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)

▶ 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.**

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2021 calendar year, or tax year beginning 01-01-2021 , and ending 12-31-2021

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
AARP

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
601 E Street NW co Tax Dept

City or town, state or province, country, and ZIP or foreign postal code
Washington, DC 20049

D Employer identification number
95-1985500

E Telephone number
(202) 434-3243

G Gross receipts $ 32,220,183,920

F Name and address of principal officer:
Scott M Frisch
601 E Street NW
Washington, DC 20049

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions.

H(c) Group exemption number ▶

I Tax-exempt status: ☐ 501(c)(3) ☑ 501(c) (4) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www.aarp.org

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1958

M State of legal domicile: DC

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
AARP is a nonprofit, nonpartisan organization empowering people to choose how they live as they age.

2 Check this box ▶ ☐ 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**	13
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	12
5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	**5**	2,023
6	Total number of volunteers (estimate if necessary)	**6**	20,872
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	181,024,692
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	**7b**	10,436,021

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	318,990,639	319,696,538
9	Program service revenue (Part VIII, line 2g)	169,520,355	184,462,214
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	164,398,881	425,038,219
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,002,028,937	1,071,590,188
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,654,938,812	2,000,787,159
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	97,555,654	42,246,834
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)	372,391,841	382,613,652
16a	Professional fundraising fees (Part IX, column (A), line 11e)	652,488	658,488
b	Total fundraising expenses (Part IX, column (D), line 25) ▶8,906,346		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,129,045,741	1,218,369,826
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	1,599,645,724	1,643,888,800
19	Revenue less expenses. Subtract line 18 from line 12	55,293,088	356,898,359

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	3,002,043,536	3,470,371,816
21	Total liabilities (Part X, line 26)	1,423,175,159	1,272,289,849
22	Net assets or fund balances. Subtract line 21 from line 20	1,578,868,377	2,198,081,967

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: 2022-11-09

Scott M Frisch EVP & COO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN

Firm's name ▶ | Firm's EIN ▶

Firm's address ▶ | Phone no.

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 . . . . . ☑

1 Briefly describe the organization's mission:

AARP is a nonprofit, nonpartisan organization empowering people to choose how they live as they age. AARP champions positive social change and delivers value through advocacy, information, and service. AARP's vision is a society in which everyone lives with dignity and purpose, and fulfills their goals and dreams.

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 ☑ 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 ☑ 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 $ 460,134,325 including grants of $ 23,747,423) (Revenue $ 5,166,117)

Community Engagement, Education, and Outreach provides programs, services, tools, information, and advocacy that advance the mission of AARP by helping to fulfill the wants and needs of people age 50+ and their families. AARP's 53 state and territorial offices offer needed assistance, information, and support to Americans 50+ at the state and local levels. This includes a wide range of community-based activities that engage the diverse 50+ population and their families, such as educational programs, health fairs, career expos, and volunteer opportunities. An important element of our state and local work is grassroots advocacy on state and local legislative and regulatory issues, including utility rates, caregiving, and work and save programs.AARP also advances our policy agenda at the national level through advocacy that proactively addresses issues important to people 50+, including caregiving, health, saving and planning, Social Security, and age-based discrimination. Underlying our policy agenda is the in-depth research conducted by AARP, which also provides a foundation for our program development and for the information we provide on key issues affecting 50+ Americans, including, in addition to those listed above, livable communities, work and careers, and more. AARP offers training and education programs that help people 50+ improve their lives, such as AARP Driver Safety courses and local workshops and activities on matters such as fraud prevention.AARP also facilitates the participation of 50+ Americans in bringing about positive social change in America. Initiatives include Create the Good, which connects individuals to a network of people, tools, and time-flexible volunteer opportunities; Andrus Awards for Community Service, which recognize people who have made a difference in their communities in ways that support AARP's mission, vision, and direction; AARP Purpose Prize awards, which support AARP's mission by honoring extraordinary people ages 50 and older who tap into the power of life experience to build a better future for us all; and the work of AARP Chapters, which engage members in community service and fellowship.

4b (Code:) (Expenses $ 434,050,972 including grants of $ 10,000) (Revenue $ 259,341)

Publications and CommunicationsAARP is a unique source of information through multiple communication channels on topics of interest to people 50+ and their families. AARP publishes "AARP The Magazine," the world's largest circulation magazine, every other month. "AARP The Magazine" includes the key areas of health, personal finance, work/life transitions, and personal enrichment. AARP also publishes 10 issues of "AARP Bulletin," which reports on such issues as Social Security, Medicare, and topics related to work, saving money, retirement, pensions, health, and quality of life. "AARP The Magazine and "AARP Bulletin," provided to all AARP member households, are also available online to the public.AARP also communicates with members and non-members through its award-winning website, mobile apps, broadcast studio productions, social media, and various other platforms to provide information that is engaging, informative, and useful and to ensure that positive images of aging are reflected in society.

4c (Code:) (Expenses $ 222,083,728 including grants of $ 100) (Revenue $ 600,546)

Member Engagement is dedicated to ensuring that AARP provides a valuable member experience to members and that a relevant portfolio of information, programs, benefits, and services is readily available to all members. Members have the opportunity to receive customized information in the manner most useful to them. Assistance for members is available through a contact center reachable by phone or online, which also provides assistance to non-members who contact us.

(Code:) (Expenses $ 239,279,062 including grants of $ 0) (Revenue $ 0)

Member Acquisition's work is based on the recognition that members are an essential part of AARP's ability to achieve its mission. Speaking on behalf of its tens of millions of members gives AARP significant power and reach in advocating for social change at the local, state, and national levels. Members also provide grassroots activism, volunteer work, and input into the problems faced by Americans as they age, which helps shape AARP's social change agenda. Member Acquisition seeks to retain current members and provides outreach to potential members, including the many different segments of America's diverse 50+ population.

(Code:) (Expenses $ 18,489,311 including grants of $ 18,489,311) (Revenue $ 0)

Cash Contributions to Affiliated Charitable Organizations: AARP provides significant support to its charitable affiliates. AARP Foundation provides services for the most vulnerable part of the 50+ population, working to win back opportunity for low-income Americans 50+ with a particular focus on income, benefits, and refunds. Experience Corps, which is part of the AARP Foundation, connects highly trained volunteers age 50 and above with disadvantaged students to tutor literacy. Legal Counsel for the Elderly provides free legal representation for low-income residents of the District of Columbia. Wish of a Lifetime shifts how society values seniors by granting and sharing their lifelong wishes. In 2021, Olders Adults Technology Services became an affiliate of AARP which harnesses the power of techology to change the way we age. In addition to the cash support noted below, AARP provides significant in-kind contributions and services to its charitable affiliates. AARP Foundation - $7,766,838Legal Counsel for the Elderly - $3,586,321 Wish of a Lifetime - $2,000,001Older Adults Technology Services - $5,136,152

4d Other program services (Describe in Schedule O.)
(Expenses $ 257,768,373 including grants of $ 18,489,311) (Revenue $ 0)

4e **Total program service expenses** ▶ 1,374,037,398

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1		No
2	Is the organization required to complete *Schedule B, Schedule of Contributors*? See instructions.	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D,* Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D,* Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? *If "Yes," complete Schedule D, Part V*	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D,* Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I.* See instructions.	17	Yes	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L,* Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L,* Part I	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or 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? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L,* Part III	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38	Yes	

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 ☐

				Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	1,825		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c Yes	

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

2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return **2a** 2,023				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	**2b**	Yes		
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	**3a**	Yes		
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*	**3b**	Yes		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	**4a**	Yes		
b	If "Yes," enter the name of the foreign country: ▶BR See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	**5a**			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	**5b**			No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	**5c**			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	**6a**	Yes		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	**6b**	Yes		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	**7a**			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	**7b**			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	**7c**			
d	If "Yes," indicate the number of Forms 8282 filed during the year **7d**				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	**7e**			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	**7f**			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	**7g**			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	**7h**			
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	**8**			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?	**9a**			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	**9b**			
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12 **10a**				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities **10b**				
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders **11a**				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) **11b**				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	**12a**			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. **12b**				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O.	**13a**			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans **13b**				
c	Enter the amount of reserves on hand **13c**				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	**14a**			No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	**14b**			
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	**15**	Yes		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	**16**			No
17	**Section 501(c)(21) organizations.** Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	**17**			

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

Check if Schedule O contains a response or note to any line in this Part VI . . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	**1a**	13		
b	Enter the number of voting members included in line 1a, above, who are independent	**1b**	12		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		**5**		No
6	Did the organization have members or stockholders?		**6**		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		**7a**		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body?		**8b**	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		**9**		No

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	**10a**	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	**10b**	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	**11a**	Yes	
b	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*	**12a**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*	**12c**	Yes	
13	Did the organization have a written whistleblower policy?	**13**	Yes	
14	Did the organization have a written document retention and destruction policy?	**14**	Yes	
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	**15a**	Yes	
b	Other officers or key employees of the organization	**15b**	Yes	
	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?	**16a**		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	**16b**		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ CA, IN

18 Section 6104 requires an organization to make its Form 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.

☑ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 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: ▶Scott M Frisch 601 E Street NW Washington, DC 20049 (202) 434-7578

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, or 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 dotted 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) Annette Franqui Board Chair	25.00 0.00	X						0	0	0
(2) Martha Dally Hayes First Vice Chair	15.00 0.00	X						0	0	0
(3) Lloyd Johnson Second Vice Chair	15.00 6.00	X						0	0	0
(4) Robert Blancato Director	10.00 6.00	X						0	0	0
(5) Joseph F Coughlin Director	10.00 0.00	X						0	0	0
(6) Beth Ellard Director	10.00 1.00	X						0	0	0
(7) Neal Lane Director	10.00 0.00	X						0	0	0
(8) Libby Sartain Director	10.00 6.00	X						0	0	0
(9) Margot James Copeland Director	10.00 6.00	X						0	0	0
(10) Julio A Portalatin Director	10.00 0.00	X						0	0	0
(11) Jo Ann Jenkins Chief Executive Officer	40.00 1.00	X		X				2,575,415	0	133,394
(12) Rosanna A Marquez Director as of 12/2021	10.00 0.00	X						0	0	0
(13) Jeffery D Dunn Director as of 12/2021	10.00 0.00	X						0	0	0
(14) Scott M Frisch EVP & COO	40.00 1.00			X				766,417	0	81,530
(15) Nancy Smith EVP & Corporate Secretary	40.00 0.00			X				504,962	0	60,924
(16) Nancy A LeaMond EVP - Advocacy & Engagemen	40.00 0.00				X			777,540	0	60,708
(17) Martha Boudreau EVP & Chief Comm & Mktg	40.00 0.00				X			697,595	0	74,052

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 dotted 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) Kevin Donnellan	40.00				X			555,992	0	72,894
EVP & Chief of Staff	1.00									
(19) David Morales	40.00				X			514,107	0	81,530
EVP & General Counsel	0.00									
(20) Debra Whitman	40.00				X			509,208	0	81,530
EVP & Public Policy Office	0.00									
(21) Myrna Blyth	40.00				X			507,059	0	65,958
SVP & Editorial Director	0.00									
(22) Karen Mercer	40.00				X			416,837	0	76,000
SVP & AARP Treasurer	1.00									
(23) Kristin Dillon	40.00					X		485,220	0	76,184
SVP States & Comm Engageme	1.00									
(24) Sami Hassanyeh	40.00					X		452,296	0	72,894
SVP Digital Strategy & Mem	0.00									
(25) John Hishta	40.00					X		441,686	0	81,530
SVP Campaigns	0.00									
(26) Edna Kane-Williams	40.00					X		440,447	0	67,101
EVP & Chief Diversity Officer	1.00									
(27) William Sweeny	40.00					X		436,225	0	67,733
SVP Govt Affairs	0.00									

1b Sub-Total . . . . . ▶			
c Total from continuation sheets to Part VII, Section A . . . . ▶			
d Total (add lines 1b and 1c) . . . . . ▶	10,081,006	0	1,153,962

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 ▶ 1,307

		Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		No
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? *If "Yes," complete Schedule J for such individual*	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*		No

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
Mediacom Worldwide Inc 498 7th Avenue New York, NY 10018	Media Agency	87,350,719
LSC Communications Inc 111 South Wacker Drive Chicago, IL 60606	Digital Print Services	47,652,690
RR Donnelley 191 North Wacker Drive Chicago, IL 60606	Printing Services	46,917,633
GMMB Inc 3050 K Street NW Ste 100 Washington, DC 20007	Communication Specialists	42,785,999
Facebook Inc 1 Hacker Way Menlo Park, CA 94025	Technology Company	31,732,009

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 ▶ 632

Part VIII Statement of Revenue

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

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants, and OtherAmt Similar Amounts				
1a Federated campaigns . . 1a				
b Membership dues . . 1b	296,117,969			
c Fundraising events . . 1c				
d Related organizations 1d	1,063,696			
e Government grants (contributions) 1e	299,438			
f All other contributions, gifts, grants, and similar amounts not included above 1f	22,215,435			
g Noncash contributions included in lines 1a - 1f:$ 1g				
h **Total.** Add lines 1a-1f . . . . . ▶	319,696,538			
Program Service Revenue	Business Code			
2a Publication Advertising Revenue	541800	120,449,409		120,449,409
b Digital Revenue	541800	42,292,192	186,079	42,106,113
c Licensing fees	519100	9,861,722		9,861,722
d Membership Kit Provider Fee	541800	4,703,821		4,703,821
e Driver's Safety Program	900099	4,065,239	4,065,239	
f All other program service revenue.		3,089,831	1,774,686	1,315,145
g **Total.** Add lines 2a–2f. . . . . ▶	184,462,214			
3 Investment income (including dividends, interest, and other similar amounts)		144,524,771		337,484	144,187,287
4 Income from investment of tax-exempt bond proceeds ▶				
5 Royalties . . . . . ▶		1,062,683,603			1,062,683,603
	(i) Real	(ii) Personal			
6a Gross rents 6a					
b Less: rental expenses 6b					
c Rental income or (loss) 6c					
d Net rental income or (loss) . . . . . ▶					
	(i) Securities	(ii) Other			
7a Gross amount from sales of assets other than inventory 7a	30,499,910,209				
b Less: cost or other basis and sales expenses 7b	30,217,468,815	1,927,946			
c Gain or (loss) 7c	282,441,394	-1,927,946			
d Net gain or (loss) . . . . . ▶		280,513,448		2,348,245	278,165,203
Other Revenue 8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18 . . . . 8a					
b Less: direct expenses 8b					
c Net income or (loss) from fundraising events . . ▶					
9a Gross income from gaming activities. See Part IV, line 19 . . . 9a					
b Less: direct expenses 9b					
c Net income or (loss) from gaming activities . . ▶					
10a 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	Business Code				
11a Miscellaneous Income	900099	3,919,473			3,919,473
b Captive Insurance Premiums	900099	2,575,875			2,575,875
c Pship K-1 Income	900099	2,411,237		-97,247	2,508,484
d All other revenue					
e **Total.** Add lines 11a–11d . . . . . ▶		8,906,585			
12 **Total revenue.** See instructions . . . . ▶		2,000,787,159	6,026,004	181,024,692	1,494,039,925

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 . . . . . ☑

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	41,946,838	41,946,838		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	10,000	10,000		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	289,996	289,996		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	8,613,652	2,773,650	5,840,002	
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	248,508,747	182,701,005	65,405,304	402,438
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	70,464,490	48,649,319	21,729,308	85,863
9 Other employee benefits	39,143,644	23,695,903	15,398,309	49,432
10 Payroll taxes	15,883,119	11,473,550	4,384,636	24,933
11 Fees for services (non-employees):				
a Management				
b Legal	2,026,844	191,331	1,835,513	
c Accounting	987,628	45,897	941,731	
d Lobbying	944,100	944,100		
e Professional fundraising services. See Part IV, line 17	658,488			658,488
f Investment management fees	41,786,848		41,786,848	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	253,136,162	233,285,112	19,835,539	15,511
12 Advertising and promotion	369,270,275	358,952,499	10,215,185	102,591
13 Office expenses	1,959,862	1,553,979	405,883	
14 Information technology	117,293,022	47,286,353	69,679,925	326,744
15 Royalties				
16 Occupancy	20,398,536	13,193,497	7,205,039	
17 Travel	955,589	828,840	126,749	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	6,799,027	6,238,210	560,817	
20 Interest	9,109,452	3,889,479	5,219,973	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	63,883,855	37,747,914	26,135,941	
23 Insurance	4,991,972		4,991,972	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Printing & Postage	255,281,595	250,365,891	1,016,387	3,899,317
b Research, Surveys, & Te	20,800,315	18,084,026	2,716,289	
c Taxes & Licenses	16,496,302	2,929,016	13,567,286	
d Temporary Labor	10,591,984	6,496,491	4,095,493	
e All other expenses	21,656,458	80,464,502	-62,149,073	3,341,029
25 **Total functional expenses.** Add lines 1 through 24e	1,643,888,800	1,374,037,398	260,945,056	8,906,346
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 IX . . . . . ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		36,360,020	1	36,106,741
	2	Savings and temporary cash investments		91,036,690	2	34,249,283
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		163,152,599	4	164,247,969
	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			8	
	9	Prepaid expenses and deferred charges		44,758,013	9	42,706,907
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 663,484,458			
	b	Less: accumulated depreciation	10b 391,942,454	288,383,223	10c	271,542,004
	11	Investments—publicly traded securities		2,290,298,857	11	2,828,906,030
	12	Investments—other securities. See Part IV, line 11		46,745,230	12	58,841,645
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets		545,927	14	493,095
	15	Other assets. See Part IV, line 11		40,762,977	15	33,278,142
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		3,002,043,536	16	3,470,371,816
Liabilities	17	Accounts payable and accrued expenses		154,705,026	17	164,375,135
	18	Grants payable			18	
	19	Deferred revenue		245,487,949	19	236,822,699
	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	
	24	Unsecured notes and loans payable to unrelated third parties		174,392,150	24	174,434,433
	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		848,590,034	25	696,657,582
	26	**Total liabilities.** Add lines 17 through 25		1,423,175,159	26	1,272,289,849
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ ☑ and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		1,578,868,377	27	2,198,081,967
	28	Net assets with donor restrictions			28	
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ 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		1,578,868,377	32	2,198,081,967
	33	Total liabilities and net assets/fund balances		3,002,043,536	33	3,470,371,816

Part XI Reconcilliation 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	2,000,787,159
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,643,888,800
3	Revenue less expenses. Subtract line 2 from line 1	3	356,898,359
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,578,868,377
5	Net unrealized gains (losses) on investments	5	103,201,277
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	159,113,954
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column	10	2,198,081,967

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ 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?	2a		No
	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?	2b	Yes	
	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?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in 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?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

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
AARP

Employer identification number
95-1985500

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? ☐ Yes ☐ 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? ☐ Yes ☐ 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 (e.g., recreation or education)
☐ Preservation of an 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 Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of 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 ▶ $ _____

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 ▶ $ _____

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 are a significant use of its collection items (check all that apply):

- **a** ☐ Public exhibition
- **b** ☐ Scholarly research
- **c** ☐ Preservation for future generations
- **d** ☐ Loan or exchange programs
- **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** ☐ **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:

		Amount
c	Beginning balance	**1c**
d	Additions during the year	**1d**
e	Distributions during the year	**1e**
f	Ending balance	**1f**

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 in Part XIII . . . . ☐

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
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 ▶ .....
- **b** Permanent endowment ▶ .....
- **c** Term endowment ▶ .....

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:

	Yes	No
(i) Unrelated organizations . . . . . **3a(i)**		
(ii) Related organizations . . . . . **3a(ii)**		
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? **3b**		

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.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		39,839,071		39,839,071
b Buildings		156,191,280	106,077,546	50,113,734
c Leasehold improvements				
d Equipment				
e Other		467,454,107	285,864,908	181,589,199
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				271,542,004

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)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶		

Part VIII Investments - Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 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. *(Column (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	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	696,657,582

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

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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
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			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	

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	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
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			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	

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.

Return Reference	Explanation
Part X, Line 2:	AARP does not believe that there are any unrecognized tax benefits/liabilities that should be recorded.

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ **Complete if the organization answered "Yes" to 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
AARP

Employer identification number
95-1985500

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 Activites 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 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
(1) Europe (Including Iceland & Greenland) - Albania, Andorra, Austria, Belgium	0	0	Program services - sponsorship of event/general support	Grant to support employers retaining talent at all ages and forum sponsorship	272,996
(2) North America	0	0	Program services - sponsorship of event	Sponsorship of the annual summit	17,000
(3) Europe (Including Iceland & Greenland) - Albania, Andorra, Austria, Belgium	0	0	Investment in United Kingdom companies including Dementia Discovery L.P.		23,173,403
(4) Middle East and North Africa	0	0	Investment in Israeli start-up companies		190,000
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total	0	0			23,653,399
b Total from continuation sheets to Part I . . .	0	0			0
c Totals (add lines 3a and 3b)	0	0			23,653,399

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)
(1)			Europe (Including Iceland & Greenland) - Albania, Andorra, Austria, Belgium	Grant to support employers retaining talent at all ages and forum sponsorship	272,996		0		
(2)			North America - Canada and Mexico, but not the United States	Sponsorship of annual summit	17,000		0		
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

3 Enter total number of other organizations or entities . . . . . ▶

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)
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
(18)								

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

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.

ReturnReference	Explanation
Part I, Line 2:	AARP's Office of the Chief of Staff reviews and approves all requests for contributions, taking into consideration the mission of the donee organization and how the contribution will support AARP's goals and advance our mission.
Part III Accounting Method:	
Schedule F, Part IV, Questions 1 and 3 - 5	Question 1: AARP invests in several alternative investment funds, some of which are, or may invest (directly or indirectly) in, foreign corporations. AARP will file other IRS forms in connection with such investments as necessary. Question 3: AARP invests in several alternative investment funds, some of which are, or may invest (directly or indirectly) in, foreign corporations. AARP will file other IRS forms in connection with such investments as necessary. Question 4: AARP invests in several alternative investment funds, some of which are, or may invest (directly or indirectly) in, passive foreign investment companies. AARP will file other IRS forms in connection with such investments as necessary. Question 5: AARP invests in several alternative investment funds, some of which are, or may invest (directly or indirectly) in, foreign partnerships. AARP will file other IRS forms in connection with such investments as necessary.

Additional Data

Software ID:

Software Version:

SCHEDULE G (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.

▶ **Attach to Form 990 or Form 990-EZ.**

▶ **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
AARP

Employer identification number
95-1985500

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- **a** ☑ Mail solicitations
- **b** ☑ Internet and email solicitations
- **c** ☑ Phone solicitations
- **d** ☐ In-person solicitations
- **e** ☑ Solicitation of non-government grants
- **f** ☑ Solicitation of government grants
- **g** ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑ **Yes** ☐ **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	**(iii)** No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
1	Chapman Cubine Allen and Hussey Inc 2000 15th Street North Ste 550 Arlington, V A 22201	Direct mail and communications		No	0	710,590	0
2	Blue State Digital 41 Flatbush Avenue 8th Fl Brooklyn, N Y 11217	Creative on-line marketing services		No	0	66,000	0
3							
4							
5							
6							
7							
8							
9							
10							
Total ▶						776,590	

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

A L, A K, A Z, A R, C A, C O, C T, D E, FL, G A, H I, I D, I L, I N, I A, KS, K Y, L A, M E, M D, M A, M I, M N, M S, M O, M T, N E, N V, N H, N J, N M, N Y, N C, N D, O H, O K, O R, P A, R I, S C, S D, T N, T X, U T, V T, V A, W A, W V, W I, W Y

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 (event type)	**(b)** Event #2 (event type)	**(c)** Other events (total number)	**(d)** Total events (add col. **(a)** through col. **(c)**)
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				

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				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ 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: _____

11 Does the organization conduct gaming activities with nonmembers? . . . . . ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . . ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

a	The organization's facility	**13a**	%
b	An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ ----------

Address ▶ ----------

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____.

c If "Yes," enter name and address of the third party:

Name ▶ ----------

Address ▶ ----------

16 Gaming manager information:

Name ▶ ----------

Gaming manager compensation ▶ $ ----------

Description of services provided ▶ ----------

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
Part I, Line 2b, Column (v):	All fundraisers listed above do not raise funds directly for AARP, but provide counsel, services, and support to AARP's internal development office.
Schedule G, Part I, Line 2b, Column IV	Chapman Cubine Allen and Hussey, Inc. Professional fundraising $592,488 Professional services 15,511 Advertising costs 102,590 Total payments reported on Schedule G $710,590 Blue State Digital Professional fundraising $ 66,000 Total payments reported on Schedule G $ 66,000

Additional Data

Return to Form

Software ID:

Software Version:

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 noncash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of noncash assistance
(1) Payette Downtown Mechants Association - Grant to support AARP's Livable Communities initiative	1	10,000	0	Cash paid	
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
Schedule I, Part II	AARP's Office of the Chief of Staff reviews and approves all requests for contributions, taking into consideration the mission of the donee organization and how the contribution will support AARP's goals and advance our mission.

Additional Data

Return to Form

Software ID:

Software Version:

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
AARP

Employer identification number
95-1985500

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☑ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☑ Travel for companions	☐ Payments for business use of personal residence		
	☑ Tax idemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☑ Compensation committee	☑ Written employment contract		
	☑ Independent compensation consultant	☑ Compensation survey or study		
	☐ Form 990 of other organizations	☑ Approval by the board or compensation committee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	**5a**	Yes	
b	Any related organization?	**5b**	Yes	
	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?	**6a**		No
b	Any related organization?	**6b**		No
	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 in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	**9**		

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 are not 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, 1099-MISC compensation, and/or 1099-NEC			**(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				
1Jo Ann Jenkins Chief Executive Officer	(i)	927,017	1,419,467	228,931	118,993	14,401	2,708,809	177,462
	(ii)	0	0	0	0	0	0	0
2Scott M Frisch EVP & COO	(i)	552,539	212,636	1,242	58,493	23,037	847,947	0
	(ii)	0	0	0	0	0	0	0
3Nancy A LeaMond EVP - Advocacy & Engagemen	(i)	551,718	214,077	11,745	58,493	2,215	838,248	0
	(ii)	0	0	0	0	0	0	0
4Martha Boudreau EVP & Chief Comm & Mktg	(i)	499,670	193,881	4,044	58,493	15,559	771,647	0
	(ii)	0	0	0	0	0	0	0
5Kevin Donnellan EVP & Chief of Staff	(i)	416,534	134,686	4,772	58,493	14,401	628,886	0
	(ii)	0	0	0	0	0	0	0
6David Morales EVP & General Counsel	(i)	392,722	118,583	2,802	58,493	23,037	595,637	0
	(ii)	0	0	0	0	0	0	0
7Debra Whitman EVP & Public Policy Office	(i)	388,227	119,599	1,382	58,493	23,037	590,738	0
	(ii)	0	0	0	0	0	0	0
8Myrna Blyth SVP & Editorial Director	(i)	384,031	111,843	11,185	58,493	7,465	573,017	0
	(ii)	0	0	0	0	0	0	0
9Nancy Smith EVP & Corporate Secretary	(i)	376,051	121,596	7,315	58,493	2,431	565,886	0
	(ii)	0	0	0	0	0	0	0
10Kristin Dillon SVP States & Comm Engageme	(i)	384,429	99,444	1,347	58,493	17,691	561,404	0
	(ii)	0	0	0	0	0	0	0
11Sami Hassanyeh SVP Digital Strategy & Mem	(i)	356,557	92,234	3,505	58,493	14,401	525,190	0
	(ii)	0	0	0	0	0	0	0
12John Hishta SVP Campaigns	(i)	351,776	87,089	2,821	58,493	23,037	523,216	0
	(ii)	0	0	0	0	0	0	0
13Edna Kane-Williams EVP & Chief Diversity Officer	(i)	352,342	81,126	6,979	58,493	8,608	507,548	0
	(ii)	0	0	0	0	0	0	0
14William Sweeny SVP Govt Affairs	(i)	344,077	91,078	1,070	58,493	9,240	503,958	0
	(ii)	0	0	0	0	0	0	0
15Karen Mercer SVP & AARP Treasurer	(i)	295,855	119,599	1,383	58,493	17,507	492,837	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation
Part I, Line 1a	AARP board members, officers, and key employees are provided the benefit of first-class travel on flights exceeding 5 hours when business class accommodations are not available. Directors may also use first-class travel if prior approval is obtained from the Corporate Secretary's Office due to medical reasons or for especially late-night arrival, or if approved by the Board Chair. The AARP Chief Executive Officer and AARP Board Chair are provided the benefit of first-class or business class travel on flights exceeding 90 minutes due to the extensive travel requirements of the position. In 2021,no board members used first-class travel. All directors for AARP serve on a volunteer basis and are not compensated for their generous commitment to AARP. The officers, directors, and key employees are, however, reimbursed by AARP for travel and subsistence costs incurred in carrying out their duties. In addition, directors are reimbursed for travel and subsistence costs incurred for spouses/companions accompanying them to Association functions. The board members receive a gross-up payment to ensure there are no out-of-pocket expenses related to the income taxes for the spouse/companion travel. All spouse/companion travel reimbursements and tax gross-up payments are treated as taxable income to the directors. The Chief Executive Officer of AARP was given the following benefits in 2021: Jo Ann Jenkins: 1) deferred compensation payment of $219,206.89 2) group-term life and supplemental life insurance policy, premiums paid by AARP in 2021 were $8,489.00; 3) spousal travel of $755.35; and 4) parking and other one-time benefits of $480.00 All items were treated as taxable compensation to Ms. Jenkins in 2021.
Part I, Line 4b	Jo Ann Jenkins particpates in a 457(f) supplemental executive retirement plan. In 2021, Ms. Jenkins was paid $219,206.89 from this plan.
Part I, Line 5	Under AARP's enterprise-wide compensation plan numerous organizational factors are considered in employee compensation, one of which is gross revenues.
Schedule J, Part II	Column (B)(ii), Line (i) Bonus & Incentive Compensation: In 2021, Jo Ann Jenkins received a long-term incentive payment of $947,682.00 for the 3-year period covering 2018-2020.

Additional Data

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Schedule L (Form 990)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**
▶ **Attach to Form 990 or Form 990-EZ.**
▶ **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
AARP

Employer identification number
95-1985500

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	**(a)** Name of disqualified person	**(b)** Relationship between disqualified person and organization	**(c)** Description of transaction	**(d)** Corrected? Yes	No

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958.

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	**(b)** Relationship with organization	**(c)** Purpose of loan	**(d)** Loan to or from the organization? To	From	**(e)** Original principal amount	**(f)** Balance due	**(g)** In default? Yes	No	**(h)** Approved by board or committee? Yes	No	**(i)** Written agreement? Yes	No
Total ▶ $												

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	**(b)** Relationship between interested person and the organization	**(c)** Amount of assistance	**(d)** Type of assistance	**(e)** Purpose of assistance
(1) Joseph F Coughlin	Founder and Director of MIT's AgeLab and AARP Board Member as of 6/3/2016	275,000	Unrestricted grant to MIT's AgeLab	Support research and education

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	**(b)** Relationship between interested person and the organization	**(c)** Amount of transaction	**(d)** Description of transaction	**(e)** Sharing of organization's revenues?	
				Yes	**No**

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

Return Reference	Explanation

Additional Data

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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 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
AARP

Employer identification number
95-1985500

Return Reference	Explanation
Form 990, Part VI, Section B, line 11b	The Form 990 is prepared and reviewed in AARP's internal tax department. The return is then put through a secondary review which includes the AARP Controller and AARP General Counsel. After this thorough review process, the Form 990 is distributed to the Board of Directors for their review. After all issues are addressed the return is reviewed by the Chief Operating Officer prior to electronically filing with the Internal Revenue Service.
Form 990, Part VI, Section B, line 12c	Annually, all board members and employees (including officers) are required to review the Code of Conduct, formally acknowledge their understanding of the Code, and disclose any real or potential conflicts of interest. Disclosures are reviewed by appropriate management (or in the case of a board member, the Board Chair, the Corporate Secretary's Office, and if necessary, the Governance Committee), and the Ethics & Compliance Office. The appropriate resolution plan is implemented (for example, recusal from participating in any deliberations and decisions relevant to the disclosure). The Ethics & Compliance Office monitors compliance (with the assistance of the Corporate Secretary's Office for board members) with these requirements and ensures proper follow-up as needed.
Form 990, Part VI, Section B, line 15	AARP considers relevant for-profit and not-for-profit data since this is the landscape in which AARP competes for talent. Establishing the appropriate compensation for positions and jobs considers external market pricing (where possible) from an independent, third party compensation consulting firm, internal criteria, and an individual's actual performance and contribution. Internal criteria are based on a standard approach that measures the internal value of positions, including: complexity and scope of responsibility, skill set and competencies, education and experience, and the reporting relationship of the position. An individual's actual performance and contribution is measured through AARP's performance management approach and then rewarded through AARP's annual base pay merit and incentive awards programs. For the CEO, the Compensation Committee, which is comprised of independent directors, engaged an independent third-party compensation consultant to review and report on the competitiveness and reasonableness of the CEO's total remuneration. Based on that report, the Compensation Committee recommended that the Board of Directors approve of the CEO's remuneration and after review and discussion, the independent members of the Board of Directors approved the Committee's recommendation. These deliberations and actions were recorded in the Committee and Board minutes. For the Executive Vice Presidents (listed in Part VII), the compensation recommendations of the CEO are provided to the Compensation Committee together with external comparability data provided by an independent third-party compensation consulting firm. The Compensation Committee reviewed and approved the 2020 recommendations, and its deliberations and action were recorded in the Committee's minutes.
Form 990, Part VI, Section C, line 19	AARP makes its Form 990 available on its website at www.aarp.org or upon request to the General Counsel's Office. AARP's audited financial statements and conflict of interest policy are also available on its website at www.aarp.org. AARP's Form 1024 will be made public upon request to AARP's Office of General Counsel. All other governing documents will be made available to the public in the event those documents are included in a filing with the Internal Revenue Service.
Part VII, Sec. A, Officers, Key Employees, and Highest Compensated Employee	AARP has a standard 40 hour work week and are the average hours disclosed on Form 990. Officers, key employees, and highest compensated employees often work in excess of that amount.
Form 990, Part IX, line 11g	Consulting and Professional Services: Program service expenses 213,516,372. Management and general expenses 19,835,539. Fundraising expenses 15,511. Total expenses 233,367,422. Member Call Centers: Program service expenses 19,768,740. Management and general expenses 0. Fundraising expenses 0. Total expenses 19,768,740.
Form 990, Part XI, line 9:	Actuarial adjustments for Pension and PRHB plan 159,113,954.
Schedule R, Part V, Question 2, Transactions with Related Organizations	The AARP Insurance Plan is a grantor trust established by an Agreement and Declaration of Trust for the purpose of making group health insurance and other health-related products and services available to AARP, Inc. members. Agreements between AARP, Inc., AARP Services, Inc., and several insurance companies enable AARP-branded insurance products to be made available to AARP members. At the direction of the third party insurance carriers, the Plan pays AARP, Inc. a portion of the total premiums collected for the use of its intellectual property, which is reported as royalties in the consolidated statements of activities.

Additional Data

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
AARP

Employer identification number
95-1985500

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) AARP Properties LLC 601 E Street NW Washington, DC 20049 95-1985500	Real estate holding company	DE			AARP
(2) AARP 650 F 2-3 LLC 601 E Street NW Washington, DC 20049 95-1985500	Real estate holding company	DE			AARP
(3) AARP 650 F 4-5 LLC 601 E Street NW Washington, DC 20049 95-1985500	Real estate holding company	DE			AARP
(4) AARP Carson Place LLC 601 E Street NW Washington, DC 20049 95-1985500	Real estate holding company	DE			AARP
(5) AARP Watson Plaza LLC 601 E Street NW Washington, DC 20049 95-1985500	inactive	DE			AARP
(6) AARP Andrus Insurance Fund LLC 601 E Street NW Washington, DC 20049 95-1985500	Insurance captive	DC			AARP
(7) AARP Brain Health Fund LLC 601 E Street NW Washington, DC 20049 82-4300076	Investment fund to support dementia and other brain health research	DE			AARP

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No
(1)AARP Foundation 601 E Street NW Washington, DC 20049 52-0794300	Foundation dedicated to persons over 50 at social and economic risk	DC	501(c)(3)	509(a)(1)	AARP	Yes	
(2) Legal Counsel for the Elderly 601 E Street NW Washington, DC 20049 52-1194741	Provides free or low cost legal assistance and education to DC elderly	DC	501(c)(3)	509(a)(1)	AARP	Yes	
(3) Wish of a Lifetime 303 East 17th Ave Ste 850 Denver, CO 80203 26-2123649	Shift how society values seniors by granting/sharing lifelong wishes	CO	501(c)(3)	509(a)(1)	AARP	Yes	
(4) Older Adults Technology Services 168 7th Street Suite 3A Brooklyn, NY 11215 55-0882599	Harness the power of technology to change the way we age.	NY	501(c)(3)	509(a)(1)	AARP	Yes	
(5)AARP Insurance Plan 601 E Street NW Washington, DC 20049 52-6069387	Grantor Trust holding certain AARP group health insurance policies	DC	501(c)(4)		AARP	Yes	
(6)AARP Foundation Trust co BlackRock Instl Trust Company 400 Howard Street San Francisco, CA 94105 30-6645384	Grantor Trust holding certain exchange traded funds in investment portfolio	CA	501(c)(3)	509(a)(1)	AARP Foundation		No
(7)AARP Trust co BlackRock Institutional Trust Company NA TTE 400 Howard Street San Francisco, CA 94105 30-6645385	Grantor Trust holding certain exchange traded funds in investment portfolio	CA	501(c)(4)		AARP	Yes	

Part III **Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) No
(1) AARP Financial Services Corporation 601 E Street NW Washington, DC 20049 52-1367607	Real estate holding company	DE	AARP	C	360,724	6,943,364	100.000 %	Yes	
(2) AARP Services Inc (consolidated) 620 F Street NW Washington, DC 20004 52-2141065	Quality control and research	DE	AARP	C	158,291,055	102,744,796	100.000 %	Yes	

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)**annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1d	Yes	
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f	Yes	
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	Yes	
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	1o		No
p Reimbursement paid to related organization(s) for expenses	1p	Yes	
q Reimbursement paid by related organization(s) for expenses	1q	Yes	
r Other transfer of cash or property to related organization(s)	1r	Yes	
s Other transfer of cash or property from related organization(s)	1s	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)AARP Foundation (cash contributions)	B	7,766,838	cash paid
(2)AARP Foundation (subgrants for charitable activities)	C	1,063,696	grant agreements
(3)AARP Foundation (bond standby agreement)	D	25,000,000	in the event of default
(4)AARP Foundation (in-kind shared services)	L	26,333,619	allocable costs incurred
(5)AARP Foundation (in-kind advertising)	L	5,028,026	publication space FMV
(6)AARP Foundation (web advertising space)	L	100,000	FMV
(7)AARP Foundation (in-kind rent)	N	34,228	cost
(8)AARP Foundation (mailing list)	N	0	see supplemental information
(9)AARP Foundation (maintenance)	Q	823,142	costs incurred
(10)AARP Foundation (shared employee reimbursement)	P	438,623	actual salaries for time reported
(11)AARP Foundation (annual fee line of credit)	S	25,000	cash paid
(12)AARP Foundation (worker's compensation insurance)	S	2,446,704	premiums paid
(13) Legal Counsel for the Elderly (cash contributions)	B	3,586,321	cash paid
(14) Legal Counsel for the Elderly (in-kind shared services)	L	3,881,095	allocable costs incurred
(15) Legal Counsel for the Elderly (insurance)	S	17,419	premiums paid
(16) Wish of a Lifetime (cash contributions)	B	2,000,001	cash paid
(17) Wish of a Lifetime (in-kind shared services)	L	898,193	allocable costs incurred
(18) Wish of a Lifetime (in-kind rent)	L	136,304	cost
(19) Wish of a Lifetime (insurance)	S	5,888	premiums paid
(20) Older Adults Technology Services (cash contributions)	B	5,136,152	cash paid
(21) Older Adults Technology Services (in-kind shared service)	L	3,345,003	allocable costs incurred
(22)AARP Services Inc (advertising)	L	1,326,837	FMV
(23)AARP Services Inc (consulting services)	M	99,364,370	FMV
(24)AARP Services Inc (shared services)	Q	18,109,041	allocable costs incurred
(25)AARP Services Inc (insurance)	Q	92,248	premiums paid
(26)AARP Services Inc (leasehold improvements)	S	3,848,781	cost of property
(27)AARP Services Inc (benefit plans)	R	3,371,727	portion of plan funding
(28) Older Adults Technology Services (insurance)	S	13,616	premiums paid
(29)AARP Services Inc	F	35,000,000	dividend paid
(30)AARP Services Inc (software licensing)	J	9,861,722	FMV
(31)AARP Insurance Plan	S	648,064,097	see Schedule O
(32) Legal Counsel for the Elderly (in-kind rent)	N	2,054,848	cost

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Return Reference	Explanation
Part V: Transactions with related organizations, line 2(a)-(d), row (10)	AARP and AARP Foundation, its affiliated charity, share mailing lists. AARP does not rent its mailing list to other organizations, so a fair market value of the benefit to the Foundation has not been established. The AARP list is much larger and thus presumably more valuable than the Foundation list. Moreover, the vast majority of names on the AARP Foundation list are already on the AARP list, as they are also AARP members.

Additional Data

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