form 990, Part III, Line 4b: INTERNATIONAL DEVELOPMENT See Schedule O for description of program services, Part III Line 4b

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other person is both an officer from the week (list from related compensation and a director/trustee) any hours organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

R Ingram

Board Member

Board Member

Board Member

Board Member

Board Member

J Moellering

T Magnuson

P Scott III

......

Chairman

P Lange

H Pinnix-Ragland

· '	any nours	i	. a uii	ecto	7// (1)	rustee)	, ,	Organization	organizations	organization and	
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
W Mitchell Board Member	2 00	×						41,500	0	0	
A Rebar Separated 123118 Board Member	2 00	x						41,500	390,125	0	
T Darden	2 00	1 1						41,500	0	0	

A Rebar Separated 123118	2 00	_				
Board Member	40 00	^			41,500	390,125
T Darden	2 00					
Board Member		X			41,500	0
H Martin	2 00					
Board Member	40 00	×			36,000	394,000

2 00

2 00

2 00

1 00

40 50 2 00

2 00

40 00

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41,500

66,250

100,500

47,000

58,000

36,000

0

0

21,103

0

0

0

143,476

634,688

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours								organizations	from the
	for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
L Carın Board Member	2 00	×						41,500	415,274	46,548
W Moore Jr Board Member	2 00	х						90,000	0	0
E Holden President	40 00	х		х				1,303,890	0	173,015
C Shaffer	2 00	х						12,500	0	0

454,555

280,000

0

0

306,476

558,702

337,869

714,615

0

53,465

99,437

37,854

133,603

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40 00 2 00

40 00 40 00

40 00

40 00

40 00

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Board Member	
E Holden	40 00
President	
C Shaffer	2 00
Board Member	
W Arden New 31919	2 00

.....

Board Member

Board Member

C Buchholtz

G Story

Secretary

Treasurer

Vice President

E Sax

C Carter New 112018

Assistant Secretary

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours	and	a dır	ecto	r/tr	ustee)	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
L May	40 00			×				512,706	0	90,653	
Vice President								·			
T Gabel Vice President	40 00			х				568,968	0	109,104	
A Mangel Vice President	40 00			x				586,334	0	114,357	
0.0	40.00										

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271,044

558,731

591,479

14,536

405,687

398,968

400,106

0

0

30,027

81,194

105,266

6,790

47,208

34,449

26,410

......

...............

......

................

40 00

40 00

40 00

40 00

40 00

40 00

C Cornwell	
Vice President	
P Weisenfeld	
Vice President	

M Kaelın Jr

Vice President

Divisional Director

Divisional Director

Divisional Director

L Gilliland

S Earnshaw

T Pierson

Vice President & CFO

T Piccione New 121718

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation and a director/trustee) from the

organization

20,750

55,875

402,648

Х

Х

organizations

383,083

134,268

18,911

5,730

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Divisional Director

Former Board Member

Former Board Member

Former Vice President

J Gonzales

P Wvnn Jr

T Lomax

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	 Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations
C Simmons Divisional Director	40 00				X		387,481	0	43,367
R Zerbonia	40 00				X		434,700	0	29,074

2 00

40 00 0 00

0 00 40.00

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any hours

etii	e GK/	APHIC Pri	t - DO NOT PRO	CESS	As Filed Data -				493225011010		
SCHEDULE A (Form 990 or co 990EZ)			Pu Complete	ort a section	2018						
		f the Treasury	•	Go to 1	www.irs.gov/Form9	90 for the lates	t information.		Open to Public Inspection		
lam	e of th	nie Service he organiza	tion					Employer identifica			
esea	rch Iria	angle Institute						56-0686338			
	rt I				s (All organizations			ee instructions.			
he c	rganız		•		it is (For lines 1 throu	•					
1		A church, c	onvention of church	es, or ass	ociation of churches d	escribed in sect i	on 170(b)(1)(A)(i).			
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ))									
3		A hospital o	or a cooperative hos	oital serv	ice organization descri	bed in section 1	.70(b)(1)(A)(i	ii).			
4		A medical r name, city,		operate	d in conjunction with a	hospital describ	ed in section 1	70(b)(1)(A)(iii). En	ter the hospital's		
5		-	•		of a college or univers	sity owned or ope	erated by a gove	ernmental unit describ	ed in section 170		
6			(iv). (Complete Part tate, or local govern		governmental unit des	cribed in sectio i	170(b)(1)(A)(v).			
7		An organiza	•	eceives a	substantial part of its				l public described in		
8	П				170(b)(1)(A)(vi) (Complete Part II)				
9					scribed in 170(b)(1)(e instructions Enter th				ge or university or a		
0		from activit investment 30, 1975	les related to its exe income and unrelat see section 509(a)	empt functions from the second	(1) more than 331/3% trions—subject to certain test taxable income (lest inplete Part III) exclusively to test for	ain exceptions, a ss section 511 ta	nd (2) no more x) from busines:	than 331/3% of its su ses acquired by the or	oport from gross		
		-	-		,		·		•		
2	✓	more public	ly supported organi	zations de	exclusively for the ber escribed in section 50 the type of supporting:	9(a)(1) or sec	tion 509(a)(2)	. See section 509(a)			
a	✓	organizatio		gularly ap	ted, supervised, or coi opoint or elect a major						
b		manageme		organiza	rvised or controlled in tion vested in the sam nd C.						
С		Type III f	inctionally integra	i ted. A si	upporting organization ons) You must comp				ed with, its		
d		functionally	integrated The org	anization	 A supporting organiz generally must satisfy IV, Sections A and 	/ a distribution re					
е					ed a written determina		S that it is a Typ	oe I, Type II, Type III	functionally		
f	Enter		of supported organi	,	ntegrated supporting o	organization		2			
g					oported organization(s)		<u></u>			
		lame of supp organization	orted (ii)	EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the orgain your govern		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
						Yes	No				
4) D	Ouke University 560532129 2 Yes						0				
B) he l		ty of North Car		01393	2	Yes		0			
ota	l		2					0			
		l. Dad	tion Act Notice, se			Cat No 11285		chedule A (Form 99			

instructions

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170	

oport Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170
(1)(A)(ix)
mplete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part
If the organization fails to qualify under the tests listed below, please complete Part III.)

	III. If the organization fai						iy under Part
_	Section A. Public Support	iis to quality ut	ider the tests his	ted below, pied.	se complete rai	C 111.)	
	Calendar year		I	T	T		
	(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 grant ")						
2	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
5	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from						
	line 4						
S	Section B. Total Support						
	Calendar year	(a)2014	(b) 2015	(c)2016	(d)2017	(e)2018	(f)Total
	(or fiscal year beginning in) ▶	(-,	(=,====	(3,2323	(-)	(0)2020	(1).010.
7							
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
_	income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the business is regularly carried on						
10							
10	loss from the sale of capital assets						
	(Explain in Part VI)						
11	Total support. Add lines 7 through						
	10						
12	Gross receipts from related activities, e	tc (see instruction	ons)			12	
13	First five years. If the Form 990 is for	the organization	s first, second, th	urd, fourth, or fifth	n tax vear as a sec	tion 501(c)(3) org	anization.
	check this box and stop here	=				· · · · · · <u>-</u>	_
_	section C. Computation of Public						_
	Public support percentage for 2018 (line			column (f))			
				column (1))		14	
	Public support percentage for 2017 Sch					15	
16 a	33 1/3% support test—2018. If the				ne 14 is 33 1/3% o	r more, check this	box
	and stop here. The organization qualif						··►□
Ŀ	33 1/3% support test—2017. If the	organization did	not check a box o	on line 13 or 16a,	and line 15 is 33 i	1/3% or more, chec	k this
	box and stop here. The organization	qualifies as a pub	olicly supported or	ganızatıon			▶□
17 a	10%-facts-and-circumstances test-	–2018. If the or	ganization did not	check a box on lir	ne 13, 16a, or 16b	, and line 14	
	is 10% or more, and if the organization						
	in Part VI how the organization meets t	he "facts-and-cir	cumstances" test	The organization	qualifies as a publ	icly supported	
	organization						▶ □
Į.	10%-facts-and-circumstances test	-2017. If the o	rganization did no	ticheck a box on l	ine 13, 16a, 16h	or 17a, and line	
0	15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization						
	supported organization			5-	4	,	▶□
10	Private foundation. If the organization	n did not check :	hov on line 12 1	6a 16h 17a or 1	7h check this has	and see	F L
TΩ	Trivate roundation, if the organization	ii ala not check e	4 POV OIL HIE TO, T	ou, 100, 1/a, 01 1	. , D, CHECK HIIS DU)	, unu see	

Р	Support Schedule for						
	(Complete only if you c						ler Part II. If
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	pelow, please co	omplete Part II.)	
30	Calendar year		43.554.5		413.004-		(0) =
	(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")						
2	Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
_	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
36	ection B. Total Support Calendar year			I	1		1
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
b	income from similar sources Unrelated business taxable income						
D	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12							
	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is fo	r the organization	ı 's fırst, second, tl	nird, fourth, or fift	:h tax vear as a se	ction 501(c)(3) c	rganization.
	check this box and stop here	3	, ,	, ,	,	(), ()	• □
Se	ection C. Computation of Public	Support Perce	ntage				<u> </u>
15	Public support percentage for 2018 (lin			column (f))		15	
16	Public support percentage from 2017 S					16	
	ection D. Computation of Investi					1 1	
<u> </u>	Investment income percentage for 201			line 13, column (f	·))	17	
18	Investment income percentage from 2	•		,	• •	18	
	331/3% support tests—2018. If the		·	on line 14 and lin	ne 15 is more than		ne 17 is not
							_
	more than 33 1/3%, check this box and s						
b	33 1/3% support tests—2017. If the	-			•		_
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anization	▶⊔_
20	Private foundation. If the organization	on did not check a	box on line 14, 1	.9a, or 19b, check	this box and see	instructions	▶ □

Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Page 4

No

No

No

No

No

No

No

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

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

Schedule A (Form 990 or 990-EZ) 2018

10a

answer line 10b below

the organization had excess business holdings)

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, Yes

describe the designation If historic and continuing relationship, explain

1 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)Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

2 3а 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 3b

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 3с 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 4a

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 4b supervised by or in connection with its supported organizations 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 4c

No 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 5a amendment to the organizing document)

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? 5b Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

No 6 than (1) 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. 6 Yes 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

7 No Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," 8

complete Part I of Schedule L (Form 990 or 990-EZ) 8

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. 9a

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.

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

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

3b

Sched	lule A (Form 990 or 990-EZ) 2018			Page 6
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section 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)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
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		
	Section 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-instructions)	ntegrat	ed Type III supporting or	ganızatıon (see

Schedule A (Form 990 or 990-EZ) (2018)

c 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
If the amount is greater than zero, explain in Part VI

Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines.

a Excess from 2014. **b** Excess from 2015. **c** Excess from 2016.

See instructions

d Excess from 2017.e Excess from 2018.

3_j and 4c

8 Breakdown of line 7

Schedule A	(101111 990 01 990-62)	2016 Page 6				
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 C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)						
		Facts And Circumstances Test				
990 Sche	dule A, Supplemei	ntal Information				
Ret	urn Reference	Explanation				
Schedule A	, Part I, Line 12g(ı)	General Explanation Three North Carolina Universities, Duke University in Durham, The University of North Carolina in Chapel Hill and North Carolina State University in Raleigh, incorporated RTI in 1958. We are a separately operated affiliate of these schools and maint ain our own staff and offices. We work with their scientists on research programs and projects and maintain such universities and businesses in the Microelectronics Center of North.				

Carolina and North Carolina Biotechnology Center

Page 8

Schedule A (Form 990 or 990-FZ) 2018

990 Schedule A, Supplemental Information						
Return Reference	Explanation					
Schedule A, Part IV, Line 6	RTI grants money to needy organizations based on its community-oriented mission					

SCHEDULE C

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

Political Campaign and Lobbying Activities

OMB No 1545-0047

DLN: 93493225011010

Open to Public

Department of the Treasury Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

EZ)

(Form 990 or 990-

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

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

		527 organizations Complet							
			n Form 990, Part IV, Line 4, or Form 99 have filed Form 5768 (election under se						2
			. nave filed Form 5768 (election under se . have NOT filed Form 5768 (election un						
			Form 990, Part IV, Line 5 (Proxy Tax						
		(see separate instructions		, , ,		,		, ,	
		501(c)(4), (5), or (6) organiz	ations Complete Part III						
		ne organization angle Institute				Employer id	enti	fication num	nber
		angle metate				56-0686338			
Par	t I-A	Complete if the organ	nization is exempt under sectio	n 501(c) or is	a sectio	n 527 orgai	niza	ition.	
1		le a description of the organ cal campaign activities")	ızatıon's dırect and ındırect political cam	npaign activities in	Part IV (s	see instruction	s for	definition of	
2	Politic	al campaign activity expend	itures (see instructions)			•	\$		
3	Voluni	teer hours for political camp	aign activities (see instructions)						
Par	t I-B	Complete if the organ	nization is exempt under sectio	n 501(c)(3).					
1	Enter	the amount of any excise ta	x incurred by the organization under se	ction 4955		>	\$		
2		· ·	x incurred by organization managers ur			>	\$		
3		·	ion 4955 tax, did it file Form 4720 for t					☐ Yes	□ No
4a		correction made?						☐ Yes	□ No
		s," describe in Part IV							
Par	t 1-C	Complete if the organ	nization is exempt under sectio	n 501(c), exce	ept secti	on 501(c)(3			
1	Enter	the amount directly expende	ed by the filing organization for section	527 exempt funct	ion activiti	ies 🕨	\$		
2		the amount of the filing orga on activities	anızatıon's funds contributed to other or	rganızatıons for se	ection 527	exempt •	\$		
3	Total	exempt function expenditure	es Add lines 1 and 2 Enter here and on	Form 1120-POL,	lıne 17b	>	\$		
4	Dıd th	e filing organization file For	m 1120-POL for this year?					☐ Yes	□ No
5	organ of pol	ization made payments For itical contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivere se (PAC) If additional space is needed,	ount paid from the ed to a separate p	filing orga olitical org	anızatıon's fund Janızatıon, such	ds A	lso enter the	
filing				filing	mount paid from g organization's s If none, enter -0- directly deliv separate p organization enter -			received otly and vered to a political If none,	
1									
2									
3									
1									
5									
or P	anerwo	rk Reduction Act Notice see t	the instructions for Form 990 or 990-EZ.	C-1	No. 500041	Cohodul- 1	^ (Ec	rm 990 or 990	1_E7\ 2019
J. F	aber asol		WCGOOD TOT I OTHE 330 OF 330-EZ.	Cat	No 500849	o ocneaule (~ (FO	いいい タタひ ひに タタし	J-EZ J ZUIB

Calendar year (or fiscal year (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) Total beginning in) 2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures Schedule C (Form 990 or 990-EZ) 2018 activity

5

Part IV

Return Reference

Schedule C, Part II-B, Line 1 -

(b)

Amount

(a)

No

Yes

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1 including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Nο Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Yes Media advertisements? No Mailings to members, legislators, or the public? Nο d Publications, or published or broadcast statements? No Nο Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Yes 507,228 Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Nο Other activities? Nο Total Add lines 1c through 1i 507,228 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? Nο If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No 1 1 Were substantially all (90% or more) dues received nondeductible by members? 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b b Carryover from last year 2c c Total 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

for certain fields of research and development

Explanation

Research Triangle Institute communicates the results of its independent objective research with government officials, protects its reputation for independence, objectivity and quality and seeks sufficient federal budgets

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Supplemental Information

5

As Filed Data efile GRAPHIC print - DO NOT PROCESS **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 the latest information.

DLN: 93493225011010 OMB No 1545-0047

Open to Public Inspection

Name of the organization						Employer identification number				
Kes	earch Triangle Institute					56-0686338				
Pa	organizations Maintaining Donor Advis				ds or	Accounts.				
	Complete if the organization answered "Ye	s" on Form 990, P (a) Donor		•		/b\Eunds	and ather	accounts.		
1	Total number at end of year		(b)Funds and other accounts							
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 advisor	c in writing that the	3556	ats held in don	or advi	ced funds are t	the			
,	organization's property, subject to the organization's ex			ets field iii doii	ioi auvi	sea lulius ale i		Yes 🗌 No		
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?							Yes 🗌 No		
Pai	rt II Conservation Easements. Complete if th	e organization an	swe	red "Yes" on	Form	990, Part IV,	line 7.			
1	Purpose(s) of conservation easements held by the organ	ization (check all th	at ap	ply)						
	\square Preservation of land for public use (e g , recreation	or education)		Preservation	of an h	storically impo	ortant land a	area		
	Protection of natural habitat			Preservation	of a ce	rtified historic s	structure			
	Preservation of open space									
2	Complete lines 2a through 2d if the organization held a	gualified conservatio	n co	ntribution in th	he form	of a conservat	tion			
	easement on the last day of the tax year			t the End o	f the Year					
а	Total number of conservation easements	<u>L</u> :	2a							
b	Total acreage restricted by conservation easements	<u>_</u> :	2b							
c	Number of conservation easements on a certified historic structure included in (a)									
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register									
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶									
4	Number of states where property subject to conservation easement is located ▶									
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No									
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year									
7	Amount of expenses incurred in monitoring, inspecting, ► \$	handling of violation	ıs, ar	nd enforcing co	onserva	ition easement	s during the	e year		
8	Does each conservation easement reported on line 2(d)	above satisfy the re	quire	ements of sect	ion 170)(h)(4)(B)(ı)				
	and section 170(h)(4)(B)(ii)? \square Yes \square No						□ No			
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements									
Par	Organizations Maintaining Collections Complete if the organization answered "Ye				Othe	r Similar As	sets.			
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finan	public exhibition, ed	ucatı	on, or researc	h in fur					
b	701									
(i) Revenue included on Form 990, Part VIII, line 1					▶ \$				
(i	i)Assets included in Form 990, Part X					 -				
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS 1				r financ	ial gain, provid	de the			
а										
	Assets included in Form 990, Part X					· *				
٠	Assets included in Form 350, Part A									

Par	1111	Organizations Ma	aintaining Col	lections of	of Art, F	listori	cal T	reası	ires, o	r Other	Similar A	Assets (d	contin	ued)	
3		the organization's acq (check all that apply)	uisition, accessio	n, and other	records,	check	any of	the fo	llowing t	that are a	sıgnıfıcant	use of its	colle	ction	
а		Public exhibition				d		Loan	or exch	ange pro	grams				
b		Scholarly research				e		Othe	r						
С		Preservation for future	e generations												
4	Provid Part X	de a description of the KIII	organızatıon's col	lections and	l explain	how the	ey furtl	her the	e organiz	zation's e	xempt purp	ose in			
5		g the year, did the org s to be sold to raise fur									nılar	☐ Ye	s	□ N	o
Pai	rt IV	Escrow and Cust Complete if the or X, line 21.			" on For	m 990	, Part	IV, lı	ne 9, o	r reporte	ed an amo	ount on F	orm	990,	Part
1 a		e organization an agent ded on Form 990, Part		an or other	ıntermed	ary for	contri	bution	s or oth	er assets	not	☐ Ye	s	□ N	o
ь	ī£ "∨o	es," explain the arrange	ment in Part VIII	and comple	ate the fo	llowing	table					Amount			_
C		ining balance	ement m Part XIII	. and comple	ete the lo	nowing	table			1c		Amount			-
d	_	ining balance lons during the year								1d					_
e		butions during the year	r							1e					_
f		ig balance	•							1f					_
2a		ne organization include	an amount on Fo	orm 990, Par	rt X, line	21, for	escrow	v or cu	istodial a	account li	ability?	. 🗌 Ye	s	□ N	– о
b	If "Ye	es," explain the arrange	ement in Part XIII	Check here	e if the ex	kplanati	on has	s been	provide	d ın Part	XIII	. 🗆			
Pa	rt V	Endowment Fund	ds. Complete ıf	the organ	ızatıon a	answer	ed "Y	es" oı	n Form	990, Pa	rt IV, lıne	10.			
_	_			(a)Currer	nt year	(b) P	rıor yea	r	(c)Two y	ears back	(d)Three y	ears back	(e) Fo	ur year	s back
	-	ing of year balance .													
		outions			-			_							
		estment earnings, gair	•												
		or scholarships													
		expenditures for facilition	es												
f	Admını	strative expenses .													
g	End of	year balance													
2 a		de the estimated perce d designated or quasi-e	-	ent year end	d balance	(line 1	g, colu	mn (a)) held a	ıs	1				_
b	Perma	anent endowment 🕨													
С	Temp	orarily restricted endo	wment >												
	The p	ercentages on lines 2a	, 2b, and 2c shou	ıld equal 100	0%										
3а		here endowment funds	not in the posses	sion of the	organızat	ion that	t are h	eld an	d admın	istered fo	r the		_	1	
	-	nization by hrelated organizations										2-	a(i)	Yes	No
	• •	elated organizations .											1(ii)		
Ь		es" on 3a(II), are the re		ns listed as r	equired o	on Sche	dule R	? .	• •				3b		
4		ribe in Part XIII the inte	-		•									1	
Pai	t VI	Land, Buildings,													
		Complete if the or													_
	Descri	ption of property	(a) Cost or oth (investme		(b) Cost	or otner	basis (otner)	(c) Acc	umulated (depreciation	,	a) Boo	ok valu	e
4 -	1 = 0.01						2.0	74 412				1			1674 447
	Land							74,413			110 022 600				.,674,413
	Buildin	_					∠04,99	92,546			118,923,699	<u> </u>		146	,068,847
		old improvements					Q1 F/	69,585			65,857,557			25	712 029
		nent						26,461			05,057,557	1			5,712,028 5,426,461
е	otner		I		I		3,4.	20,401	1			1		3	,+2U,4Ul

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

179,881,749

Part VII Investments—Other Securities. Complete	ıf the	organization ans	swered "Yes" on	Form 990, Pa	t IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	Т	(b) Book value	Coc	(c) Method of vo	
(Including name of security) (1) Financial derivatives			Cos	t or end-of-year	market value
(2) Closely-held equity interests	· -				
(A) Global Endowment Fund II, LP (B)	+	69,452,272	2	С	
(C)	_				
(D)	_				
	_				
(E)	_				
(F)	4				
(G)					
(H)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related.	•	69,452,272	2		
Complete if the organization answered 'Yes' of	on For				
(a) Description of investment		(b) Book value		(c) Method of value of or end-of-year	
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		•			
Part IX Other Assets. Complete if the organization answ (a) Descrip		es' on Form 990, F	Part IV, line 11d	See Form 990, Pa	art X, line 15 (b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)			•	
Part X Other Liabilities. Complete if the organization See Form 990, Part X, line 25.	on ans	swered 'Yes' on F	orm 990, Part 1	V, line 11e or	11f.
1. (a) Description of liability		(b)	Book value		
(1) Federal income taxes Other Accrued Expenses			25,158,499		
(2)			23,130,133		
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions In Part XIII, provide the te	xt of th	ne footnote to the	25,158,499 organization's fina	ncıal statements	that reports the
organization's liability for uncertain tax positions under FIN 48 (A					

Schedule D (Form 990) 2018

Schedule D (Forn	n 990) 2018	Page 5
Part XIII	Supplemental Info	rmation (continued)
Retur	n Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID:

Software Version:

EIN: 56-0686338

Name: Research Triangle Institute

Supplemental Information

Return Reference	Explanation
Schedule D, Part X, Line 2 -	As provided by Section 501(c)(3) of the IRC and the Internal Revenue Service's determination, the Institute's charitable, scientific, and educational operations are exempt from corporate income taxes and no provision for corporate income taxes is generally required. How ever, this tax exemption does not pertain to activities unrelated to the Institute's exempt the purposes. The Institute's presence in certain foreign countries results in income taxation in these countries. Additionally, the Institute has several for-profit entities subject to corporate income taxation. These for-profit entities' operating losses, a deemed asset acquisition, and goodwill impairments have primarily contributed to a \$4.2 million deferred tax asset that has been offset with a full valuation allowance, as of the years ended September 30, 2019 and 2018. Income taxes associated with foreign operations, unrelated bus iness income, and income generated by our for-profit entities are not material for the Institute. All not-for-profit (NFP) organizations, including the Institute, are subject to the provisions of Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) Topic 740, Income Taxes, related to the accounting for uncertainty in tax positions, including the financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return. The tax benefit from an uncertain tax position is sonly recognized in the consolidated balance sheets if the tax position is more likely than not to be sustained upon examination, based on the technical merits of the position. In terest and penalities, if any, are included in tax expense in the consolidated statements of revenue, costs, and changes in Institute net assets. As of September 30, 2019, and 2018, the Institute had no uncertain tax positions that qualify for recognition or disclosure in the consolidated financial statements.

efile GRAPHIC print	t - DO NOT I	PROCESS	As Filed Data -	ata - DLN: 93493225011010				
SCHEDULE F (Form 990)	State	ement of	Activities (Outside the Un	ited S	tates	OMB No 1545-0047	
(1 01111 330)	► Comp	lete if the organi		/es" to Form 990, Part IV, I o Form 990.	ine 14b, 1	15, or 16.	2018	
Department of the Treasury Internal Revenue Service	•	► Go to <i>www.irs</i> .	gov/Form990 for II	nstructions and the latest ii	nformatio	n.	Open to Public Inspection	
Name of the organization Research Triangle Institut						Employer iden 56-0686338	tification number	
	nformation Part IV, line		Outside the U	Inited States. Comple	ete if the	organization a	nswered "Yes" to	
1 For grantmakers	s. Does the or	rganızatıon ma	intain records to	substantiate the amoun	t of its gi	rants and		
			ne grants or assis	stance, and the selection	criteria	used		
to award the gran	ts or assistan	ce?					☑ Yes 🗌 No	
2 For grantmakers outside the United		Part V the org	anızatıon's proce	dures for monitoring the	use of i	ts grants and oth	ner assistance	
3 Activites per Region	n (The followir	ng Part I, line 3	table can be dupli	cated if additional space is	s needed)		
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program sp	vity listed in (d) is a a service, describe ecific type of ce(s) in region	(f) Total expenditures for and investments in region	
See Add'l Data				-				
3a Sub-total		8:	2 1,535				260,084,91	
b Total from continuat Part I	ion sheets to						4,905,95	
c Totals (add lines 3a	and 3b)	8.	2 1,538				264,990,86	
For Paperwork Reduction	Act Notice so	o the Instruction	ns for Form 999	Cat	No 5008	OW Schodu	le F (Form 990) 2018	

Schedule F (Form 990) 2018							Page 3
Part IIII Grants and Otl				ed States. Complete r	f the organization ar	nswered "Yes" to Form 9	990, Part IV, line 16.
	duplicated if addit			1	1		
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Sched	dule F (Form 990) 2018		Page 4
Par	TIV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	✓ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)	□Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)	✓ Yes	□No

Schedule F (Form 990) 201	8 Page 5						
Provide the amounts of method); ai	Provide the information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).						
990 Schedule F, Supplemental Information							
Return Reference	Explanation						
Cabadula F Dart I Lina	DTI's intermetional development program converse are not in the nature of grantmaking. Con Dart III, line 4/b) of the						

Return Reference	Explanation
Schedule F, Part I, Line	RTI's International development program services are not in the nature of grantmaking. See Part III, line 4(b) of the Form 990

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 2	RTI is committed to improving the human condition and helping people by giving back to the communities where we are located. As described in Schedule I, RTI seeks recommendations for worthy charitable causes. During FY19 RTI contributed to the following communities. RTI contributed \$1,000 to Afya Elimu CBO in Africa to empower community members to embrace people-driven development initiatives in Education, Health and Agriculture. RTI contributed \$1,000 to Breath of Heaven Children's Home to provide shelter, protection, and education with necessary facilities for their day to day activities. RTI contributed \$1,000 to The House of Hope Children's Home in Africa to provide a safe haven for orphans and other needy children in a loving, caring Christian family home. RTI contributed \$1,000 to the Kenya Women and Children Wellness Center in Africa to assist with providing the society with integrated programs that promotes quality of life through research, capacity building, empowerment, advocacy and service delivery. RTI Contributed \$1,000 to Morning Star Children's Home in Africa to give less fortunate children hope and a joy for a brighter future. RTI contributed \$1,000 to Tuuru Children Home in Africa to help restritute autonomy for the physically and mentally challenged. RTI contributed \$1,000 to Zama Zama Dance Development Centre in Africa where they empower children and youth to take charge of their lives through dance, health, hygiene, education and environmental awareness. RTI contributed \$2,500 to Operation Smile in Guatemala to provide comprehensive, specialized and free medical care and reconstructive surgeries to needy people who suffer from cleft lip and palate, transforming their lives and their family's lives, one smile at a time. RTI contributed \$3,750 to Louts Petal Foundation in lindia to help children in the urban slums of India lead better lives and get access to quality education and healthcare. RTI contributed \$3,750 to Yayasan ISCO in Indonesia to enable children who live in poverty to receive a

Additional Data

Software ID: Software Version:

EIN: 56-0686338

Name: Research Triangle Institute

Economic&Social, Education, Energy, Governance & Economics, Health

(f) Total

27,198,657

	Number of offices in the region	of employees or agents in region	conducted in region (by type) (ie, fundraising, programs services, grants to recipients located in the region)	type of service(s) in region	expenditures foi region
Central America and the Caribbean - Antigua &	8	99	Program Services	Research of Economic&Social,Education,Energy,Governance&Economics,Health	70,936,012

(a) Region (b) (c) Number (d) Activities (e) If activity listed in (d) is a program service, describe specific

Program Services Research of

26

Barbuda, Aruba, Bahamas,

East Asia and the

Australia, Brunei, Burma, Cambodia,

Pacific -

(a) Region (b) (c) Number (d) Activities (e) If activity listed in (d) is a program service, describe specific (f) Total Number of conducted in type of service(s) in region expenditures for of offices region (by type) emplovees region ın the or agents in (ιe, fundraising, region region program services, grants to recipients located in the region) 93 | Program Services | Research of Europe (Including 13,951,801 Iceland & Economic&Social,Education,Energy,Governance&Economics,Health Greenland) -Albania, Andorra,

Economic&Social,Education,Energy,Governance&Economics,Health

20,547,330

37 Program Services Research of

Form 990 Schedule F Part I - Activities Outside The United States

Austria, Belgium

Middle East and

North Africa -

Algeria, Bahrain, Djibouti, Egypt,

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) (c) Number (d) Activities (e) If activity listed in (d) is a program service, describe specific type (f) Total Number conducted in of service(s) in region expenditures of offices employees region (by for region in the type) (i e , or agents fundraising, region in region program services. grants to recipients located in the region) Research of Russia and 0 Program Neighboring Services Economic&Social,Education,Energy,Governance&Economics,Health States -Armenia, Azerbijan, Belarus, South America -Program Research of n Economic&Social,Education,Energy,Governance&Economics,Health,Tech Argentina, Services

Bolivia, Brazil, Chile, Columbia, Ecuador,

Number of conducted in type of service(s) in region expenditures for of offices employees region (by region type) (ie, ın the or agents in fundraising, region region program services, grants to recipients located in the region) 142 | Program Services | Research of South Asia -33,854,119

Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal,

(b)

Form 990 Schedule F Part I - Activities Outside The United States

(c) Number

(d) Activities

Economic&Social,Education,Energy,Governance&Economics,Health

(e) If activity listed in (d) is a program service, describe specific

(f) Total

38

Sub-Saharan Africa - Angola,

Benin, Botswana, Burkina Faso,

(a) Region

882 Program Services Research of

Economic&Social,Education,Energy,Governance&Economics,Health

93,596,994

(a) Region (b) (c) Number (d) Activities (e) If activity listed in (d) is a program service, describe specific (f) Total Number of of conducted in type of service(s) in region expenditures for offices in employees region (by type) region the region or agents in (ιe, fundraising, region program services, grants to recipients located in the region) 201,219 North America -3 | Program Services | Research of Canada and Economic&Social, Education, Energy, Governance&Economics, Health Mexico, but not the United States Sub-Saharan Grantmaking 6,507 Africa - Angola, Benin, Botswana, Burkina Faso.

Form 990 Schedule F Part I - Activities Outside The United States

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) 7,500 Central America and the Grantmakınd Caribbean - Antiqua & Barbuda, Aruba, Bahamas, East Asia and the Pacific -Grantmaking 3,750 Australia, Brunei, Burma, Cambodia.

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region services, grants to service(s) in region region recipients located in the region) South Asia - Afghanistan, 2.906.977 Investment Bangladesh, Bhutan, India, Maldives, Nepal. North America - Canada and Investment 1,775,000 Mexico, but not the United States

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of fundraising, program region agents in services, grants to service(s) in region region recipients located in the region) Fast Asia and the Pacific 5,000 lInvestment

DLN: 93493225011010 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. **Open to Public** ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number Research Triangle Institute 56-0686338 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Additional Data

American Red Cross

2025 E ST NW Washington, DC 20006 The Childrens Inn at NIH

7 West Drive Bethesda, MD 20814

Software ID: **Software Version:**

53-0196605

52-1638207

EIN: 56-0686338

Name: Research Triangle Institute

214,082

25,000

Form 990,	Schedule I,	, Part II	, Grants and	Other Assistance to	Domestic Domestic	Organiza	tions and Domesti	ic Governments.	
									Т

organization	(-,	ıf applıcable	grant	cash	(book, FMV, appraisal,	
or government			-	assistance	other)	

organization	ıf applıcable	grant	cash	(book, FMV, appraisal,	
or government			assistance	other)	

(a) Name and address of	(D) EIN	(c) IRC section	(a) Amount of cash	(e) Amount of non-	(1) Method of Valuat
organization		ıf applıcable	grant	cash	(book, FMV, apprais
or government				assistance	other)

501(c)(3)

501(c)(3)

(g) Description of non-cash assistance (h) Purpose of grant

or assistance

General Support

General Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance United Way of Greater Triangle 56-1949103 501(c)(3) 118.346 General Support 2400 Perimeter Park Drive

General Support

10,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Morrisville, NC 27560

Durham Jazz Workshop Inc

4608 Industry Lane Durham, NC 27713 45-4956498

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance United Way of Larimer County 84-6031503 501(c)(3) 5.293 General Support 424 Pine Street Suite 102 Fort Collins, CO 80524

78,765 FMV

Computer Equipment

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

74-3108814

Kramden Institute

4915 Prospectus Dr Suite J Durham, NC 27713

(a) Name and address of (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (b) EIN organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

10.000 FMV Computer Equipment NC State University 47-2469472 General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1020 Main Campus Drive Raleigh, NC 27695

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Dat	a -	DLN: 934	9322	5011	010
Sch	edule J	Co	mpensat	ion Information	МО	IB No	1545-0	0047
(Form 990)		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.						3
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov</u>	<u>/Form990</u> for	instructions and the latest inform	mation. O		to Pul ectio	
Nar	ne of the organiza				Employer identificat			
Rese	earch Triangle Institi	ute			56-0686338			
Pa	rt I Questi	ons Regarding Compensat	ion		30 0000330			
							Yes	No
1a				f the following to or for a person liste by relevant information regarding the				
	First-class	or charter travel	$\overline{\mathbf{Y}}$	Housing allowance or residence for	personal use			
	_	companions		Payments for business use of perso				
		nification and gross-up payments	∀	Health or social club dues or initiation				
	☐ Discretion	nary spending account	\Delta	Personal services (e g , maid, chauf	teur, chet)			
b		xes in line 1a are checked, did the all of the expenses described abov		ollow a written policy regarding paym nplete Part III to explain	nent or reimbursement	1b	Yes	
2				or allowing expenses incurred by all	. 1-2	2	Yes	
	directors, truste	es, officers, including the CEO/EX	ecutive Directo	r, regarding the items checked in line	e lar			
3	organization's C	EO/Executive Director Check all	that apply Do	ed to establish the compensation of th not check any boxes for methods CEO/Executive Director, but explain i				
	✓ Compensa	ation committee	\checkmark	Written employment contract				
		ent compensation consultant	✓	Compensation survey or study				
	✓ Form 990	of other organizations	\checkmark	Approval by the board or compensa	tion committee			
4	During the year related organiza		90, Part VII, Se	ection A, line 1a, with respect to the fi	iling organization or a			
а	Receive a sever	ance payment or change-of-contr	rol pavment?			4a		No
ь		r receive payment from, a supple		lified retirement plan?		4b	Yes	
c	Participate in, o	r receive payment from, an equit	y-based comper	nsation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and	provide the app	plicable amounts for each item in Part	t III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9.				
5	For persons liste		A, line 1a, did	the organization pay or accrue any				
а	The organization	17				5a		No
b	Any related orga					5b		No
	-	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section ontingent on the net earnings of	A, line 1a, did	the organization pay or accrue any				
а	The organization	1 [?]				6a		No
b	Any related orga					6 b		No
	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Section escribed in lines 5 and 6? If "Yes,		the organization provide any nonfixed ort III	d	7	Yes	
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," de	escribe	8	Yes	
9	If "Yes" on line 3 53 4958-6(c)?	8, did the organization also follow	the rebuttable	presumption procedure described in	Regulations section	9	103	No
For F	Paperwork Redu	iction Act Notice, see the Inst	ructions for Fo	orm 990. Cat No 5	50053T Schedule J	(Forn	990)	2018

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

Part II Officers, Directors, Trustees, Rey Employees, and Ting							
For each individual whose compensation must be reported on Schedule J, report of instructions, on row (ii) Do not list any individuals that are not listed on Form 990	0, Part VII						
Note. The sum of columns (B)(I)-(III) for each listed individual must equal the tot	<u>al amount of Fo</u> r	<u>rm 990, Part VII, Se</u>	≥ction A, line 1a, a	pplicable column (ر	<u>ン) and (E) amour</u>	nts for that indi	vidual
(A) Name and Title	(B) Breal	kdown of W-2 and/o compensation	or 1099-MISC	and other		columns	Compensation in
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table						•	
	1	1	1		1	I	1
							!
				+			
	+			+			
				+			
		-		+			
1							
			1				

Schedule J (Form 990) 2018	Page 3					
Part III Supplemental Information						
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information						
Return Reference	Explanation					
Part I, Line 1a	One highly compensated employee received tax gross up payments related to their international assignment in addition to payment for housing which was included					

senior executives who use these RTI club memberships exclusively for RTI business purposes

Return Reference	Explanation
	The Institute implemented a long term incentive plan designed to reward executives to ensure the organization's finances are strong and to retain executives. This plan recognizes that the executives' total compensation is below market. Rather than increasing salaries, annual incentives or supplemental retirement benefits, the Board implemented a cash based retention plan which is dependent on the Institute's continued strong performance. Amounts paid and accrued during the calendar year 2018 are as follows. E. Holden \$311,930, J. Gibson \$195,360, M. Kaelin \$156,180, T. Gabel \$154,726, A. Mangel \$153,743, G. Story \$149,320, P. Weisenfeld \$146,833, L. May \$132,811, T. Piccione \$6,619. These amounts include payments totaling \$365,273 which were accrued and reported in prior years as deferred compensation.

Return Reference	Explanation
·	RTI maintains variable compensation plans which are reviewed and approved annually by the Compensation Committee of the Board, as well as the full Board, to establish appropriate measurable targets and objectives along with incentive amounts. Actual performance under the plans is reviewed after the performance period and approved by the Compensation Committee and full Board as well. Amounts paid under these plans during the calendar year 2018 are as follows. E. Holden \$276,305, A. Mangel \$110,732, J. Gibson 119,756, M. Kaelin \$100,000, T. Gabel \$95,000, G. Story \$100,000, L. May \$95,000, P. Weisenfeld \$100,000, E. Sax \$63,000, C. Buchholtz \$57,000, C. Cornwell \$40,000, S. Earnshaw \$77,534, C. Simmons 83,772, L. Gilliland \$74,000, T. Pierson \$58,000, and R. Zerbonia \$50,085

Return Reference	Explanation
,	RTI recruits its executive leadership from the national labor market, and this practice can introduce variability into each executive's initial compensation package Accordingly, amounts were paid and accrued during the 2018 calendar year that emanated from RTI's offer of employment to certain executives and these items were included in the executive's employment agreement with RTI. Amounts paid were reported as taxable income and are included in the 2018 bonus or other compensation columns for each executive that received such payment. Any unpaid accruals are included in the deferred compensation column.

Software ID:

Software Version:

EIN: 56-0686338

Name: Research Triangle Institute

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Form 990, Schedule J,								
(A) Name and Title			of W-2 and/or 1099-MIS		(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B)
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	penents	(6)(1)-(0)	reported as deferred on prior Form 990
A Rebar Separated 123118 Board Member	(1)	41,500	0	0	0	0	41,500	0
board Member	(II)	390,125				0	390,125	
H Martin	(1)	36,000	0	0	0	0	36,000	0
Board Member	(II)	394,000					394,000	
P Lange	(ı)	47,000	0	0	0	0	47,000	0
Board Member		124,976						
T Magnuson	(1)	36,000	0	18,500	17,863	3,588	164,927 36,000	0
Board Member	(II)	634,688						
L Carın	(1)	41,500	0	0	0	0	634,688	0
Board Member							41,500	
E Holden	(1)	278,316 872,597	136,958	0	33,548	18,201	467,023	0
President			379,568	51,725	131,219	41,796 	1,476,905	77,447
W Arden New 31919	(11)	0	0	0	0	0	0	0
Board Member	(I)		0	0	0	0	0	0
C.C. I. N. 442040	(11)	454,555	0	0	0	0	454,555	0
C Carter New 112018 Board Member	(1)	0	0	0	0	0	0	0
	(11)	280,000	0	0	0	0	280,000	0
C Buchholtz Assistant Secretary	(ı)	240,925	65,000	551	0	53,465	359,941	0
	(11)	0	0	0	0	0	0	0
G Story Secretary	(1)	384,943	162,721	11,038	57,057	42,380	658,139	39,541
	(11)	0	0	0	0	0	0	0
E Sax Treasurer	(1)	273,420	63,000	1,449	0	37,854	375,723	0
	(11)	0	0	0	0	0	0	0
J Gibson Vice President	(1)	494,105	198,553	21,957	74,965	58,637	848,217	51,598
Tigo i radiadina	(11)	0	0	0	0	0	0	0
L May Vice President	(1)	352,967	151,589	8,150	51,281	39,372	603,359	34,942
vice Fresident	(II)	0	0	0	0	0	0	0
T Gabel	(1)	392,542	164,388	12,038	59,546	49,558	678,072	40,791
Vice President	(II)	0			0	0		
A Mangel	(1)	390,932	180,143	15,259	58,525	55,833	700,692	40,808
Vice President	(II)	0				0		
C Cornwell	(1)	225,552	45,000	492	0	30,027	301,071	0
Vice President	(II)							
P Weisenfeld	(1)	376,174	172,005	10,552	55,824	25,369	639,924	39,004
Vice President	(II)							
M Kaelın Jr	(1)	404,645	174,857	11,977	60,180	45,086	696,745	41,143
Vice President & CFO								
L Gilliland	(1)	322,127	77.000	6.500	0	47.300	452.005	0
Divisional Director		522,127	77,000	6,560 		47,208 	452,895 	
S Earnshaw	(11)	305,800	0	0	0	0	0	0
Divisional Director	(I)	305,800	90,034	3,134		34,449 	433,417	0
	(11)	0	0	0	0	0	0	0

(A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in benefits other deferred (B)(i)-(D)column (B) (i) Base Compensation reported as deferred on compensation Bonus & incentive Other reportable prior Form 990 compensation compensation T Pierson 318,571 73,000 8,535 26,410 426.516 Divisional Director C Simmons 300,346 83,772 3,363 43,367 430.848 Divisional Director

122,963

820

29,074

3,084

5,730

16,229

463,774

20,750

383,083

55,875

153,581

408.378

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

60,085

885

13,392

251,652

20,750

383,083

55,875

133,383

388,436

R Zerbonia

J Gonzales

P Wynn Jr

T Lomax

Divisional Director

Former Board Member

Former Board Member

Former Vice President

ef	ile GRAPHIC print - DO NO	T PROCESS As	Filed Data -								DLN:	93493	22501	1010
	te: To capture the full con	tent of this docum	ient, please sele	ct landscape mode	e (11" x 8.	5") whe	n printing.							
	hedule K	Sui	nnlemental	Information o	n Tax-F	xemn	t Ronds			OMB No 1545-0047				
(F	orm 990)			swered "Yes" to Form						2018				
		•		s, and any additional	information			• •						
	artment of the Treasury rnal Revenue Service		►Go to www	Attach to Form 99 irs.gov/Form990 for.		nformatio	nn.					en to F Inspect		
Nam	ne of the organization		r do to <u>mana</u>	in sigot/ / crimsso tor	the latest i	mormatic	J111		Emplo	yer iden				
Res	earch Triangle Institute								56-06	86338				
Pä	art I Bond Issues								I					
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue ¡	orice	(f) Descrip	tion of purpose	(g) De	efeased		On		Pool
												alf of uer	finar	ncing
									Yes	No	Yes	No	Yes	No
Α	Durham County Industrial	56-1379535	266711AA8	11-29-2007	40,5		nance constru			Х		Х		Х
	Facilities & Pollution Control Financing Authority					bı	uildings and pa	arking deck						
В	Durham County Industrial Facilities & Pollution Control	56-1379535	266711AC4	02-18-2010	24,9		nance construuildings and pa			X		Х		X
	Financing Authority						unumgs and pe	irking deck						
2	art II Proceeds				T			_						
1	Amount of bonds retired				<u> </u>	4		В		•			D	
<u>-</u>	Amount of bonds legally defea													
_	Total proceeds of issue													
4	Gross proceeds in reserve fun					41,187,4	95	25,000,732						
5	Capitalized interest from proc					/ / .		23,000,702					,	
6	Proceeds in refunding escrows													
7	Issuance costs from proceeds					333,7	70	340,956						_
8	Credit enhancement from pro-	ceeds						,						
9	Working capital expenditures	from proceeds												
10	Capital expenditures from pro	ceeds				40,853,7	'25	24,659,776						
11	Other spent proceeds													-
12	Other unspent proceeds													
13	Year of substantial completion	1			20	08		2011						
					Yes	No	Yes	No	Yes	No		Yes		No
14	Were the bonds issued as par	t of a current refunding	gissue ⁹	•		Х		X						
15	Were the bonds issued as par	t of an advance refundı	ing issue?	• •		Х		Х						
16	Has the final allocation of pro	ceeds been made? .			Х		X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?			х		X								
Pa	art III Private Business l		<u> </u>	· ·										
					,	4		В	(:			D	
					Yes	No	Yes	No	Yes	No		Yes		No
1	Was the organization a partne financed by tax-exempt bonds					х		Х						<u></u>
2	Are there any lease arrangem	ents that may result in	private business us		х			X						
Ear	property?	tico coo the Treturet				No 5019	035				-1	- V /F-	000	1) 2018

6

Part IV

b

C

Arbitrage

counsel to review any research agreements relating to the financed property?

a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3)

Penalty in Lieu of Arbitrage Rebate? . . . If "No" to line 1, did the following apply?...

Rebate not due yet?

Exception to rebate?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue?

Was the hedge superintegrated?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

Page 2

D

Schedule K (Form 990) 2018

No

Yes

Χ

Χ

No

Χ

Χ

Χ

Χ

0 %

0 520 %

0 520 %

Х

Χ

Χ

No

Χ

Χ

Χ

Χ

X

В

Yes

Χ

0 %

0 260 %

0 260 %

Х

Yes

C

No

If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside b counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-financed C Χ Χ If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside d Χ Х

Α

Yes

Χ

Х

Were gross proceeds invested in a guaranteed investment contract

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

the GIC satisfied?

requirements of section 148? . . .

Schedule K (Form 990) 2018

(GIC)?

period?

Part VI

Yes

Χ

В

Nο

No

Х

Х

Yes

Yes

No

No

Yes

Nο

Page 3

No

No

D

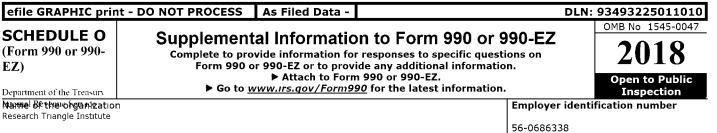
Yes

Schedule K (Form 990) 2018

Yes

Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Yes



990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4a	HEALTH RESEARCH is our largest single field of study, encompassing research that ranges fr om studies of the human genome and the development of new drug compounds to national surve ys of health behaviors and the implementation of global health programs. Our activities in DRUG DISCOVERY AND DEVELOPMENT include working with pharmaceutical companies and governme nt agencies to bring new medicines to market, and to ensure the safety and efficacy of tho se in the marketplace. As part of a comprehensive EDUCATION AND TRAINING RESEARCH program, our experts conduct rigorous studies used to assess and improve the quality of early deve lopment, education, and employment programs in the United States and many other countries. We also provide training solutions for forensic scientists and law enforcement. RTI is a leader in SURVEY RESEARCH and SURVEY STATISTICS. With a staff of highly skilled researcher's using advanced data collection systems and techniques, we offer broad-based survey services for lightly skilled researcher's using advanced data collection systems and techniques, we offer broad-based survey services for lightly skilled researcher's using advanced data collection systems and techniques, we offer broad-based survey services for lightly skilled researcher's using advanced data collection systems and techniques, we offer broad-based survey services for lightly skilled researcher's using advanced data collection systems and techniques, we offer broad-based survey services and evelopment and evaluation, pretests and pilot studies, mail surveys, telep hone surveys, face-to-face field surveys, we be surveys, records abstraction, collection of biological specimens, mixed-mode surveys, subject tracing, focus groups, and health regist ries. Our STATISTICS RESEARCH experts conduct complex statistical analyses to support wide ranging research programs in both laboratory and social sciences as well as ensure the quality, validity, and reliability of our research products and results by applying quality control and as

Return Explanation

990 Schedule O, Supplemental Information

Reference	
Form 990,	helping them make critical policy and regulatory decisions. Our LABORATORY & CHEMISTRY SER VICES support RTI research
Part III, Line	with state-of-the-art instrumentation, technologies, and proces ses. Our lab specifications and procedures emphasize quality
4a	control and excellence at eve ry level of activity to meet the expectations and needs of our clients

990 Schedule O, Supplemental Information

Return

Reference	
Form 990,	INTERNATIONAL DEVELOPMENT Our experts in international development are dedicated to improving the human condition in
Part III, Line	developing countries. With more than 200 international development staff members based around the world, we deliver advisory
4b	and training services at the national, sub-national, and local government levels, providing institutional development through the
	transfer of analytical tools and methods. We often work in multidisciplinary teams that cut across traditional sector boundaries. Our
	clients include the United States Agency for International Development, Asian Development Bank, World Bank, Inter-American

Development Bank, and several agencies of the United Nations, as well as foundations and other regional and international organizations. Our INTERNATIONAL DEVELOPMENT service areas include Governance & Stabilization, International Education, International Environmental Services, Global Health, Information & Communication Technology, and Monitoring & Evaluation

Explanation

990 Schedule O, Supplemental Information

Return

Reference	
Form 990,	T Darden & R Ingram - Business Relationship, T Darden & W Moore, Jr - Business Relationship, T Darden & C Shaffer -
Part VI,	Business Relationship, W Moore, Jr & P Scott - Business Relationship, W Moore, Jr & W Mitchell - Business Relationship, W
Section A	Moore, Ir & T. Darden, Business Relationship, C. Shaffer & P. Ingram, Business Relationship, D. Scott, III & W. Mitchell

Explanation

Business Relationship, W Moore, Jr & P Scott - Business Relationship, W Moore, Jr & W Mitchell - Business Relationship, W Moore, Jr & T Darden - Business Relationship, C Shaffer & R Ingram - Business Relationship, P Scott, III & W Mitchell - Business Relationship, P Lange & Pinnix-Ragland - Business Relationship, C Carter & T Magnuson - Business Relationship, C Carter & W Arden - Business Relationship, C Carter & H Martin, Sr - Business Relationship

990 Schedule O, Supplemental Information

Reference	Explanation
Form 990, Part VI, Section A, Iine 6	Research Triangle Institute is a non-profit corporation incorporated under the laws of the State of North Carolina. The Members of the corporation include the persons who at the time occupy the following positions. President, The University of North Carolina, Duke University one member of the Board of Trustees of Duke University, appointed by the Chair of the Board of Trustees of Duke University, for one or more terms of three years, and one member of the Board of Governors of the University of North Carolina, appointed by the Chair of the Board of Governors of the University of North Carolina, for one or more terms of three years. The members shall elect the Governors, review and act on fundamental corporate transactions approved by the Governors, and take such other actions as may be required by law. No part of the earnings of the corporation shall insure to the benefit of any member or individual

Explanation

Return Reference Explanation

990 Schedule O, Supplemental Information

line 7a

Form 990,
Part VI,
Section A,

The members shall elect the Governors as described in the Bylaws of the Corporation

990 Schedule O, Supplemental Information

ake such other actions

Explanation

990 Schedule O, Supplemental Information

Return Explanation

Reference

11010101100	
Form 990, Part VI,	The Form 990 with required schedules was provided to the full Board of Governors prior to filing via posting on RTI's hosted board communication solution. Director's Desk In addition, RTI management reviewed the process and steps undertaken in completing
	the form with the Audit and Compensation Committees of the Board, including a review of the full Form 990 with the Audit
line 11b	committee prior to dissemination to the full Board

990 Schedule O, Supplemental Information

Reference	
Form 990,	Members of the Board of Governors, Officers and Key Employees are required to complete an annual conflict of interest disclosure
Part VI.	In accordance with the organization's policies and procedures Each disclosure is reviewed by the Audit Committee Chair. Chair of

Explanation

Part VI, In accordance with the organization's policies and procedures. Each disclosure is reviewed by the Audit Committee Chair, Chair of the Board of Governors, or the Chief Ethics Officer to determine whether a conflict of interest exists and if so, whether it appears to be significant and may warrant further review according to the standards and guidelines of the policy.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section B, line 15	Each year, Research Triangle Institute (the Institute) management seeks the review and approval of the Institute's Compensation Committee and Board of Governors (Board) to ensure that the total compensation packages for its Chief Executive Officer (CEO) and other senior executives listed below are reasonable. The CEO and other senior executives are not involved in the Compensation Committee and Board's decision regarding reasonableness of the executive compensation packages. The Compensation Committee and the Board use independent compensation surveys conducted by nationally recognized independent firms. The independent survey includes compensation paid by comparable institutions (taxable as well as non-taxable) for functionally comparable positions and in comparable positions and in comparable geographic labor markets. The Compensation Committee and Board also uses an independent executive compensation consulting firm to review the survey data and provide comments opining on the reasonableness of the compensation for the Institute's senior executives. In 2018, the study covered the following executive positions. E. Holden, President and CEO, J. Gibson, Chief Operating Officer, T. Gabel, Executive Vice President, Social Statistical and Environmental Services, A. Mangel, Executive Vice President, Health Solutions, G. Story, Chief Legal Counsel and Government Affairs, L. May, Senior Vice President, Human Resources, Facilities, Safety and Security, M. Kaelin, Chief Financial Officer, P. Weisenfeld, Executive Vice President, International Development Group, T. Lomax, Executive Vice President, Discovery Sciences Technology. Also included in the independent review were the following positions. C. Cornwell, Vice President and Corporate Controller and E. Sax, Senior Vice President and Treasurer.

990 Schedule O, Supplemental Information

Reference	
Form 990, Part VI,	The organization makes its governing documents, conflict of interest policy and financial statements available to the public upon request
Section C, line 19	

Explanation

990 Schedule O, Supplemental Information

taxable entities

Return
Reference

Explanation

Explanation

Form 990,
RTI and its staff belong to and participate in consortiums and associations that are consistent with RTI's mission to improve the human condition. These affiliations are petiter in form nor substance a joint venture for federal income taxation. While RTI has not

Part VI, Section B, Line 16b

human condition. These affiliations are neither in form nor substance a joint venture for federal income taxation. While RTI has not entered into a joint venture with a taxable entity, RTI has adopted a joint venture policy in order to evaluate its participation for federal income tax purposes. Additionally, certain federal contracts are awarded on a cost share basis whereby a cost share subcontractor reimburses RTI for a percentage of the total contract costs. Cost share arrangements exist primarily with unrelated

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VII, Section A, Line 1b	RTI was established in 1958 by Duke University and the University of North Carolina System as the founding tenant of Research Triangle Park in North Carolina. It has grown into one of the world's leading independent nonprofit research organizations and is dedicated to conducting research and development that improves the human condition by turning knowledge into practice. Based on RTI's corporate governance structure, compensation of those Board Members employed by supported organizations (i.e. Duke and UNC System) is reported in column (E) and was obtained from the 990 information request questionnaire that was distributed to these listed persons and Duke University. These amounts were paid by either Duke University or The University of North Carolina (UNC System). Given the supporting relationship with these universities, RTI is requested to report these amounts, however, RTI has no influence over this compensation.

Return Explanation

Management and general expenses 0 Fundraising expenses 0 Total expenses 21.055.201

990 Schedule O, Supplemental Information

Reference

Form 990,	Subcontractors & Consultants Program service expenses 190,178,641 Management and general expenses 887,031 Fundraising
Part IX, line	expenses 0 Total expenses 191,065,672 Other Services Program service expenses 83,169,924 Management and general
11g	expenses 4,297,279 Fundraising expenses 0 Total expenses 87,467,203 Passthroughs Program service expenses 21,055,201

990 Schedule O, Supplemental Information

Return Explanation

Reference	
	Pension related changes -1,943,620 George Watts Hill Fund-Unrealized Gains (Permanently Restricted) -70,335 George Watts Hill Fund-Other Income (Temporarily Restricted) 70,273 Subsidiaries Foreign Exchange Gain/Loss -10,247 Adoption of 606
9	-1.551,252

SCHEDULE R
(Form 990)

As Filed Data Related

Department of the Treasury

Name of the organization

Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.
 ▶ Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

2018

Employer identification number

DLN: 93493225011010OMB No 1545-0047

Open to Public Inspection

Research Triangle Institute	56-06	86338									
Part I Identification of Disregarded Entities Comp	olete if the organization	answered "Yes	s" on Form	990, Part	IV, line 33	3.					
(a) Name, address, and EIN (If applicable) of disregarded entity	Pri	(b) Primary activity		(c) Legal domicile (state or foreign country)		ome	(e) End-of-year assets		ets Direct contr entity		
Part II Identification of Related Tax-Exempt Organ related tax-exempt organizations during the tax		ie organization	answered	"Yes" on F	orm 990,	Part IV,	, line 34 be	ecause it ha	ad one or n	nore	
(a) Name, address, and EIN of related organization	(b) Primary activi	ty Legal do	(c) (d) nicile (state in country) (d) Exempt Code section			(e) Public charity status (if section 501(c)(3))		(f) Direct controlling entity		(g) Section 512(b (13) controlled entity? Yes No	
(1)Duke University 2138 Campus Drive Durham, NC 27708 56-0532129	University		NC	501(c)(3)		Line 2				163	No
(2)The University of North Carolina University of North Carolina Chapel Hill, NC 27599	University		NC	501(c)(3)		Line 2					No
6-6-6001393 (3)RTI Post Retirement Health Benefits Trust RTI VEBA PO Box 12194	Retiree Health Bene	efits	NC	501(c)(9)				Research Tria	angle Institute	Yes	
Research Triangle Park, NC 27709 56-1855400											
For Paperwork Reduction Act Notice, see the Instructions for	Form 990.	C	at No 5013	5Y				Schedule	e R (Form 9	90) 20	18

(a) Name, address, and EIN of related organization			(d) Direct		ed, total income	(g) Share of	Disprop	rtionate		Code V-UBI General		
			controlling entity	unrelated, excluded from tax under sections 512		e end-of-year assets	alloca	tions?	20 of Schedule K-1		ging ov ier?	ownership
				514)			Yes	No		Yes	No	
												-
					l nization ans	 wered "Yes	" on F	orm 9	l 90, Part IV,	line	34	
,												
(b) Primary activity	L do (state	egal mıcıle or foreıgn				(f) Share of total Income		year	-of- Perce	ntage	€	(i) ion 512 control entity?
	Con	unici y)									Yes	s Ne
												+
												+
												+
												+
												$-\!\!\!\!-$
	ganizations treated as	(b) Primary activity Control of the control of th	Primary activity Primary activity Legal domicile (state or foreign country) Lions Taxable as a Corporation or Trus ganizations treated as a corporation or tru	Primary activity Primary acti	Primary activity Primary activity Legal domicile (state or foreign country) Predominant income (relate unrelated, excluded from tax under sections 512 514)	Primary activity Primary activity Legal domicile (state or foreign country) Direct controlling entity Predominant income(related, excluded from tax under sections 512-514)	Primary activity Primary activity Primary acti	Primary activity Primary activity Primary acti	Primary activity Primary activity Legal activity L	Primary activity Primary activity Activity Activity Complete Controlling Controlling	Primary activity Primary activity Complete Compl	Primary activity acti

Schedule R (Form 990) 2018

Part V Transactions With Related Organizations Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.										
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule										
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?										
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity										
b Gift, grant, or capital contribution to related organization(s)		1b	Yes							
c Gift, grant, or capital contribution from related organization(s)		1c		No						
d Loans or loan guarantees to or for related organization(s)		1 d	Yes							
e Loans or loan guarantees by related organization(s)		1e		No						
f Dividends from related organization(s)		1f		No						
g Sale of assets to related organization(s)	ľ	1 g		No						
h Purchase of assets from related organization(s)		1h		No						
i Exchange of assets with related organization(s)	İ	1i		No						
j Lease of facilities, equipment, or other assets to related organization(s)		1j		No						
k Lease of facilities, equipment, or other assets from related organization(s)		1k		No						
I Performance of services or membership or fundraising solicitations for related organization(s)		11	Yes							
m Performance of services or membership or fundraising solicitations by related organization(s)		1m	Yes							

j Lease of facilities, equipment, or other assets to related organization(s)	1j		No				
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No				
l Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes					
m Performance of services or membership or fundraising solicitations by related organization(s)							
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)							
o Sharing of paid employees with related organization(s)	10	Yes					
p Reimbursement paid to related organization(s) for expenses	1 p		No				
q Reimbursement paid by related organization(s) for expenses	1 q	Yes					

1r No 1s No 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds See Additional Data Table (a) Name of related organization (d) Method of determining amount involved (b) (c) Transaction Amount involved type (a-s)

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	section 501(c)(3) organizations?		(f) Share of total Income	of Share of end-of-year	(h) Disproprtionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
													_
									•	Schedul	e R (Forn	1 99	0) 2018



Software ID: Software Version:

EIN: 56-0686338

Name: Research Triangle Institute

Form 990, Schedule R, Part IV - Ide	ntification of Related	d Organizations	Taxable as a Co	rporation or Tre	ust				
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(c) (d) (e) (f) (g) Legal domicile (state or foreign Direct controlling entity Type of entity (C corp, S corp, or trust) Share of total income assets Share of end-of-year assets		(h) Percentage ownership	Sectio (b)(contr enti	n 512 13) folled ity?		
(1)		,		_				Yes	No
(1) Research Triangle Institute International (Hong Kong) Limited 15 Queens Road Central Central HK	Investment Company	нк	Research Triangle Institute	С		949,102	100 000 %	Yes	
(1) Triangle Beijing Consulting Co Ltd Beijing Prosper Centre No 5 Guang Beijing 100020 CH	Scientific research and development	СН	Research Triangle Institute	С		266,605	100 000 %	Yes	
(2) Research Triangle Institute Global Inc 3040 Cornwallis Road Research Triangle Park, NC 27709 47-2500213	Scientific research and development	NC	Research Triangle Institute	С		1,016	100 000 %	Yes	
(3) Research Triangle Institute Global India Private Limited F22 667 IIND Floor Ganesh Nagar II New Delhi 110092 IN	Scientific research and development	IN	Research Triangle Institute	С	2,116,933	1,448,266	99 990 %	Yes	
(4) RTI Syntegrity Inc 3040 Cornwallis Road Research Triangle Park, NC 27709 81-2649493	Business Services	NC	Research Triangle Institute	С	964,182	12,364,203	100 000 %	Yes	
(5) Team Syntegrity Americas Inc 181 Bay Street Suite 2425 Toronto, Ontario M5J 2T3 CA 98-1017378	Consulting	CA	RTI Syntegrity Inc	С			100 000 %	Yes	
(6) International Resources Group Ltd 3040 Cornwallis Road Research Triangle Park, NC 27709 11-2777542	Consulting	NC	Research Triangle Institute	С	12,259,576	7,897,233	100 000 %	Yes	
(7) Grupo Internacional de Recursos del Sur I R G Socidedad Anonima De La Emhajada Americana Un Kilomet San Jose Rohrmose CS	Services	cs	International Resources Group Ltd	c			100 000 %	Yes	
(8) International Resources Group Philippines Inc 32A Rufino Tower VA Rufino St Makati City, Manila RP	Services	RP	International Resources Group Ltd	С			99 990 %	Yes	

(a) (b) (c) Name of related organization Amount Involved (d) Transaction Method of determining amount involved type(a-s) Cash Value (1) Research Triangle Institute Global India Private Limited В 2,906,977 (1) Team Syntegrity Americas Inc 2,650,000 Cash Value (2) RTI Post Retirement Health Benefits Trust RTI VEBA Q 1.800.501 Cash Value (3) Research Triangle Institute Global India Private Limited 116,696 Cash Value (4)International Resources Group Ltd 185,734 Cash Value Team Syntegrity Americas Inc D 800,000 Cash Value (5)

74,988

Cash Value

Form 990, Schedule R, Part V - Transactions With Related Organizations

(6)

Team Syntegrity Americas Inc