

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2021 calendar year, or tax year beginning _____ **and ending** _____

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE ASPEN INSTITUTE, INC.		D Employer identification number 84-0399006
	Doing business as		E Telephone number (202) 736-5800
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	2300 N STREET, NW		G Gross receipts \$ 479,307,525.
	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20037		
F Name and address of principal officer: DANIEL R. PORTERFIELD SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number ▶	

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.ASPENINSTITUTE.ORG

K Form of organization: Corporation Trust Association Other ▶ **L Year of formation:** 1949 **M State of legal domicile:** CO

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE ASPEN INSTITUTE IS A PEOPLE-SERVING ORGANIZATION THAT WORKS WITH PARTNERS ACROSS THE		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	65
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	64
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	720
	6 Total number of volunteers (estimate if necessary)	6	95
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	10,637,859.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	131,254,703.	140,695,602.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	17,868,195.	28,586,934.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,961,152.	1,822,532.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	178,771.	141,618.
		151,262,821.	171,246,686.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	16,945,859.	18,858,005.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	65,246,455.	69,925,233.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 3,610,042.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	46,933,372.	54,990,527.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	129,125,686.	143,773,765.	
19 Revenue less expenses. Subtract line 18 from line 12	22,137,135.	27,472,921.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	394,226,132.	465,514,933.
	22 Net assets or fund balances. Subtract line 21 from line 20	41,995,580.	53,081,498.
	352,230,552.	412,433,435.	

Part II 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.

Sign Here	Signature of officer		Date		
	DANIEL R. PORTERFIELD, PRESIDENT/CEO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name AARON M. FOX	Preparer's signature 	Date 09/30/22	Check if self-employed <input type="checkbox"/>	PTIN P01365820
	Firm's name ▶ MARCUM LLP	Firm's EIN ▶ 11-1986323	Phone no. (202) 227-4000		
	Firm's address ▶ 1899 L STREET, NW, SUITE 850 WASHINGTON, DC 20036				

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE ASPEN INSTITUTE IS A PEOPLE-SERVING ORGANIZATION THAT WORKS WITH PARTNERS ACROSS THE UNITED STATES AND AROUND THE WORLD TO BUILD A FREE, JUST, AND EQUITABLE SOCIETY. THE INSTITUTE CREATES POSITIVE CHANGE BY INSPIRING INCLUSIVE DIALOGUE AND EMPOWERING LEADERS TO SOLVE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 73,099,258. including grants of \$ 18,012,766.) (Revenue \$ 13,099,707.) POLICY PROGRAMS: THE ASPEN INSTITUTE'S POLICY PROGRAMS EXPLORE AND IDENTIFY SOLUTIONS FOR PROBLEMS RANGING FROM ECONOMIC DISTRESS TO EDUCATIONAL OPPORTUNITY, FROM CLIMATE CHANGE TO RACIAL DISPARITIES, IN AN EFFORT TO INFLUENCE DECISION-MAKERS IN THE PUBLIC AND PRIVATE SECTORS TO ADVANCE THE BEST AND MOST INSPIRED PROPOSALS. OUR POLICY PROGRAMS RANGE IN SIZE FROM \$100,000 TO \$15 MILLION IN ANNUAL REVENUE AND EXPENSES.

4b (Code:) (Expenses \$ 12,074,317. including grants of \$) (Revenue \$ 60,501.) CAMPUS ACTIVITIES: IN ADDITION TO ITS HEADQUARTERS IN WASHINGTON, DC, THE ASPEN INSTITUTE ALSO CONDUCTS MUCH OF ITS WORK ON ITS FOUNDING CAMPUS IN ASPEN, COLORADO, WHICH PROVIDES NATURAL BEAUTY AND QUIET SURROUNDINGS THAT ENCOURAGE THOUGHTFUL REFLECTION THAT REFRESHES MIND, BODY AND SPIRIT. ONE OF OUR PROGRAMS THAT USE THE CAMPUS IS OUR ASPEN SEMINAR WHICH CHALLENGES INDIVIDUALS TO THINK MORE DEEPLY, LISTEN MORE ATTENTIVELY, AND REFINE THEIR ABILITY TO LEAD IN AN INCREASINGLY COMPLEX AND CONFLICTING WORLD. SEMINAR PARTICIPANTS ENGAGE IN CHALLENGING CONVERSATIONS ABOUT ENDURING QUESTIONS OF ETHICAL AND EFFECTIVE LEADERSHIP, GAINING A GREATER CAPACITY TO LEAD WITH COURAGE AND CONVICTION.

4c (Code:) (Expenses \$ 6,856,285. including grants of \$ 291,255.) (Revenue \$ 107,688.) ASPEN GLOBAL LEADERSHIP NETWORK: THE ASPEN GLOBAL LEADERSHIP NETWORK IS A GROWING, WORLDWIDE COMMUNITY OF ENTREPRENEURIAL LEADERS FROM BUSINESS, GOVERNMENT, AND THE NONPROFIT SECTOR DRAWING FROM FELLOWS IN OVER 60 COUNTRIES WHO SHARE A COMMITMENT TO ENLIGHTENED LEADERSHIP AND TO USING THEIR EXTRAORDINARY CREATIVITY, ENERGY, AND RESOURCES TO TACKLE THE FOREMOST SOCIETAL CHALLENGES OF OUR TIMES. ALL HAVE PARTICIPATED IN THE FLAGSHIP HENRY CROWN FELLOWSHIP OR IN ONE OF THE DOZEN ASPEN INSTITUTE LEADERSHIP INITIATIVES IT HAS INSPIRED IN THE UNITED STATES, AFRICA, CHINA, CENTRAL AMERICA, INDIA, AND THE MIDDLE EAST. EACH SUMMER, THE NETWORK GATHERS TO RECONNECT AND RECOMMIT TO ACTION AT THE ANNUAL RESNICK ASPEN ACTION FORUM IN ASPEN, COLORADO.

4d Other program services (Describe on Schedule O.) (Expenses \$ 20,382,851. including grants of \$ 553,984.) (Revenue \$ 6,328,121.)

4e Total program service expenses 112,412,711.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and schedules.



Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 22-38. Includes questions about grants, compensation, tax-exempt bonds, excess benefit transactions, and contributions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

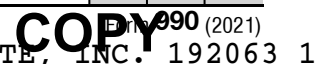
Check if Schedule O contains a response or note to any line in this Part V

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 1a, 1b, 1c. Includes questions about Form 1096, Forms W-2G, and backup withholding rules.



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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and various organizational requirements.



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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (65); 1b Enter the number of voting members included on line 1a, above, who are independent (64); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (X); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X); b Each committee with authority to act on behalf of the governing body? (X); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O (X).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (X); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (X); 11b Describe on 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 (X); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done (X); 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (X); b Other officers or key employees of the organization (X); If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, FL, GA, IL, KS, KY
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records ASPEN INSTITUTE/JENNIFER JONES - 410-353-3226 2300 N STREET, NW, 700, WASHINGTON, DC 20037



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

Check if Schedule O contains a response or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DANIEL PORTERFIELD PRESIDENT & CEO	40.00	X		X				643,984.	0.	54,772.
(2) ELLIOT GERSON EXECUTIVE VP	40.00			X				450,891.	0.	59,501.
(3) NAMITA KHASAT CFO/CAO/TREASURER	40.00			X				408,234.	0.	56,757.
(4) DAVID LANGSTAFF EXEC VICE PRESIDENT	40.00			X				353,857.	0.	56,959.
(5) STEPHEN PATRICK EXECUTIVE DIRECTOR	40.00					X		330,683.	0.	65,825.
(6) JANE WALES VP, EXECUTIVE DIRECTOR	40.00					X		350,780.	0.	45,542.
(7) ANN MOSLE VP, EXECUTIVE DIRECTOR	40.00					X		327,672.	0.	65,832.
(8) VIVIAN SCHILLER EXECUTIVE DIRECTOR	40.00					X		346,379.	0.	44,924.
(9) ERIKA MALLIN EXECUTIVE DIRECTOR	40.00					X		349,830.	0.	34,697.
(10) MARIA ACEBAL VP STRATEGIC DEV CORP SECRETARY	40.00			X				278,458.	0.	46,876.
(11) ERIC MOTLEY EVP, CORP SECRETARY - UNTIL 08/2021	40.00			X				280,415.	0.	39,197.
(12) JAMES SCHINE CROWN CHAIRMAN	1.00	X		X				0.	0.	0.
(13) WILLIAM E. MAYER TRUSTEE	1.00	X		X				0.	0.	0.
(14) JEFFREY S. ARONIN TRUSTEE	1.00	X						0.	0.	0.
(15) DONNA BARKSDALE TRUSTEE	1.00	X						0.	0.	0.
(16) MERCEDES BASS TRUSTEE	1.00	X						0.	0.	0.
(17) MIGUEL (MIKE) BEZOS TRUSTEE	1.00	X						0.	0.	0.



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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) LAWRENCE BOBO TRUSTEE	1.00	X						0.	0.	0.
(19) RICHARD BRADDOCK TRUSTEE	1.00	X						0.	0.	0.
(20) BETH BROOKE TRUSTEE	1.00	X						0.	0.	0.
(21) WILLIAM BYNUM TRUSTEE	1.00	X						0.	0.	0.
(22) STEPHEN L. CARTER TRUSTEE	1.00	X						0.	0.	0.
(23) TROY CARTER TRUSTEE	1.00	X						0.	0.	0.
(24) CESAR R. CONDE TRUSTEE	1.00	X						0.	0.	0.
(25) PHYLLIS COULTER TRUSTEE	1.00	X						0.	0.	0.
(26) KATIE COURIC TRUSTEE	1.00	X						0.	0.	0.
1b Subtotal								4,121,183.	0.	570,882.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								4,121,183.	0.	570,882.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 216

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
TENANT IMPROVEMENT SPECIALISTS 713 EAST 23RD STREET, CARSON, CA 90745	CONSTRUCTION SERVICES	8,463,267.
BRAIN SOURCE INTERNATIONAL, 42-44 BISHOPSGATE, LONDON, UNITED KINGDOM EC2N	STAFFING AND PAYROLL SERVICES	1,268,182.
EPLUS TECHNOLOGY, INC., 1595 DULLES TECHNOLOGY DRIVE, HERNDON, VA 20171	IT SYSTEMS AND SUPPORT	627,215.
ROWLAND BROUGHTON ARCHITECTURE AND URBAN DE 500 WEST MAIN STREET, ASPEN, CO 81611	ARCHITECTURAL SERVICES FOR CONSTRUCTION	448,626.
SPITFIRE STRATEGIES, LLC 2300 N STREET NW, WASHINGTON, DC 20037	COMMUNICATIONS CONSULTING & MANAGEMENT	388,351.

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 24

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) ANDREA CUNNINGHAM TRUSTEE	1.00	X					0.	0.	0.	
(28) KENNETH L. DAVIS, MD TRUSTEE	1.00	X					0.	0.	0.	
(29) JOHN DOERR TRUSTEE	1.00	X					0.	0.	0.	
(30) THELMA DUGGIN TRUSTEE	1.00	X					0.	0.	0.	
(31) ARNE DUNCAN TRUSTEE	1.00	X					0.	0.	0.	
(32) MICHAEL D. EISNER TRUSTEE	1.00	X					0.	0.	0.	
(33) L. BROOKS ENTWISTLE TRUSTEE	1.00	X					0.	0.	0.	
(34) ELIZABETH FLEMING TRUSTEE	1.00	X					0.	0.	0.	
(35) ROGER FERGUSON TRUSTEE	1.00	X					0.	0.	0.	
(35) ANN B. FRIEDMAN TRUSTEE - UNTIL 01/2021	1.00	X					0.	0.	0.	
(36) HENRY LOUIS GATES, JR. TRUSTEE	1.00	X					0.	0.	0.	
(36) RUSSELL GOLDSMITH TRUSTEE	1.00	X					0.	0.	0.	
(37) ANTONIO GRACIAS TRUSTEE	1.00	X					0.	0.	0.	
(38) PATRICK W. GROSS TRUSTEE	1.00	X					0.	0.	0.	
(39) ARJUN GUPTA TRUSTEE	1.00	X					0.	0.	0.	
(40) JANE HARMAN TRUSTEE	1.00	X					0.	0.	0.	
(41) KAYA HENDERSON TRUSTEE	1.00	X					0.	0.	0.	
(42) MARK HOPLAMAZIAN TRUSTEE	1.00	X					0.	0.	0.	
(43) GERALD D. HOSIER TRUSTEE	1.00	X					0.	0.	0.	
(44) ROBERT HURST TRUSTEE	1.00	X					0.	0.	0.	
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(45) SONIA KAPADIA TRUSTEE	1.00	X						0.	0.	0.
(46) MICHAEL KLEIN TRUSTEE	1.00	X						0.	0.	0.
(46) KELI LEE TRUSTEE	1.00	X						0.	0.	0.
(47) LAURA LAUDER TRUSTEE	1.00	X						0.	0.	0.
(48) MELONY LEWIS TRUSTEE	1.00	X						0.	0.	0.
(50) JAMES M. MANYIKA TRUSTEE	1.00	X						0.	0.	0.
(51) CRAIG MARTIN TRUSTEE	1.00	X						0.	0.	0.
(52) BONNIE PALMER MCCLOSKEY TRUSTEE	1.00	X						0.	0.	0.
(53) DAVID MCCORMICK TRUSTEE - UNTIL 11/2021	1.00	X						0.	0.	0.
(54) ANNE WELSH MCNULTY TRUSTEE	1.00	X						0.	0.	0.
(55) DIANE L. MORRIS TRUSTEE	1.00	X						0.	0.	0.
(56) KARLHEINZ MUHR TRUSTEE	1.00	X						0.	0.	0.
(57) CLARE MUNANA TRUSTEE	1.00	X						0.	0.	0.
(58) JERRY MURDOCK TRUSTEE	1.00	X						0.	0.	0.
(59) MARC NATHANSON TRUSTEE	1.00	X						0.	0.	0.
(60) WILLIAM A. NITZE TRUSTEE - UNTIL 07/2021	1.00	X						0.	0.	0.
(61) HER MAJESTY QUEEN NOOR TRUSTEE	1.00	X						0.	0.	0.
(62) JACQUELINE NOVOGRATZ TRUSTEE	1.00	X						0.	0.	0.
(63) OLARA A. OTUNNU TRUSTEE	1.00	X						0.	0.	0.
(64) ELAINE PAGELS TRUSTEE	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	1,115,907.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	4,500,898.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	135,078,797.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 10,448,358.				
	h Total. Add lines 1a-1f			140,695,602.			
Program Service Revenue	2 a CONTRACT REVENUE	Business Code					
		900099	17,079,149.	17,079,149.			
	b CONF./FACILITY FEES	531390	8,990,917.		8,990,917.		
	c SEMINAR AND EVENT FEES	900099	2,515,732.	2,515,732.			
	d BOOK SALES	900099	1,136.	1,136.			
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f			28,586,934.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		907,211.		1,611,202.	-703,991.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real	132,559.			
			(ii) Personal				
				125,624.			
	b Less: rental expenses	6b	6,935.				
	c Rental income or (loss)	6c		6,935.		6,935.	
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	307,961,739.	291,428.		
			(ii) Other				
				307,066,996.	270,850.		
	b Less: cost or other basis and sales expenses	7b	894,743.	20,578.			
	c Gain or (loss)	7c		915,321.		915,321.	
	d Net gain or (loss)						
8 a Gross income from fundraising events (not including \$ 1,115,907. of contributions reported on line 1c). See Part IV, line 18	8a		28,130.				
			597,369.				
b Less: direct expenses	8b		-569,239.		-569,239.		
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a OTHER INCOME	Business Code					
		900099	364,790.			364,790.	
	b SUBLEASE INCOME	900099	303,392.			303,392.	
	c ADVERTISING INCOME	541800	35,740.		35,740.		
	d All other revenue						
e Total. Add lines 11a-11d			703,922.				
12 Total revenue. See instructions			171,246,686.	19,596,017.	10,637,859.	317,208.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	13,662,257.	13,662,257.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	778,444.	778,444.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	4,417,304.	4,417,304.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,729,901.	433,833.	2,136,261.	159,807.
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	53,239,622.	40,190,913.	10,868,319.	2,180,390.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,276,778.	3,639,578.	423,731.	213,469.
9 Other employee benefits	4,618,403.	3,393,844.	923,765.	300,794.
10 Payroll taxes	5,060,529.	4,739,572.	161,786.	159,171.
11 Fees for services (nonemployees):				
a Management	10,291,120.	10,291,120.		
b Legal	453,729.	299,356.	154,373.	
c Accounting	142,947.		142,947.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	1,200,594.		1,200,594.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	22,337,210.	17,922,591.	4,272,396.	142,223.
12 Advertising and promotion				
13 Office expenses	3,032,028.	2,248,163.	728,062.	55,803.
14 Information technology	983,787.	711,872.	251,278.	20,637.
15 Royalties				
16 Occupancy	5,920,843.	3,586,777.	2,157,519.	176,547.
17 Travel	3,742,433.	3,399,639.	326,928.	15,866.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...	167,410.	167,410.		
19 Conferences, conventions, and meetings				
20 Interest	62,783.	62,783.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	3,280,847.		3,280,847.	
23 Insurance	424,469.	438.	424,031.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a PARTNER REIMBURSEMENTS	1,205,584.	1,205,584.		
b PUBLICATIONS	964,579.	912,011.	45,387.	7,181.
c REPAIRS AND MAINTENANCE	398,141.	145,353.	252,788.	
d BAD DEBT	382,023.	203,869.		178,154.
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	143,773,765.	112,412,711.	27,751,012.	3,610,042.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)



Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	7,143,777.	1	15,569,294.
	2 Savings and temporary cash investments	26,098,145.	2	20,005,043.
	3 Pledges and grants receivable, net	40,677,134.	3	49,885,211.
	4 Accounts receivable, net	25,416,890.	4	6,960,249.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	138,867.	8	283,265.
	9 Prepaid expenses and deferred charges	1,662,165.	9	2,147,646.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 135,038,341.		
	b Less: accumulated depreciation	10b 58,459,221.		
	11 Investments - publicly traded securities	69,191,910.	10c	76,579,120.
	12 Investments - other securities. See Part IV, line 11	32,770,950.	11	75,643,810.
	13 Investments - program-related. See Part IV, line 11	188,820,548.	12	215,765,025.
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	2,305,746.	14	
16 Total assets. Add lines 1 through 15 (must equal line 33)	394,226,132.	15	2,676,270.	
		16	465,514,933.	
Liabilities	17 Accounts payable and accrued expenses	11,901,598.	17	13,594,228.
	18 Grants payable	2,359,126.	18	1,916,128.
	19 Deferred revenue	6,737,446.	19	12,033,695.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	3,780,000.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	20,997,410.	25	21,757,447.
	26 Total liabilities. Add lines 17 through 25	41,995,580.	26	53,081,498.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	136,758,015.	27	157,173,863.
	28 Net assets with donor restrictions	215,472,537.	28	255,259,572.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	352,230,552.	32	412,433,435.
33 Total liabilities and net assets/fund balances	394,226,132.	33	465,514,933.	

Form 990 (2021)

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	171,246,686.
2	Total expenses (must equal Part IX, column (A), line 25)	2	143,773,765.
3	Revenue less expenses. Subtract line 2 from line 1	3	27,472,921.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	352,230,552.
5	Net unrealized gains (losses) on investments	5	32,537,736.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-3,000.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	195,226.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	412,433,435.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____
- 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 on Schedule O and describe any steps taken to undergo such audits _____

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form **990** (2021)

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

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

Section A. Public Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f); 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 7 Amounts from line 4; 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 Other income. Do not include gain or 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, etc. (see instructions); 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Line number, Percentage, and Description. Rows include: 14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)); 15 Public support percentage from 2020 Schedule A, Part II, line 14; 16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization; b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization; 17a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization; b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization; 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

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

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

Section A. Public Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support.

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2020 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2020 Schedule A, Part III, line 17 18%.

19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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? Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.**
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990) 2021

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2021		
a	From 2016		
b	From 2017		
c	From 2018		
d	From 2019		
e	From 2020		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2021 distributable amount		
i	Carryover from 2016 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2021 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2021 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2022. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2017		
b	Excess from 2018		
c	Excess from 2019		
d	Excess from 2020		
e	Excess from 2021		

Schedule A (Form 990) 2021

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.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER INCOME

2017 AMOUNT: \$ 434,052.

2018 AMOUNT: \$ 443,054.

2019 AMOUNT: \$ 799,478.

2020 AMOUNT: \$ 156,060.

2021 AMOUNT: \$ 394,530.

COPY

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2021

Name of the organization

THE ASPEN INSTITUTE, INC.

Employer identification number

84-0399006

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization THE ASPEN INSTITUTE, INC.	Employer identification number 84-0399006
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 16,313,650.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 8,131,571.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 7,225,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 6,025,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ 5,400,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ 5,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

COPY

Name of organization THE ASPEN INSTITUTE, INC.	Employer identification number 84-0399006
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ 4,593,588.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ 3,652,965.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/>	\$ 3,552,997.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	<hr/> <hr/> <hr/>	\$ 3,281,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	<hr/> <hr/> <hr/>	\$ 3,075,350.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	<hr/> <hr/> <hr/>	\$ 3,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

COPY

Name of organization THE ASPEN INSTITUTE, INC.	Employer identification number 84-0399006
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	<hr/> <hr/> <hr/>	\$ 3,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	<hr/> <hr/> <hr/>	\$ 2,999,215.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

COPY

Name of organization THE ASPEN INSTITUTE, INC.	Employer identification number 84-0399006
--	---

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	1,605 SHARES OF AMAZON (AMZN) _____ _____ _____	\$ 5,048,897.	05/26/21
14	11,000 SHARES OF JOHNSON & JOHNSON _____ _____ _____	\$ 1,769,174.	02/22/21
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____



Name of organization THE ASPEN INSTITUTE, INC.	Employer identification number 84-0399006
--	--

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	



SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
 ► **Complete if the organization is described below.** ► **Attach to Form 990 or Form 990-EZ.**
 ► **Go to www.irs.gov/Form990 for instructions and the latest information.**

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <p style="text-align: center;">THE ASPEN INSTITUTE, INC.</p>	Employer identification number <p style="text-align: center;">84-0399006</p>
--	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ► \$ _____
- 3 Volunteer hours for political campaign activities _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ► \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990) 2021

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Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.															
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2021

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.			
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		1,285.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			1,285.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	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).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
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	
5 Taxable amount of lobbying and political expenditures. See instructions	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

ALLOCATED SALARY EXPENSE FROM COMMUNICATION WITH LEGISLATORS REGARDING

PENDING LEGISLATION.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization THE ASPEN INSTITUTE, INC. **Employer identification number** 84-0399006

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2
b Total acreage restricted by conservation easements	263.88
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 ▶ _____ 2

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 violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports 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.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ 1,096,267.

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2021

COPY

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
a [X] Public exhibition
b [] Scholarly research
c [] Preservation for future generations
d [] Loan or exchange program
e [] Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? [] Yes [X] No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? [] Yes [] No
b If "Yes," explain the arrangement in Part XIII and complete the following table:
Table with columns: Amount, 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? [] Yes [] No
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII []

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 36.3143 %
b Permanent endowment 24.6738 %
c Term endowment 39.0119 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) Unrelated organizations
(ii) Related organizations

Table with 2 columns: Yes, No. Rows: 3a(i), 3a(ii), 3b.

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? []

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) INVESTMENT CONTRACT	1,227,786.	END-OF-YEAR MARKET VALUE
(B) LIMITED PARTNERSHIPS	214,537,239.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	215,765,025.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book 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 answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT AND LEASE INCENTIVE	13,972,765.
(3) DEFERRED COMPENSATION	7,711,589.
(4) CAPITAL LEASE OBLIGATIONS	56,093.
(5) DUE TO AFFILIATE	17,000.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	21,757,447.

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	203,443,337.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a 32,537,736.		
b	Donated services and use of facilities	2b 136,516.		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	32,674,252.
3	Subtract line 2e from line 1		3	170,769,085.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 1,200,594.		
b	Other (Describe in Part XIII.)	4b -722,993.		
c	Add lines 4a and 4b		4c	477,601.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	171,246,686.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	143,237,454.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a 136,516.		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d 527,767.		
e	Add lines 2a through 2d		2e	664,283.
3	Subtract line 2e from line 1		3	142,573,171.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 1,200,594.		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	1,200,594.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	143,773,765.

Part XIII Supplemental Information.

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

PART II, LINE 5:

THE INSTITUTE CONTINUES TO COMPLY WITH TERMS OF CONTRACT GOVERNING THE CONSERVATION EASEMENT HELD, WHICH INCLUDES PROTECTION OF NATURAL HABITAT.

PART II, LINE 9:

THE INSTITUTE HOLDS A CONSERVATION EASEMENT ON THE BALANCE SHEET AND THE CONTRIBUTED PARCEL OF LAND WAS BOOKED AS REVENUE FOR THE YEAR IT WAS GIFTED.

PART III, LINE 4:

AT OUR ASPEN MEADOWS CAMPUS, ASPEN, COLORADO, WE HAVE A LARGE COLLECTION OF ART THAT IS ON DISPLAY BOTH IN GALLERIES AND PUBLIC SPACES. IT IS

Part XIII Supplemental Information (continued)

ENJOYED BY GUESTS WHO VISIT AND STAY AT OUR RESORT. THIS ART COLLECTION IS
 MADE UP OF PHOTOS FROM FRANZ BERKO, OFFICIAL PHOTOGRAPHER FOR THE
 INSTITUTE, AS WELL AS ART IN VARIOUS MEDIUMS BY HERBERT BAYER. BAYER WAS
 THE ARCHITECT FOR OUR CAMPUS, AND ALSO DESIGNED SEVERAL OF THE LAND FORMS
 THROUGHOUT OUR PROPERTY. ONE GALLERY ON PROPERTY IS DEDICATED SOLELY TO
 THE WORK OF BAYER. ALTHOUGH THE ARTWORK IS HELD ON THE BOOKS AT COST, IT
 HAS AN INSURED FAIR VALUE OF \$3.1 MILLION.

PART V, LINE 4:

5% OF A 12 QUARTER ROLLING AVERAGE OF THE FUNDS ARE USED TO FUND
 PROGRAMMATIC WORK OF THE INSTITUTE.

PART X, LINE 2:

MANAGEMENT OF THE INSTITUTE BELIEVES THAT IT HAS NO MATERIAL UNCERTAINTY
 IN INCOME TAXES AND, ACCORDINGLY, IT WILL NOT RECOGNIZE ANY LIABILITY FOR
 UNRECOGNIZED TAXES IN ITS FINANCIAL STATEMENTS.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES	-597,369.
RENTAL EXPENSES	-125,624.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	-722,993.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES	597,369.
RENTAL EXPENSES	125,624.
REFUNDED GRANTS	-195,226.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	527,767.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization THE ASPEN INSTITUTE, INC.	Employer identification number 84-0399006
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Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES AND GRANTS TO RECIPIENTS LOCATED IN REGION.	GRANTS, MEETINGS AND PROGRAMMATIC ACTIVITIES.	296,065.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES AND GRANTS TO RECIPIENTS LOCATED IN REGION.	GRANTS, MEETINGS AND PROGRAMMATIC ACTIVITIES.	247,442.
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES AND GRANTS TO RECIPIENTS LOCATED IN REGION.	GRANTS, MEETINGS AND PROGRAMMATIC ACTIVITIES.	302,606.
NORTH AMERICA	0	0	PROGRAM SERVICES AND GRANTS TO RECIPIENTS LOCATED IN REGION.	GRANTS, MEETINGS AND PROGRAMMATIC ACTIVITIES.	258,997.
SOUTH AMERICA	0	0	PROGRAM SERVICES AND GRANTS TO RECIPIENTS LOCATED IN REGION.	GRANTS, MEETINGS AND PROGRAMMATIC ACTIVITIES.	1,036,460.
SOUTH ASIA	0	0	PROGRAM SERVICES AND GRANTS TO RECIPIENTS LOCATED IN REGION.	GRANTS, MEETINGS AND PROGRAMMATIC ACTIVITIES.	1,047,116.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES AND GRANTS TO RECIPIENTS LOCATED IN REGION.	GRANTS, MEETINGS AND PROGRAMMATIC ACTIVITIES.	1,228,618.
3 a Subtotal	0	0			4,417,304.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			4,417,304.

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

Schedule F (Form 990) 2021

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Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	CHAPTER OPERATIONS SUPPORT	365,387.	WIRE TRANSFER	0.		
		SOUTH AMERICA	SUPPORT GOYN INITIATIVE	353,500.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	SUPPORT CHAPTER OPERATIONS IN AFRICA	336,586.	WIRE TRANSFER	0.		
		SOUTH ASIA	CAPACITY PLANNING WORK, SUPPORT GOYN INITIATIVE	325,000.	WIRE TRANSFER	0.		
		SOUTH ASIA	CAPACITY PLANNING WORK, SUPPORT GOYN INITIATIVE	325,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	CAPACITY PLANNING WORK, SUPPORT GOYN INITIATIVE	325,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE PACIFIC	CHAPTER OPERATIONS SUPPORT	275,815.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	SUPPORT GOYN INITIATIVE	250,000.	WIRE TRANSFER	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **7**

3 Enter total number of other organizations or entities **25**

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	SUPPORT ACCELERATING WOMEN-LED VENTURES PROJECT	200,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	SUPPORT CHAPTER OPERATIONS IN BRAZIL	154,650.	WIRE TRANSFER	0.		
		NORTH AMERICA	SUPPORT CHAPTER OPERATIONS IN MEXICO	143,967.	WIRE TRANSFER	0.		
		SOUTH ASIA	CHAPTER OPERATIONS SUPPORT	135,739.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	STEVENS INITIATIVE CULTURAL EXCHANGE	129,182.	WIRE TRANSFER	0.		
		SOUTH ASIA	STEVENS INITIATIVE CULTURAL EXCHANGE	107,455.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	CAPACITY PLANNING WORK	100,000.	WIRE TRANSFER	0.		
		NORTH AMERICA	SUPPORT GOYN INITIATIVE	100,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	SUPPORT OPERATIONS IN COLUMBIA	94,446.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA	CHAPTER OPERATIONS SUPPORT	88,602.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	STEVENS INITIATIVE CULTURAL EXCHANGE	88,354.	WIRE TRANSFER	0.		
		SOUTH ASIA	CHAPTER OPERATIONS SUPPORT	78,923.	WIRE TRANSFER	0.		
		SOUTH ASIA	SUPPORT EQUITY AT THE LAST MILE INITIATIVE	75,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	ANDE CHAPTER SUPPORT GRANT	53,052.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	STEVENS INITIATIVE CULTURAL EXCHANGE	47,419.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	CHAPTER OPERATIONS SUPPORT	42,997.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	SUPPORT PARTNERSHIPS FOR INCLUSIVE AND SUSTAINABLE SMALL AND GROWING BUSINESSES	42,692.	WIRE TRANSFER	0.		
		MIDDLE EAST AND NORTH AFRICA	STEVENS INITIATIVE CULTURAL EXCHANGE	36,088.	WIRE TRANSFER	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	AGORA PARTICIPATION AWARD	24,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	SUPPORT ACCELERATING WOMEN-LED VENTURES PROJECT	21,595.	WIRE TRANSFER	0.		
		SOUTH AMERICA	SUPPORT ACCELERATING WOMEN-LED VENTURES PROJECT	20,262.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	GLOBAL INCLUSIVE GROWTH SPARK GRANT	20,000.	WIRE TRANSFER	0.		
		NORTH AMERICA	MCNULTY PRIZE AWARD	15,030.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	MCNULTY GLOBAL RESPONSE FUND AWARD	15,000.	WIRE TRANSFER	0.		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
HONORARIUM	EAST ASIA AND THE PACIFIC	2	18,000.	WIRE TRANSFER	0.		
EVENT PARTICIPATION STIPEND	EAST ASIA AND THE PACIFIC	1	2,250.	WIRE TRANSFER	0.		
HONORARIUM	EUROPE (INCLUDING ICELAND AND GREENLAND)	3	1,000.	WIRE TRANSFER	0.		
HONORARIUM	MIDDLE EAST AND NORTH AFRICA	3	1,563.	WIRE TRANSFER	0.		

Part IV 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

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Part V Supplemental 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.

PART I, LINE 2:

THE INSTITUTE PERIODICALLY ENGAGES OTHER ENTITIES TO FURTHER THE OBJECTIVES SET FORTH IN OUR GRANT AGREEMENTS. THIS IS TYPICALLY DONE VIA SUB-AWARDS OR RE-GRANTS THAT RUN CONCURRENTLY WITH THE PRIME AWARD IN WHICH THE SUB RECIPIENTS ARE ADVISED OF ALL APPLICABLE LAWS AND REGULATIONS, AND ALL APPROPRIATE FLOW-DOWN PROVISIONS FROM THE PRIME AGREEMENT. ALL SUB GRANTEEES OR SERVICE PROVIDERS MUST ALSO CERTIFY THAT THEY DO NOT AND WILL NOT KNOWINGLY PROVIDE MATERIAL SUPPORT OR RESOURCES TO ANY INDIVIDUAL OR ENTITY INVOLVED WITH TERRORISM (INCLUDING ANY INDIVIDUALS, ENTITIES, OR GROUPS SUBJECT TO OFAC SANCTIONS) OR TO ANYONE WHO ACTS AS AN AGENT FOR SUCH AN INDIVIDUAL OR ENTITY. ANY VIOLATION OF THIS CERTIFICATION MUST BE GROUNDS FOR IMMEDIATE TERMINATION OF THE LETTER OF AGREEMENT AND RETURN OF ALL GRANT FUNDS.

THE FREQUENCY AND SCOPE OF THE RESEARCH PROGRAM'S MONITORING PROCEDURES ARE DETERMINED JOINTLY BY THE RESPONSIBLE PROGRAM MANAGER AND RESPECTIVE GRANT ADMINISTRATOR/FINANCIAL ANALYST. THIS INCLUDES THE ROUTINE RECEIPT AND REVIEW OF THE NARRATIVE AND FINANCIAL REPORTS, A REVIEW OF EXPENSES TO BUDGET, THE OPTION TO PERFORM AUDITS, AND ALLOWS FOR THE PERFORMANCE OF SITE VISITS IF NECESSARY. THE INSTITUTE IS NOTIFIED WHENEVER PROBLEMS, DELAYS OR OTHER CONDITIONS DEVELOP WHICH WOULD HAVE SIGNIFICANT IMPACT UPON THE PROJECT. BUDGET REVISIONS ARE ALLOWED WITHIN THE PARAMETERS SET FORTH IN EACH SUB AWARD. THE PAYMENT SCHEDULE AND THE DEGREE OF FLEXIBILITY OFFERED MAY DEPEND ON PREVIOUS EXPERIENCE WITH THE RECIPIENT, THE DEGREE OF EXTERNAL OVERSIGHT BY OTHER PARTIES, AND THE SOPHISTICATION OF THE RECIPIENT'S ADMINISTRATIVE SYSTEMS.

Part V Supplemental 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.

PARTICIPANTS ARE EXPECTED TO COMPLY WITH ALL RELEVANT U.S. LAWS. PRIOR TO

ISSUING AWARDS TO FOREIGN ENTITIES, THE PROGRAMS ARE BEING ASKED TO

COMPLETE A DUE DILIGENCE CHECKLIST, WHICH INCLUDES ADDITIONAL INFORMATION

ABOUT THE SUB RECIPIENT INCLUDING: ANY REASONABLY AVAILABLE HISTORICAL

INFORMATION ABOUT THE GRANTEE THAT ASSURES THE INSTITUTE OF THE GRANTEE'S

IDENTITY AND INTEGRITY SUCH AS THE JURISDICTION IN WHICH A GRANTEE

ORGANIZATION IS INCORPORATED OR FORMED; COPIES OF INCORPORATING OR OTHER

GOVERNING INSTRUMENTS; INFORMATION ON THE INDIVIDUALS WHO FORMED AND

OPERATE THE ORGANIZATION; AND INFORMATION RELATING TO THE GRANTEE'S

OPERATING HISTORY; THE GRANTEE OR SERVICE PROVIDER'S NAME IN ENGLISH, AND

THE LANGUAGE OF ORIGIN, AND ANY ACRONYM OR OTHER NAMES USED TO IDENTIFY

THE GRANTEE; THE JURISDICTIONS IN WHICH A GRANTEE OR SERVICE PROVIDER

MAINTAINS A PHYSICAL PRESENCE; THE GRANTEE OR SERVICE PROVIDER'S POSTAL,

EMAIL AND WEBSITE ADDRESSES AND PHONE NUMBERS FOR EACH PLACE OF BUSINESS.

THE INSTITUTE ALSO CONDUCTS A REASONABLE SEARCH OF PUBLICLY AVAILABLE

INFORMATION TO DETERMINE WHETHER THE GRANTEE OR SERVICE PROVIDER IS

SUSPECTED OF ACTIVITY RELATING TO TERRORISM, INCLUDING TERRORIST

FINANCING OR OTHER SUPPORT.

PART I, LINE 3:

THE CASH METHOD OF ACCOUNTING WAS USED TO ACCOUNT FOR FOREIGN

EXPENDITURES.

PART II, COLUMN (D):

REGION: EUROPE (INCLUDING ICELAND & GREENLAND)

(D) PURPOSE OF GRANT: SUPPORT PARTNERSHIPS FOR INCLUSIVE AND SUSTAINABLE

SMALL AND GROWING BUSINESSES INITIATIVE

Part V Supplemental 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.

PART III, COL (C):

THIS COLUMN REPRESENTS THE ACTUAL NUMBER OF GRANT RECIPIENTS.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		SUMMER CELEBRATION (event type)	SOCRATES BENEFIT DINNER (event type)	2 (total number)		
Revenue	1	Gross receipts	431,842.	349,127.	363,068.	1,144,037.
	2	Less: Contributions	424,112.	333,127.	358,668.	1,115,907.
	3	Gross income (line 1 minus line 2)	7,730.	16,000.	4,400.	28,130.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	111.		54,094.	54,205.
	7	Food and beverages	31,779.	34,278.		66,057.
	8	Entertainment	1,016.		1,216.	2,232.
	9	Other direct expenses	209,478.	78,177.	187,220.	474,875.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				597,369.
11	Net income summary. Subtract line 10 from line 3, column (d)				-569,239.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization **THE ASPEN INSTITUTE, INC.** Employer identification number **84-0399006**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ITHAKA HARBORS INC 2 RECTOR STREET NEW YORK, NY 10006	13-3857105	501(C)(3)	741,000.	0.			COLLABORATION IN THE AMERICAN TALENT INITIATIVE
SOLIYA INC 261 MADISON AVENUE, 9TH FLOOR NEW YORK, NY 10016	32-0060209	501(C)(3)	641,157.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
ALAMO COMMUNITY COLLEGE DISTRICT 2222 NORTH ALAMO STREET SAN ANTONIO, TX 78215	74-6002173	501(C)(3)	600,000.	0.			ASPEN PRIZE AWARD WINNER
EQUAL MEASURE 520 WALNUT STREET, SUITE 1450 PHILADELPHIA, PA 19106	23-2694572	501(C)(3)	557,010.	0.			SUPPORT OYF ASPEN FORUM, WORK IN THE ASPEN CRIMINAL JUSTICE REFORM INITIATIVE
BOSTON PRIVATE INDUSTRY COUNCIL INC - 2 OLIVER STREET, 3RD FLOOR - BOSTON, MA 02109	04-2676661	501(C)(3)	550,000.	0.			FORUM IN YOUTH-LED CHANGE
ALLIANCE FOR CHILDRENS RIGHTS 3333 WILSHIRE BOULEVARD SUITE 550 LOS ANGELES, CA 90010	95-4358213	501(C)(3)	450,000.	0.			BUILDING ECOSYSTEMS FOR YOUTH OPPORTUNITY IMPLEMENTATION

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 87.

3 Enter total number of other organizations listed in the line 1 table ▶ 0.

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

Schedule I (Form 990) 2021

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL NOMADS GROUP 132 NASSAU STREET, SUITE 822 NEW YORK, NY 10038	75-2750127	501(C)(3)	438,853.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
INTERNATIONAL RESEARCH AND EXCHANGES BOARD INC - 1275 K STREET, NW, SUITE 600 - WASHINGTON, DC 20005	22-3087809	501(C)(3)	425,212.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
WORLD LEARNING INC 1 KIPLING ROAD, PO BOX 676 BRATTLEBORO, VT 05302	03-0179592	501(C)(3)	408,270.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
THE BOARD OF TRUSTEES OF THE LELAND STANFORD JUNIOR UNIVERSITY - 3145 PORTER DRIVE, SUITE 142 - PALO ALTO, CA 94304	94-1156365	501(C)(3)	402,564.	0.			ASPEN RISING PRESIDENTS FELLOWSHIP
ALLIANCE OF COMMUNITY ASSISTANCE MINISTRIES, INC. - 710 NORTH POST OAK ROAD, SUITE 210 - HOUSTON, TX 77024	27-5410988	501(C)(3)	300,000.	0.			BUILDING ECOSYSTEMS FOR YOUTH OPPORTUNITY IMPLEMENTATION
TIDES CENTER 1012 TORNEY AVENUE SAN FRANCISCO, CA 94129	94-3213100	501(C)(3)	300,000.	0.			OYIF NETWORK BUILD NETWORK GRANT
YOUTHBUILD NEWARK 571 CENTRAL AVENUE, 2ND FLOOR NEWARK, NJ 07107	75-3187358	501(C)(3)	300,000.	0.			BUILDING ECOSYSTEMS FOR YOUTH OPPORTUNITY ACCELERATOR GRANT
CRITERION INSTITUTE, INC. 81 CHURCH HILL ROAD HADDAM, CT 06438	27-3458737	501(C)(3)	297,629.	0.			GLOBAL AFFAIRS CANADA GENDER LENS INVESTING
JUSTICE MAPPING CENTER 49 BAYVIEW AVENUE, GROUND FLOOR APARTMENT - PORT WASHINGTON, NY 11050	20-5537766	501(C)(3)	250,000.	0.			WORK IN THE ASPEN CRIMINAL JUSTICE REFORM INITIATIVE

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL DEVELOPMENT INCUBATOR INC 1634 I ST NW, SUITE 300 WASHINGTON, DC 20006	14-1945286	501(C)(3)	225,000.	0.			SUPPORT GOYN INITIATIVE
IMPACT ASSETS 4340 EAST WEST HIGHWAY BETHESDA, MD 20814	26-2048480	501(C)(3)	216,836.	0.			GLOBAL AFFAIRS CANADA GENDER LENS INVESTING
PHILADELPHIA YOUTH NETWORK 400 MARKET STREET, SUITE 200 PHILADELPHIA, PA 19106	23-2993155	501(C)(3)	200,000.	0.			COLLABORATION ON ECONOMIC OPPORTUNITIES PROGRAM REIMAGINE RETAIL PROJECT
COMMUNITY FOUNDATION OF GREATER BIRMINGHAM - 2100 FIRST AVE NORTH, SUITE 700 - BIRMINGHAM, AL 35203	63-1209631	501(C)(3)	184,380.	0.			SUPPORT OF THE INCLUSIVE AMERICA PROJECT
YOUTHBUILD USA INC 1785 COLUMBUS AVENUE, SUITE 500 ROXBURY, MA 02119	22-3076454	501(C)(3)	170,000.	0.			SUPPORT GOYN INITIATIVE
COMMUNITY CENTER FOR EDUCATION RESULTS - 1200 12TH AVENUE SOUTH, SUITE 701 - SEATTLE, WA 98144	27-1667560	501(C)(3)	168,957.	0.			OPPORTUNITY YOUTH REENGAGEMENT MEETINGS AND NETWORK PROVIDER CONVENINGS
CITY OF LONG BEACH 411 WEST OCEAN BOULEVARD LONG BEACH, CA 90802	95-6000733	GOVERNMENT	150,000.	0.			WORKING SUPPORT OF THE ASPEN POLICY ACCELERATION PARTNERSHIP GRANT
GEORGIA DEPARTMENT OF EARLY CARE AND LEARNING - 2 MARTIN LUTHER KING JR DR SE, SUITE 754 EAST TOWER - ATLANTA, GA 30334	58-2238669	GOVERNMENT	150,000.	0.			WORKING SUPPORT OF THE ASPEN POLICY ACCELERATION PARTNERSHIP GRANT
MINNESOTA OFFICE OF HIGHER EDUCATION - 1450 ENERGY PARK DRIVE, SUITE 350 - SAINT PAUL, MN 55108	41-6007162	GOVERNMENT	150,000.	0.			WORKING SUPPORT OF THE ASPEN POLICY ACCELERATION PARTNERSHIP GRANT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PENNSYLVANIA DEPARTMENT OF HUMAN SERVICES - PO BOX 2675 - HARRISBURG, PA 17105	23-6003113	GOVERNMENT	150,000.	0.			WORKING SUPPORT OF THE ASPEN POLICY ACCELERATION PARTNERSHIP GRANT
STATE BOARD FOR COMMUNITY COLLEGES AND OCCUPATIONAL EDUCATION - 9101 EAST LOWRY BOULEVARD - DENVER, CO 80230	38-3721881	GOVERNMENT	150,000.	0.			WORKING SUPPORT OF THE ASPEN POLICY ACCELERATION PARTNERSHIP GRANT
STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS - ONE CAPITAL HILL - PROVIDENCE, RI 02908	05-6000522	GOVERNMENT	150,000.	0.			WORKING SUPPORT OF THE ASPEN POLICY ACCELERATION PARTNERSHIP GRANT
VILCAP INC 1101 K STREET NW, SUITE 920 WASHINGTON, DC 20005	27-4059343	501(C)(3)	149,963.	0.			ADVANCING WOMEN'S EMPOWERMENT CATALYST FUND
JOBS FOR THE FUTURE INC 88 BROAD STREET, 8TH FLOOR BOSTON, MA 02110	06-1164568	501(C)(3)	136,000.	0.			SUPPORT PARTICIPATION OF GLOBAL OPPORTUNITY YOUTH FORUM
THE WILLIAM DAVIDSON INSTITUTE AT THE UNIVERSITY OF MICHIGAN - 724 E UNIVERSITY AVENUE - ANN ARBOR, MI 48109	38-3048086	501(C)(3)	133,531.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
GAMES FOR CHANGE INC PO BOX 770699 WOODSIDE, NY 11377	26-2623362	501(C)(3)	130,042.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
ENACTUS US 3253 E CHESTNUT EXPRESSWAY SPRINGFIELD, MO 65802	74-2148471	501(C)(3)	120,818.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
BUILD COMMONWEALTH INC 22 BATTERYMARCH STREET, SUITE 501 BOSTON, MA 02109	04-3540147	501(C)(3)	120,000.	0.			RACIAL & GENDER WEALTH GAP IN AMERICA DATA

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INNER CITY EDUCATION FOUNDATION 3855 W SLAUSON AVENUE LOS ANGELES, CA 90043	95-4548521	501(C)(3)	120,000.	0.			REIMAGINING SCHOOL SPORTS CHARTER SCHOOL WINNER
INSTITUTE OF INTERNATIONAL EDUCATION - 809 UNITED NATIONS PLAZA - NEW YORK, NY 10017	13-1624046	501(C)(3)	118,903.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
MASSACHUSETTS INSTITUTE OF TECHNOLOGY - 77 MASSACHUSETTS AVENUE - CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	114,793.	0.			ADVANCING WOMEN'S EMPOWERMENT CATALYST FUND
FLORIDA INTERNATIONAL UNIVERSITY BOARD OF TRUSTEES - 11200 SW 8TH STREET CSC314 - MIAMI, FL 33199	65-0177616	501(C)(3)	114,639.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
AMERICAN ASSOCIATION STATE COLLEGES AND UNIVERSITIES - ONE DUPONT CIRCLE NW, SUITE 410 - WASHINGTON, DC 20036	53-0196569	501(C)(3)	110,000.	0.			SCALING PARTNERS CURRICULUM
WORKSOURCE GREATER AUSTIN AREA WORKFORCE BOARD - 9001 N IH 35, SUITE 110E - AUSTIN, TX 78753	74-2327454	501(C)(3)	105,000.	0.			GRANT TO SUPPORT AUSTIN OPPORTUNITY YOUTH COLLABORATIVE
THE DISTRICT BOARD OF TRUSTEES OF BROWARD COLLEGE FLORIDA - 6400 NW 6TH WAY - FORT LAUDERDALE, FL 33309	59-1216107	501(C)(3)	101,500.	0.			ASPEN PRIZE FINALIST AWARD
DENVER WORLD AFFAIRS COUNCIL 3607 MARTIN LUTHER KING JR BOULEVAR DENVER, CO 80205	45-4346778	501(C)(3)	101,207.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
AMARILLO JUNIOR COLLEGE DISTRICT PO BOX 447 AMARILLO, TX 79178	75-6000031	501(C)(3)	100,000.	0.			RISING STAR AWARD

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARIZONA STATE UNIVERSITY PO BOX 876011 TEMPE, AZ 85287	86-0196696	501(C)(3)	100,000.	0.			SCALING PARTNERS CURRICULUM
FORUM FOR YOUTH INVESTMENT 7064 EASTERN AVENUE, NW WASHINGTON, DC 20012	52-2242472	501(C)(3)	100,000.	0.			FUND FOR YOUTH CONNECTIVITY GRANT
NEW ORLEANS YOUTH ALLIANCE 1705 A SOUTH WHITE STREET NEW ORLEANS, LA 70125	82-4252541	501(C)(3)	100,000.	0.			BUILDING ECOSYSTEMS FOR YOUTH OPPORTUNITY ACCELERATOR GRANT
RESEARCH FOUNDATION OF THE CITY UNIVERSITY OF NEW YORK - 230 WEST 41ST STREET, 7TH FLOOR - NEW YORK, NY 10036	13-1988190	501(C)(3)	99,211.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
EMPOWERMT 2300 REGENT STREET, SUITE 101 MISSOULA, MT 59801	81-0526099	501(C)(3)	90,000.	0.			FORUM IN YOUTH-LED CHANGE
GLOBAL TIES US 1250 H STREET, NW, #305 WASHINGTON, DC 20005	52-0848094	501(C)(3)	82,520.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
AMERICAN MUSLIM FUND 41041 TRIMBOLI WAY, SUITE 1533 FREMONT, CA 94538	81-2936073	501(C)(3)	81,378.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
ENGINEERING WORLD HEALTH 331 W MAIN STREET #511 DURHAM, NC 27701	62-1868670	501(C)(3)	80,863.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
PRESIDENT & BOARD OF TRUSTEES OF SANTA CLARA COLLEGE - 500 EL CAMINO REAL - SANTA CLARA, CA 95053	94-1156617	501(C)(3)	78,625.	0.			ADVANCING WOMEN'S EMPOWERMENT CATALYST FUND

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUMBOLDT AREA FOUNDATION 990 FRONT STREET CRESCENT CITY, CA 95531	23-7310660	501(C)(3)	75,000.	0.			SUPPORT GRANT TO COMMUNITY/TRIBAL COLLABORATIVE
SHINING HOPE FOR COMMUNITIES INC 175 VARICK STREET NEW YORK, NY 10014	27-1493201	501(C)(3)	75,000.	0.			SUPPORT EQUITY AT THE LAST MILE INITIATIVE
COMMUNITIES UNLIMITED INC 3 EAST COLT SQUARE DRIVE FAYETTEVILLE, AR 72703	71-0464321	501(C)(3)	70,000.	0.			OPPORTUNITY YOUTH REENGAGEMENT MEETINGS AND NETWORK PROVIDER CONVENINGS
THE RESEARCH FOUNDATION FOR THE STATE UNIVERSITY OF NEW YORK - PO BOX 9 - ALBANY, NY 12201	14-1368361	501(C)(3)	69,368.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
THE KIND FOUNDATION INC PO BOX 705, MIDTOWN STATION NEW YORK, NY 10018	81-0856748	501(C)(3)	68,390.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
NEW YORK ACADEMY OF SCIENCES 1617 3RD AVENUE, PO BOX 287146 NEW YORK, NY 10128	13-1773640	501(C)(3)	67,899.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
AMERICA MIDEAST EDUCATIONAL AND TRAINING SERVICES INC - 2025 M STREET, NW, SUITE 600 - WASHINGTON, DC 20036	53-0243270	501(C)(3)	66,445.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
NEW MEXICO ASSOCIATION OF GRANTMAKERS - PO BOX 70126 - ALBUQUERQUE, NM 87197	85-0437031	501(C)(3)	60,000.	0.			OPPORTUNITY YOUTH ECOSYSTEM SUPPORT GRANT
NORTH CAROLINA STATE UNIVERSITY 2701 SULLIVAN DRIVE, CAMPUS BOX 720 RALEIGH, NC 27695	56-6000756	501(C)(3)	58,500.	0.			SUPPORT ACCELERATING WOMEN-LED VENTURES PROJECT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLEAN AIR TASK FORCE INC 114 STATE STREET, 6TH FLOOR BOSTON, MA 02109	04-3512550	501(C)(3)	50,000.	0.			ADVANCE ZERO-EMISSION MARITIME SHIPPING
NUETA HISDATSA SAHNISH COLLEGE 301 COLLEGE DRIVE NEW TOWN, ND 58763	45-0322990	501(C)(3)	50,000.	0.			CHAMPIONS FOR CHANGE INITIATIVE
SOCIAL SCIENCE RESEARCH COUNCIL 300 CADMAN PLAZA WEST, ONE PIERREPONT PLAZA, 15TH FLOOR - BROOKLYN, NY 11201	13-1325070	501(C)(3)	50,000.	0.			SUPPORT OYF ASPEN FORUM COMMUNITIES
YOUTHPRISE 3001 BROADWAY STREET NE, SUITE 330 MINNEAPOLIS, MN 55413	27-4126970	501(C)(3)	50,000.	0.			YOUTH-LED CHANGE FUND
THE ASIA SOCIETY 725 PARK AVENUE NEW YORK, NY 10021	13-3234632	501(C)(3)	45,035.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
THE BROOKINGS INSTITUTION 1775 MASSACHUSETTS AVENUE, NW WASHINGTON, DC 20036	53-0196577	501(C)(3)	45,000.	0.			J. SCHUETZ FELLOWSHIP AGREEMENT
CNATURENET 1611 COUNTY ROAD B WEST, SUITE 320 ROSEVILLE, MN 55113	14-1959018	501(C)(3)	40,000.	0.			SUPPORT FRESH TRACKS INITIATIVE
THE SAND COUNTY FOUNDATION INC 131 W WILSON STREET, SUITE 610 MADISON, WI 53703	39-6089450	501(C)(3)	40,000.	0.			AWARD FOR 2021 WATER FORUM PARTNERSHIP
UNDER ONE ROOF 21 KEMP COURT ALAMO, CA 94507	66-1871541	501(C)(3)	35,000.	0.			GLOBAL INCLUSIVE GROWTH SPARKS GRANT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFRICAN ENTREPRENEURSHIP COLLECTIVE - PO BOX 209 - CLINTON, WA 98236	46-0743201	501(C)(3)	32,250.	0.			ADVANCING WOMEN'S EMPOWERMENT CATALYST FUND
ONslow COUNTY PUBLIC SCHOOLS 200 BROADHURST ROAD JACKSONVILLE, NC 28540	56-6001089	501(C)(3)	30,543.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
CHEYENNE RIVER YOUTH PROJECT PO BOX 410 EAGLE BUTTE, SD 57625	46-0423106	501(C)(3)	25,000.	0.			CHAMPIONS FOR CHANGE INITIATIVE
THE HOPI FOUNDATION PO BOX 301 KYKOTSMOVI, AZ 86039	74-2488628	501(C)(3)	25,000.	0.			DATA FOR IMPACT RURAL AND TRIBAL DATA ENHANCEMENT GRANT
THE UNIVERSITY OF TEXAS AT AUSTIN 110 INNER CAMPUS DRIVE, STOP K5300 AUSTIN, TX 78712	74-6000203	501(C)(3)	25,000.	0.			SUPPORT OYF ASPEN FORUM
THE TRUSTES OF THE UNIVERSITY OF PENNSYLVANIA - 3451 WALNUT STREET, ROOM 329 - PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	24,500.	0.			COLLABORATION ON COMMUNITY-BASED EFFORTS OF CIVIC SCIENCE
BOARD OF EDUCATION OF FREDERICK COUNTY - 191 S EAST STREET - FREDERICK, MD 21701	52-6000941	501(C)(3)	20,000.	0.			AWARD FOR LARGE SUBURBAN REIMAGINING SCHOOL SPORTS WINER
COMMUNITY FOUNDATION FOR GREATER BUFFALO INC - 726 EXCHANGE STREET, SUITE 525 - BUFFALO, NY 14210	22-2743917	501(C)(3)	20,000.	0.			OPPORTUNITY YOUTH FORUM LEARNING GRANT
SCIENCE LEADERSHIP ACADEMY HOME AND SCHOOL ASSOCIATION - 1482 GREEN STREET - PHILADELPHIA, PA 19130	61-1513400	501(C)(3)	20,000.	0.			PRIVATE SCHOOL WINNER REIMAGINING SCHOOL SPORTS

Schedule I (Form 990)

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

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TRINITY SCHOOL OF DURHAM AND CHAPEL HILL - 4011 PICKETT ROAD - DURHAM, NC 27705	56-1926923	501(C)(3)	20,000.	0.			AWARD FOR PRIVATE SCHOOL WINNER
SEATTLE UNIVERSITY 901-12TH AVENUE, PO BOX 222000 SEATTLE, WA 98122	91-0565006	501(C)(3)	14,230.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
TEXAS INTERNATIONAL EDUCATION CONSORTIUM - 1103 W 24TH STREET - AUSTIN, TX 78705	74-2383582	501(C)(3)	13,437.	0.			STEVENS INITIATIVE CULTURAL EXCHANGE
DUKE UNIVERSITY PO BOX 104132 DURHAM, NC 27708	56-0532129	501(C)(3)	10,000.	0.			PARTNERSHIP AWARD FOR THEIR PARTNERSHIP IN THE 2021 ASPEN-NICHOLAS WATER FORUM AND ROUNDTABLES
CATHOLIC UNIVERSITY OF AMERICA 620 MICHIGAN AVENUE, NE WASHINGTON, DC 20064	53-0196583	501(C)(3)	8,275.	0.			WORK IN THE POLITICS OF VULNERABILITY PROJECT
THE URBAN OASIS INC 2812 CLIFTON AVENUE BALTIMORE, MD 21216	84-3768675	501(C)(3)	7,000.	0.			WEAVER AWARDS
VILLAGE OF VIOLETVILLE INC 1218 HAVERHILL ROAD BALTIMORE, MD 21229	84-2168228	501(C)(3)	7,000.	0.			WEAVER AWARDS
HISPANIC UNITY OF FLORIDA INC 5840 JOHNSON STREET HOLLYWOOD, FL 33021	59-2230272	501(C)(3)	6,000.	0.			2GEN LEVEL UP PRIZE PAYMENT
ACHIEVING THE DREAM 8484 GEORGIA AVENUE, SUITE 500 SILVER SPRING, MD 20910	27-1635830	501(C)(3)	5,500.	0.			COHORT HONORARIUM

Schedule I (Form 990)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
HONORARIA	200	469,450.	0.		
AWARDS	41	155,561.	0.		
EVENT PARTICIPATION STIPEND	53	75,433.	0.		
HEALTH STIPEND	14	22,500.	0.		
TRAVEL STIPEND	14	18,000.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE INSTITUTE PERIODICALLY ENGAGES OTHER ENTITIES TO FURTHER THE OBJECTIVES

SET FORTH IN OUR GRANT AGREEMENTS. THIS IS TYPICALLY DONE VIA SUB-AWARDS OR

RE-GRANTS THAT RUN CONCURRENTLY WITH THE PRIME AWARD IN WHICH THE SUB

RECIPIENTS ARE ADVISED OF ALL APPLICABLE LAWS AND REGULATIONS, AND ALL

APPROPRIATE FLOW-DOWN PROVISIONS FROM THE PRIME AGREEMENT. ALL SUB GRANTEES

OR SERVICE PROVIDERS MUST ALSO CERTIFY THAT IT DOES NOT AND WILL NOT

KNOWINGLY PROVIDE MATERIAL SUPPORT OR RESOURCES TO ANY INDIVIDUAL OR ENTITY

INVOLVED WITH TERRORISM (INCLUDING ANY INDIVIDUALS ENTITIES OR GROUPS

Part IV Supplemental Information

SUBJECT TO OFAC SANCTIONS) OR TO ANYONE WHO ACTS AS AN AGENT FOR SUCH AN
INDIVIDUAL OR ENTITY, ANY VIOLATION OF THIS CERTIFICATION MUST BE GROUNDS
FOR IMMEDIATE TERMINATION OF THE LETTER OF AGREEMENT AND RETURN OF ALL
GRANT FUNDS.

THE FREQUENCY AND SCOPE OF RESEARCH PROGRAM'S MONITORING PROCEDURES ARE
DETERMINED JOINTLY BY THE RESPONSIBLE PROGRAM MANAGER AND RESPECTIVE GRANT
ADMINISTRATOR/FINANCIAL ANALYST. THIS INCLUDES THE ROUTINE RECEIPT AND
REVIEW OF THE NARRATIVE AND FINANCIAL REPORTS, A REVIEW OF EXPENSES TO
BUDGET, THE OPTION TO PERFORM AUDITS, AND ALLOWS FOR THE PERFORMANCE OF
SITE VISITS IF NECESSARY. THE INSTITUTE IS NOTIFIED WHENEVER PROBLEMS
DELAYS OR OTHER CONDITIONS DEVELOP WHICH WOULD HAVE SIGNIFICANT IMPACT UPON
THE PROJECT. BUDGET REVISIONS ARE ALLOWED WITHIN THE PARAMETERS SET FORTH
IN EACH SUB AWARD. THE PAYMENT SCHEDULE AND THE DEGREE OF FLEXIBILITY
OFFERED MAY DEPEND ON PREVIOUS EXPERIENCE WITH THE RECIPIENT, THE DEGREE OF
EXTERNAL OVERSIGHT BY OTHER PARTIES, AND THE SOPHISTICATION OF THE
RECIPIENT'S ADMINISTRATIVE SYSTEMS.

COPY

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

THE ASPEN INSTITUTE, INC.

Employer identification number

84-0399006

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2021

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) DANIEL PORTERFIELD PRESIDENT & CEO	(i)	532,293.	108,127.	3,564.	32,346.	22,426.	698,756.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ELLIOT GERSON EXECUTIVE VP	(i)	444,033.	0.	6,858.	43,500.	16,001.	510,392.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) NAMITA KHASAT CFO/CAO/TREASURER	(i)	404,670.	0.	3,564.	40,711.	16,046.	464,991.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) DAVID LANGSTAFF EXEC VICE PRESIDENT	(i)	346,999.	0.	6,858.	33,461.	23,498.	410,816.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) STEPHEN PATRICK EXECUTIVE DIRECTOR	(i)	329,441.	0.	1,242.	43,500.	22,325.	396,508.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JANE WALES VP, EXECUTIVE DIRECTOR	(i)	339,656.	0.	11,124.	43,500.	2,042.	396,322.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ANN MOSLE VP, EXECUTIVE DIRECTOR	(i)	325,350.	0.	2,322.	43,500.	22,332.	393,504.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) VIVIAN SCHILLER EXECUTIVE DIRECTOR	(i)	342,815.	0.	3,564.	29,000.	15,924.	391,303.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) ERIKA MALLIN EXECUTIVE DIRECTOR	(i)	347,508.	0.	2,322.	25,709.	8,988.	384,527.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) MARIA ACEBAL VP STRATEGIC DEV CORP SECRETARY	(i)	260,760.	16,500.	1,198.	24,541.	22,335.	325,334.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) ERIC MOTLEY EVP, CORP SECRETARY - UNTIL 08/2021	(i)	279,917.	0.	498.	28,442.	10,755.	319,612.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 1A:

THE ASPEN INSTITUTE FOLLOWS A POLICY GOVERNING EXPENSE REIMBURSEMENT AND

COMPLIES WITH TRAVEL GUIDELINES APPLICABLE TO ALL EMPLOYEES.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization **THE ASPEN INSTITUTE, INC.** Employer identification number **84-0399006**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	48	10,448,358. FMV	
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

COPY

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THIS COLUMN REPRESENTS THE NUMBER OF ACTUAL CONTRIBUTIONS, NOT THE NUMBER OF ITEMS CONTRIBUTED.

SCHEDULE M, LINE 32B:

THE INSTITUTE HAS A WRITTEN GIFT ACCEPTANCE POLICY. IF A DONOR WANTS TO GIVE A GIFT OUTSIDE OF THAT POLICY, IT WILL BE REVIEWED BY SENIOR MANAGEMENT AND, IF NECESSARY, REFERRED TO THE BOARD OF TRUSTEES.

COPY

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

THE ASPEN INSTITUTE, INC.

Employer identification number

84-0399006

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

UNITED STATES AND AROUND THE WORLD TO BUILD A FREE, JUST, AND EQUITABLE
SOCIETY. THE INSTITUTE CREATES POSITIVE CHANGE BY INSPIRING INCLUSIVE
DIALOGUE AND EMPOWERING LEADERS TO SOLVE SOCIETY'S BIGGEST CHALLENGES.

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

SOCIETY'S BIGGEST CHALLENGES. WE BRING TOGETHER THOUGHTFUL PEOPLE WITH
DIVERSE BACKGROUNDS AND POINTS OF VIEW; WE CULTIVATE AND SUPPORT
VALUES-BASED, PURPOSE-DRIVEN LEADERS IN MANY COMMUNITIES; WE TURN IDEAS
INTO ACTION AND IMPACT FOR INDIVIDUALS AND SOCIETY. FOR NEARLY 70
YEARS, THE INSTITUTE HAS WORKED TO ADVANCE A MISSION TO CULTIVATE
ASPIRATIONAL, VALUES-BASED LEADERS; CONVENE DIVERSE THINKERS AND DOERS
AROUND CRITICAL QUESTIONS AND ISSUES; ELEVATE COMPELLING IDEAS AND
WORKS OF ART, LITERATURE, AND CULTURE; AND NURTURE A STRONG CIVIL
SOCIETY, ACCOUNTABLE INSTITUTIONS, AND EFFECTIVE PROBLEM-SOLVING. IT IS
BASED IN WASHINGTON, DC WITH CAMPUSES AND OFFICES IN ASPEN, COLORADO,
ITS ORIGINAL HOME SINCE ITS FOUNDING IN 1949, AND NEW YORK CITY.
ELEVEN OFFICIAL INTERNATIONAL PARTNERS CONDUCT REGULAR MEETINGS AND
SEMINARS IN COUNTRIES THROUGHOUT LATIN AMERICA, EUROPE, AND ASIA.

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

OTHER RESTRICTED PROGRAMS/PUBLIC PROGRAMS/YOUTH AND ENGAGEMENT/SEMINARS
EXPENSES \$ 20,382,851. INCL GRANTS OF \$ 553,984. REVENUE \$ 6,328,121.

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

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

Schedule O (Form 990) 2021

132211 11-11-21

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Name of the organization

THE ASPEN INSTITUTE, INC.

Employer identification number

84-0399006

THE FEDERAL FORM 990 OF THE INSTITUTE IS PREPARED BY AN EXTERNAL ACCOUNTING

FIRM USING INFORMATION OBTAINED FROM INSTITUTE'S STAFF. ONCE THE INITIAL

DRAFT IS PREPARED, IT IS REVIEWED BY SR. FINANCE/ACCOUNTING STAFF. IF

NECESSARY, CHANGES ARE MADE AND ANOTHER DRAFT IS ISSUED.

THE SECOND DRAFT FORM 990 IS REVIEWED BY AN APPOINTED MEMBER OF THE AUDIT

COMMITTEE ALONG WITH THE EVP FINANCE & ADMINISTRATION AND VP OF FINANCE. IF

NECESSARY, CHANGES ARE MADE AND ANOTHER DRAFT IS ISSUED.

THE FINAL DRAFT FORM 990 IS PROVIDED TO ALL MEMBERS OF THE AUDIT COMMITTEE,

WHICH INCLUDES THE CHAIR OF THE BOARD OF TRUSTEES. ONCE APPROVED, COPIES

ARE THEN DISTRIBUTED TO ALL BOARD MEMBERS BEFORE THE RETURN IS FILED WITH

THE INTERNAL REVENUE SERVICE.

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

ALL ASPEN INSTITUTE TRUSTEES AND EMPLOYEES ARE REQUIRED ANNUALLY TO

COMPLETE AND SIGN A DISCLOSURE AND ACKNOWLEDGEMENT FORM RELATED TO THE

INSTITUTE'S CONFLICT OF INTEREST POLICY. SPECIFICALLY, ALL TRUSTEES AND

EMPLOYEES ARE REQUIRED TO ACKNOWLEDGE THAT THEY HAVE READ, UNDERSTOOD, AND

ARE COMMITTED TO ABIDING BY THE INSTITUTE'S CONFLICT OF INTEREST POLICY,

AND TO MAKE CERTAIN DISCLOSURES ABOUT THEIR ACTIVITIES OUTSIDE OF WORK AND

FINANCES TO HELP IDENTIFY POSSIBLE CONFLICTS OF INTEREST. ALL EMPLOYEE

FORMS ARE SUBMITTED TO THE HUMAN RESOURCES DEPARTMENT, WHICH REVIEWS THEM

AND HAS DISCRETION, IN COORDINATION WITH THE GENERAL COUNSEL AND SENIOR

MANAGEMENT, TO MAKE RECOMMENDATIONS OR RAISE CONCERNS WITH AFFECTED

INDIVIDUALS AS APPROPRIATE. ALL TRUSTEE FORMS ARE SUBMITTED TO THE OFFICE

OF THE CORPORATE SECRETARY, WHICH REVIEWS THEM ALONG WITH THE GENERAL

COUNSEL. MAJOR CONFLICT OF INTEREST ISSUES INVOLVING TRUSTEES AND/OR SENIOR

Name of the organization THE ASPEN INSTITUTE, INC.	Employer identification number 84-0399006
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MANAGEMENT ARE REFERRED TO THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES FOR
RESOLUTION. THE CORPORATE SECRETARY, GENERAL COUNSEL AND SENIOR MANAGEMENT
REGULARLY CONFER WITH THE CHAIR OF THE AUDIT COMMITTEE REGARDING THE
INSTITUTE'S CONFLICT OF INTEREST POLICY AND ANY CONFLICT OF INTEREST
ISSUES.

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

THE INSTITUTE CONTRACTS WITH AN EXTERNAL COMPENSATION FIRM TO PERFORM A
MARKET ANALYSIS TO SET THE SALARY RANGES FOR ALL OF OUR POSITIONS ANNUALLY.
THE COMPENSATION FIRM ANALYZES SALARIES FROM LIKE ORGANIZATIONS TO
DETERMINE THE APPROPRIATE SALARY RANGE FOR EACH POSITION IN THE INSTITUTE.
THE INSTITUTE'S COMPENSATION PHILOSOPHY IS THAT WE GENERALLY TARGET THE
50TH PERCENTILE OF THE MARKET FOR OUR POSITIONS.

IN ADDITION TO THE ANNUAL MARKET ANALYSIS FOR ALL POSITIONS, WE CONTRACT
WITH AN EXTERNAL COMPENSATION CONSULTANT BI-ANNUALLY TO CONDUCT AN IN-DEPTH
ANALYSIS FOR OUR PRESIDENT/CEO AND EACH OF OUR EXECUTIVE OFFICERS. EACH
EXECUTIVE'S TOTAL COMPENSATION IS BENCHMARKED AGAINST SIMILAR POSITIONS IN
COMPARABLE ORGANIZATIONS IN LABOR MARKETS IN WHICH THE INSTITUTE COMPETES
FOR EXECUTIVE TALENT. THE RECOMMENDATIONS OF THE CONSULTANT ARE PRESENTED
TO THE EXECUTIVE COMMITTEE OF THE BOARD FOR THEIR REVIEW AND ENDORSEMENT.
THE PRESIDENT/CEO'S SALARY IS THEN PRESENTED TO THE FULL BOARD FOR FINAL
APPROVAL.

TO HELP MITIGATE COVID-RELATED BUDGET IMPACTS, A NUMBER OF ACTIONS WERE
TAKEN, INCLUDING VOLUNTARY SALARY REDUCTIONS BY ALL SENIOR EXECUTIVE STAFF,
A FREEZE ON OPEN POSITIONS, ACROSS THE BOARD CONTROLS ON SALARY INCREASES,
AND OTHER RESTRICTIONS ON SALARIES.

Name of the organization THE ASPEN INSTITUTE, INC.	Employer identification number 84-0399006
---	--

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AK, AZ, AR, CA, CO, CT, FL, GA, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND

OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

FORM 990, PART VI, SECTION C, LINE 19:

THE DOCUMENTS ARE ALL PUBLISHED ON OUR WEBSITE AND MADE AVAILABLE BY

REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONTRACTUAL INTERNATIONAL STAFF:

PROGRAM SERVICE EXPENSES	1,533,184.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,533,184.

IT SUPPORT SERVICE:

PROGRAM SERVICE EXPENSES	713,331.
MANAGEMENT AND GENERAL EXPENSES	1,579,761.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	2,293,092.

CONSULTANTS:

PROGRAM SERVICE EXPENSES	12,656,972.
MANAGEMENT AND GENERAL EXPENSES	1,233,268.
FUNDRAISING EXPENSES	2,125.
TOTAL EXPENSES	13,892,365.

Name of the organization THE ASPEN INSTITUTE, INC.	Employer identification number 84-0399006
---	--

CONTRIBUTING WRITERS AND RAPORTEURS:

PROGRAM SERVICE EXPENSES	195,257.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	195,257.

TEMPORARY SERVICES:

PROGRAM SERVICE EXPENSES	181,943.
MANAGEMENT AND GENERAL EXPENSES	72,308.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	254,251.

PHOTOGRAPHY:

PROGRAM SERVICE EXPENSES	185,475.
MANAGEMENT AND GENERAL EXPENSES	5,787.
FUNDRAISING EXPENSES	2,863.
TOTAL EXPENSES	194,125.

PROMOTIONAL EXPENSE:

PROGRAM SERVICE EXPENSES	94,239.
MANAGEMENT AND GENERAL EXPENSES	28,456.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	122,695.

CONTRACTED SERVICES:

PROGRAM SERVICE EXPENSES	1,076,540.
MANAGEMENT AND GENERAL EXPENSES	1,294,280.
FUNDRAISING EXPENSES	64,198.

Name of the organization THE ASPEN INSTITUTE, INC.	Employer identification number 84-0399006
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TOTAL EXPENSES 2,435,018.

AUDIO VISUAL/DIGITAL SERVICES:

PROGRAM SERVICE EXPENSES 765,981.

MANAGEMENT AND GENERAL EXPENSES 58,536.

FUNDRAISING EXPENSES 71,287.

TOTAL EXPENSES 895,804.

MODERATOR AND SPEAKER:

PROGRAM SERVICE EXPENSES 519,669.

MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 1,750.

TOTAL EXPENSES 521,419.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 22,337,210.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

REFUNDED GRANTS 195,226.