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Form 990 Return of Organization Exempt From Income Tax

OMB No 1545-0047

2006

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Department of the Treasury
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

A For the 2006 calendar year, or tax year beginning 01-01-2006 and ending 12-31-2006

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

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
AMERICAN ENTERPRISE INSTITUTE FOR
PUBLIC POLICY RESEARCH

Number and street (or P O box if mail is not delivered to street address) | Room/suite
1150 SEVENTEENTH STREET NW

City or town, state or country, and ZIP + 4
WASHINGTON, DC 200364670

D Employer identification number
53-0218495

E Telephone number
(202) 862-5800

F Accounting method ☐ Cash ☑ Accrual
☐ Other (specify) ▶

● **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

G Web site: ▶ WWW AEI ORG

J Organization type (check only one) ▶ ☑ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check here ▶ ☐ if the organization is not a 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than 25,000 A return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 55,845,464

H and I are not applicable to section 527 organizations

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

H(b) If "Yes" enter number of affiliates ▶

H(c) Are all affiliates included? ☐ Yes ☐ No
(If "No," attach a list See instructions)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☑ No

I Group Exemption Number ▶

M Check ▶ ☐ if the organization is **not** required to attach Sch B (Form 990, 990-EZ, or 990-PF)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances *(See the instructions.)*

Revenue	1	Contributions, gifts, grants, and similar amounts received				
	a	Contributions to donor advised funds	1a			
	b	Direct public support (not included on line 1a)	1b	20,643,029		
	c	Indirect public support (not included on line 1a)	1c			
	d	Government contributions (grants) (not included on line 1a)	1d			
	e	**Total** (add lines 1a through 1d) (cash $ 19,670,798 noncash $ 972,231)			1e	20,643,029
	2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	1,215,330
	3	Membership dues and assessments			3	
	4	Interest on savings and temporary cash investments			4	
	5	Dividends and interest from securities			5	270,866
	6a	Gross rents	6a			
	b	Less rental expenses	6b			
	c	Net rental income or (loss) subtract line 6b from line 6a			6c	
	7	Other investment income (describe ▶)			7	

		(A) Securities		(B) Other		
8a	Gross amount from sales of assets other than inventory	33,472,269	8a			
b	Less cost or other basis and sales expenses	28,048,655	8b			
c	Gain or (loss) (attach schedule)	5,423,614	8c			
d	Net gain or (loss) Combine line 8c, columns (A) and (B)				8d	5,423,614

	9	Special events and activities (attach schedule) If any amount is from **gaming**, check here ▶ ☐				
	a	Gross revenue (not including $ ____ of contributions reported on line 1b)	9a			
	b	Less direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events Subtract line 9b from line 9a			9c	
	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a			10c	
	11	Other revenue (from Part VII, line 103)			11	243,970
	12	**Total revenue** Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11			12	27,796,809
Expenses	13	Program services (from line 44, column (B))			13	18,358,850
	14	Management and general (from line 44, column (C))			14	3,938,097
	15	Fundraising (from line 44, column (D))			15	1,156,105
	16	Payments to affiliates (attach schedule)			16	
	17	**Total expenses** Add lines 16 and 44, column (A)			17	23,453,052
Net Assets	18	Excess or (deficit) for the year Subtract line 17 from line 12			18	4,343,757
	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	69,258,207
	20	Other changes in net assets or fund balances (attach explanation)			20	441,894
	21	Net assets or fund balances at end of year Combine lines 18, 19, and 20			21	74,043,858

Part II **Statement of Functional Expenses** All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others *(See the instructions.)*

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		**(A) Total**	**(B)** Program services	**(C)** Management and general	**(D)** Fundraising
22a Grants paid from donor advised funds (attach Schedule) (cash $0 noncash $0) If this amount includes foreign grants, check here ▶ ☐	**22a**				
22b Other grants and allocations (attach schedule) (cash $0 noncash $0) If this amount includes foreign grants, check here ▶ ☐	**22b**				
23 Specific assistance to individuals (attach schedule)	**23**				
24 Benefits paid to or for members (attach schedule)	**24**				
25a Compensation of current officers, directors, key employees etc Listed in Part V-A (attach schedule)	**25a**	1,918,711	1,204,596	582,714	131,401
b Compensation of former officers, directors, key employees etc listed in Part V-B (attach schedule)	**25b**				
c Compensation and other distributions not icluded above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	**25c**				
26 Salaries and wages of employees not included on lines 25a, b and c	**26**	8,850,190	5,574,359	2,668,182	607,649
27 Pension plan contributions not included on lines 25a, b and c	**27**	684,817	418,081	221,127	45,609
28 Employee benefits not included on lines 25a - 27	**28**	1,038,794	634,081	335,479	69,234
29 Payroll taxes	**29**	694,258	423,845	224,176	46,237
30 Professional fundraising fees	**30**				
31 Accounting fees	**31**	52,861		52,861	
32 Legal fees	**32**	71,149	19,653	51,496	
33 Supplies	**33**	595,383	531,054	33,399	30,930
34 Telephone	**34**	112,167	65,543	40,314	6,310
35 Postage and shipping	**35**	239,526	118,811	102,242	18,473
36 Occupancy	**36**	2,249,659	1,092,903	1,079,038	77,718
37 Equipment rental and maintenance	**37**	504,764	9,115	470,775	24,874
38 Printing and publications	**38**	887,898	757,494	122,911	7,493
39 Travel	**39**	449,315	343,280	79,418	26,617
40 Conferences, conventions, and meetings	**40**	1,705,595	1,229,011	470,073	6,511
41 Interest	**41**				
42 Depreciation, depletion, etc (attach schedule)	**42**	583,489	389,473	165,419	28,597
43 Other expenses not covered above (itemize)					
a INSURANCE	**43a**	75,280		75,280	
b SCHOLAR FEES	**43b**	939,980	879,965	59,776	239
c PROGRAM SUPPORT	**43c**		3,304,869	-3,304,869	
d SERVICE FEES	**43d**	61,899	2,938	58,916	45
e OTHER PROFESSIONAL FEES	**43e**	1,737,317	1,359,779	349,370	28,168
f	**43f**				
g	**43g**				
44 **Total functional expenses.** Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13–15)	**44**	23,453,052	18,358,850	3,938,097	1,156,105

Joint Costs. Check ▶ ☐ if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in **(B)** Program services? ▶ ☐ **Yes** ☑ **No**

If "Yes," enter **(i)** the aggregate amount of these joint costs $0, **(ii)** the amount allocated to Program services $0, **(iii)** the amount allocated to Management and general $0, and **(iv)** the amount allocated to Fundraising $0

Part III Statement of Program Service Accomplishments *(See the instructions.)*

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization How the public perceives an organization in such cases may be determined by the information presented on its return Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments

What is the organization's primary exempt purpose? ▶ EDUCATIONAL RESEARCH All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served, publications issued, etc Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)	**Program Service Expenses** (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
a THE AMERICAN ENTERPRISE - 6 ISSUES PER YEAR MAGAZINE OFFERING STATISTICS ON SOCIAL & ECONOMIC INDICATORS, DIGEST OF RECENTLY PUBLISHED POLICY STUDIES AND ARTICLES FOCUSING ON TIMELY ISSUES IN THE PUBLIC POLICY ARENA (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	1,789,782
b ECONOMIC POLICY - SCHOLARS IN AREAS OF GENERAL ECONOMICS, FISCAL/MONETARY POLICY, INTERNATIONAL TRADE, FINANCIAL MARKETS/REGULATION & HEALTH CONDUCT RESEARCH TO FURTHER UNDERSTANDING OF FREE ECONOMICS, DISSEMINATED THROUGH SEMINARS & PUBLICATIONS (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	7,308,215
c FOREIGN AND DEFENSE POLICY - SCHOLARS ANALYZE RELATIONS BETWEEN U S & ALLIES, SECURITY THREATS GLOBALLY, TRANSITION TO DEMOCRATIC CAPITALISM IN DEVELOPING & POST-COMMUNIST COUNTRIES, TERRORISM AND PERFORMANCE OF INTERNATIONAL ORGANIZATIONS (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	4,187,674
d SOCIAL AND POLITICAL STUDIES - SCHOLARS' STUDIES INCLUDE CONSTITUTIONAL LAW & THEORY, PUBLIC OPINION, POLITICAL CAMPAIGN ANALYSIS, GOVERNMENT, THE UNDERCLASS AND ITS STRUGGLES AND THE RELATION BETWEEN RELIGION AND ORDERED LIBERTY (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	5,073,179
e Other program services (attach schedule) (Grants and allocations $) If this amount includes foreign grants, check here ▶ ☐	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) . . . . ▶	18,358,850

Part IV **Balance Sheets** *(See the instructions.)*

Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*			(A) Beginning of year		(B) End of year
Assets					
45 Cash—non-interest-bearing			168	**45**	500
46 Savings and temporary cash investments			3,632,321	**46**	4,433,853
47a Accounts receivable	**47a**	301,500			
b Less allowance for doubtful accounts	**47b**		304,088	**47c**	301,500
48a Pledges receivable	**48a**	11,380,395			
b Less allowance for doubtful accounts	**48b**	69,784	12,300,697	**48c**	11,310,611
49 Grants receivable				**49**	
50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)				**50a**	
b Receivables from other disqualified persons (as defined under section 4958(c)(3)(B) (attach schedule)				**50b**	
51a Other notes and loans receivable (attach schedule)	**51a**				
b Less allowance for doubtful accounts	**51b**			**51c**	
52 Inventories for sale or use			157,749	**52**	233,447
53 Prepaid expenses and deferred charges			32,371	**53**	190,931
54a Investments—publicly-traded securities ▶ ☐ Cost ☑ FMV			20,947,630	**54a**	4,582,661
b Investments—other securities (attach schedule) ▶ ☐ Cost ☑ FMV			32,777,687	**54b**	54,447,461
55a Investments—land, buildings, and equipment basis	**55a**				
b Less accumulated depreciation (attach schedule)	**55b**			**55c**	
56 Investments—other (attach schedule)				**56**	
57a Land, buildings, and equipment basis	**57a**	7,575,917			
b Less accumulated depreciation (attach schedule)	**57b**	5,669,749	2,312,772	**57c**	1,906,168
58 Other assets, including program-related investments (describe ▶)				**58**	
59 **Total assets** (must equal line 74) Add lines 45 through 58			72,465,483	**59**	77,407,132
Liabilities					
60 Accounts payable and accrued expenses			1,034,774	**60**	1,242,067
61 Grants payable				**61**	
62 Deferred revenue			583,387	**62**	607,370
63 Loans from officers, directors, trustees, and key employees (attach schedule)				**63**	
64a Tax-exempt bond liabilities (attach schedule)				**64a**	
b Mortgages and other notes payable (attach schedule)				**64b**	
65 Other liabilities (describe ▶)			1,589,115	**65**	1,513,837
66 **Total liabilities** Add lines 60 through 65			3,207,276	**66**	3,363,274
Net Assets or Fund Balances					
Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 67 through 69 and lines 73 and 74					
67 Unrestricted			2,147,428	**67**	2,333,995
68 Temporarily restricted			59,855,575	**68**	63,584,269
69 Permanently restricted			7,255,204	**69**	8,125,594
Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74					
70 Capital stock, trust principal, or current funds				**70**	
71 Paid-in or capital surplus, or land, building, and equipment fund				**71**	
72 Retained earnings, endowment, accumulated income, or other funds				**72**	
73 **Total net assets or fund balances** Add lines 67 through 69 **or** lines 70 through 72 (Column (A) **must** equal line 19 and column (B) **must** equal line 21)			69,258,207	**73**	74,043,858
74 **Total liabilities and net assets / fund balances** Add lines 66 and 73			72,465,483	**74**	77,407,132

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return *(See the instructions.)*

a	Total revenue, gains, and other support per audited financial statements			a	28,426,203
b	Amounts included on line **a** but not on Part I, line 12				
1	Net unrealized gains on investments	b1	441,894		
2	Donated services and use of facilities	b2	187,500		
3	Recoveries of prior year grants	b3			
4	Other (specify)	b4			
	Add lines **b1** through **b4**			b	629,394
c	Subtract line **b** from line **a**			c	27,796,809
d	Amounts included on Part I, line 12, but not on line **a**				
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify)	d2			
	Add lines **d1** and **d2**			d	629,394
e	**Total revenue** (Part I, line 12) Add lines **c** and **d** ▶			e	27,796,809

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements			a	23,640,552
b	Amounts included on line **a** but not on Part I, line 17				
1	Donated services and use of facilities	b1	187,500		
2	Prior year adjustments reported on Part I, line 20	b2			
3	Losses reported on Part I, line 20	b3			
4	Other (specify)	b4			
	Add lines **b1** through **b4**			b	187,500
c	Subtract line **b** from line **a**			c	23,453,052
d	Amounts included on Part I, line 17, but not on line **a:**				
1	Investment expenses not included on Part I, line 6b	d1			
2	Other (specify)	d2			
	Add lines **d1** and **d2**			d	
e	**Total expenses** (Part I, line 17) Add lines **c** and **d** ▶			e	23,453,052

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) *(See the instructions.)*

(A) Name and address	**(B)** Title and average hours per week devoted to position	**(C)** Compensation **(If not paid, enter -0-.)**	**(D)** Contributions to employee benefit plans & deferred compensation plans	**(E)** Expense account and other allowances
See Additional Data Table				

Part V-A Current Officers, Directors, Trustees, and Key Employees *(continued)*

			Yes	No
75a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ 37			
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	75b		No
c	Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization" ▶	75c		No
	If "Yes," attach a statement that includes the information described in the instructions			
d	Does the organization have a written conflict of interest policy?	75d	Yes	

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits

(If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (If not paid enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances

Part VI Other Information *(See the instructions.)*

			Yes	No
76	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	76		No
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		No
	If "Yes," attach a conformed copy of the changes			
78a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a	Yes	
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	78b	Yes	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		No
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization?	80a		No
b	If "Yes," enter the name of the organization ▶ ____ and check whether it is ☐ exempt **or** ☐ nonexempt			
81a	Enter direct or indirect political expenditures (See line 81 instructions) 81a 0			
b	Did the organization file **Form 1120-POL** for this year?	81b		No

Part VI Other Information *(continued)*

				Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		**82a**	Yes	
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	**82b** 187,500			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?		**83a**	Yes	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		**83b**	Yes	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		**84a**		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		**84b**		
85	*501(c)(4), (5), or (6) organizations.* **a** Were substantially all dues nondeductible by members?		**85a**		
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?		**85b**		
	If "Yes," was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed the prior year				
c	Dues assessments, and similar amounts from members	**85c**			
d	Section 162(e) lobbying and political expenditures	**85d**			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	**85e**			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	**85f**			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		**85g**		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		**85h**		
86	*501(c)(7) orgs.* Enter **a** Initiation fees and capital contributions included on line 12	**86a** 0			
b	Gross receipts, included on line 12, for public use of club facilities	**86b** 0			
87	*501(c)(12) orgs.* Enter **a** Gross income from members or shareholders	**87a** 0			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	**87b** 0			
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX		**88a**		No
b	At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)? If yes complete Part XI		**88b**		No
89a	*501(c)(3) organizations* Enter Amount of tax imposed on the organization during the year under section 4911 ▶ 0 , section 4912 ▶ 0 , section 4955 ▶ 0				
b	*501(c)(3) and 501(c)(4) orgs.* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		**89b**		No
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶				
d	Enter Amount of tax on line 89c, above, reimbursed by the organization ▶				
e	*All organizations.* At any time during the tax year was the organization a party to a prohibited tax shelter transaction?		**89e**		No
f	*All organizations.* Did the organization acquire direct or indirect interest in any applicable insurance contract?		**89f**		No
g	*For supporting organizations and sponsoring organizations maintaining donor advised funds.* Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		**89g**		No

90a List the states with which a copy of this return is filed ▶ DC,NJ,NY

b Number of employees employed in the pay period that includes March 12, 2006 (See instructions) **90b** 150

91a The books are in care of ▶ MARTHA NEWTON Telephone no ▶ (202) 862-7167

Located at ▶ 1150 SEVENTEENTH STREET NW WASHINGTON, DC ZIP + 4 ▶ 200364670

			Yes	No
b	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)?	**91b**		No

If "Yes," enter the name of the foreign country ▶

See the instructions for exceptions and filing requirements for **Form TD F 90-22.1**, Report of Foreign Bank and Financial Accounts

Part VI Other Information *(continued)*

			Yes	No
c	At any time during the calendar year, did the organization maintain an office outside of the United States?	91c		No
	If "Yes," enter the name of the foreign country ▶			
92	*Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* **Form 1041**—Check here ▶ ☐			
	and enter the amount of tax-exempt interest received or accrued during the tax year ▶	92		

Part VII Analysis of Income-Producing Activities ***(See the instructions.)***

Note: *Enter gross amounts unless otherwise indicated.*

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a EDU SEM/CONF					415,018
b RESEARCH PUB/MATER	541800	68,312			698,260
c ROYALTIES SALE PUB			15	11,430	
d MAIL LIST RENTAL			13	22,310	
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	270,866	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b non debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory	900000	77,232	18	5,346,382	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a PARTNERSHIP	900000	243,970			
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		389,514		5,650,988	1,113,278

105 Total (add line 104, columns (B), (D), and (E)) ▶ 7,153,780

Note: *Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.*

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes ***(See the instructions.)***

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
	See Additional Data Table

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities ***(See the instructions.)***

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts ***(See the instructions.)***

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ **Yes** ☑ **No**

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ **Yes** ☑ **No**

NOTE: *If "Yes" to* ***(b)****, file Form 8870* ***and*** *Form 4720 (see instructions).*

Part XI Information Regarding Transfers To and From Controlled Entities *Complete only if the organization is a controlling organization as defined in section 512(b)(13)*

		Yes	No
106	Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity		

	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
	Totals			

		Yes	No
107	Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity		

	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
	Totals			

		Yes	No
108	Did the organization have a binding written contract in effect on August 17, 2006 covering the interests, rents, royalties and annuities described in question 107 above?		

Please Sign Here

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

****** 2007-11-01
Signature of officer Date

MARTHA NEWTON CFO
Type or print name and title

Paid Preparer's Use Only

Preparer's signature: B Jennine Anderson	Date	Check if self-empolyed	Preparer's SSN or PTIN (See Gen Inst W)
Firm's name (or yours if self-employed), address, and ZIP + 4: UHY Advisors Mid-Atlantic MD Inc 6851 Oak Hall Lane Suite 300 Columbia, MD 21045			EIN Phone no (410) 720-5220

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2006

Name of the organization
AMERICAN ENTERPRISE INSTITUTE FOR PUBLIC POLICY RESEARCH

Employer identification number
53-0218495

Part I **Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**
(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
KEVIN HASSETT 1150 SEVENTEENTH STREET NW WASHINGTON, DC 20036	SCHOLAR 40 0	174,750	30,709	0
MICHAEL S GREVE 1150 SEVENTEENTH STREET NW WASHINGTON, DC 20036	SCHOLAR 40 0	152,500	19,359	0
CHARLES MURRAY 1150 SEVENTEENTH STREET NW WASHINGTON, DC 20036	SCHOLAR 40 0	142,500	26,839	0
DOUGLAS BESHAROV 1150 SEVENTEENTH STREET NW WASHINGTON, DC 20036	SCHOLAR 40 0	140,000	24,211	0
NICHOLAS EBERSTADT 1150 SEVENTEENTH STREET NW WASHINGTON, DC 20036	SCHOLAR 40 0	135,000	25,939	0
Total number of other employees paid over $50,000 ▶	5			

Part II-A **Compensation of the Five Highest Paid Independent Contractors for Professional Services**
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
JOEL M SCHWARTZ 531 PICO WAY SACRAMENTO, CA 95819	SCHOLAR	115,150
DORE GOLD 17 MEHALKAI HA MAYIUM STREET OLD KATAMON JERUSALEM 093222 IS	SCHOLAR	96,000
ALLAN H MELTZER 537 N NEVILLE STREET APT 6B PITTSBURGH, PA 15217	SCHOLAR	75,000
MARIO VILLARREAL 1931 N CLEVELAND STREET APT 412 ARLINGTON, VA 22201	SCHOLAR	65,000
RICHARD VEDDER 7464 RIDGEVIEW CIRCLE ATHENS, OH 45701	SCHOLAR	60,000
Total number of others receiving over $50,000 for professional services ▶ 5		

Part II-B **Compensation of the Five Highest Paid Independent Contractors for Other Services**
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None". See page 2 for instructions.)

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
None		
Total number of other contractors receiving over $50,000 for other services ▶		

Part III **Statements About Activities** (See page 2 of the instructions.)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, include any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶$ ____________ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)	1		No
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? *(If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)*			
a	Sale, exchange, or leasing property?	2a		No
b	Lending of money or other extension of credit?	2b		No
c	Furnishing of goods, services, or facilities?	2c		No
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?	2d	Yes	
e	Transfer of any part of its income or assets?	2e		No
3a	Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments)	3a		No
b	Did the organization have a section 403(b) annuity plan for its employees?	3b	Yes	
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment , historic land areas or structures? If "Yes" attach a detailed statement	3c		No
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		No
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g	4a		No
b	Did the organization make any taxable distributions under section 4966?	4b		No
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		No

d Enter the total number of donor advised funds owned at the end of the tax year ▶ ____________

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶ ____________

f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶ 0

g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶ 0

Part IV **Reason for Non-Private Foundation Status** (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is (Please check only **ONE** applicable box)

5 ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)

6 ☐ A school Section 170(b)(1)(A)(ii) (Also complete Part V)

7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8 ☐ A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)

9 ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state** ▶

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)

11a ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)

11b ☐ A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)

12 ☐ An organization that normally receives **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions—subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization

☐ Type I ☐ Type II ☐ Type III - Functionally Integrated ☐ Type III - Other

Provide the following information about the supported organizations. (see page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents? Yes	No	(e) Amount of support?
Total				▶	

14 ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 7 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) ***Use cash method of accounting.***

Note: *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.*

	Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15	Gifts, grants, and contributions received (Do not include unusual grants See line 28)	23,831,268	19,476,933	24,652,342	20,671,224	88,631,767
16	Membership fees received					0
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc , purpose	1,802,595	1,961,162	1,657,439	3,055,203	8,476,399
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	365,350	327,787	266,269	416,659	1,376,065
19	Net income from unrelated business activities not included in line 18					0
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					0
22	Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					0
23	Total of lines 15 through 22	25,999,213	21,765,882	26,576,050	24,143,086	98,484,231
24	Line 23 minus line 17	24,196,618	19,804,720	24,918,611	21,087,883	90,007,832
25	Enter 1% of line 23	259,992	217,659	265,761	241,431	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶ **26a** 1,800,157

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a **Do not file this list with your return.** Enter the total of all these excess amounts ▶ **26b** 25,939,933

c Total support for section 509(a)(1) test Enter line 24, column (e) ▶ **26c** 90,007,832

d Add Amounts from column (e) for lines 18 1,376,065 19 0 22 ______ 26b 25,939,933 ▶ **26d** 27,315,998

e Public support (line 26c minus line 26d total) ▶ **26e** 62,691,834

f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶ **26f** 69 65 %

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person " **Do not file this list with your return.** Enter the sum of such amounts for each year

(2005) ______ (2004) ______ (2003) ______ (2002) ______

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year

(2005) ______ (2004) ______ (2003) ______ (2002) ______

c Add Amounts from column (e) for lines 15 ______ 16 ______ 17 ______ 20 ______ 21 ______ ▶ **27c**

d Add Line 27a total ______ and line 27b total ______ ▶ **27d**

e Public support (line 27c total minus line 27d total) ▶ **27e**

f Total support for section 509(a)(2) test Enter amount from line 23, column (e) ▶ **27f**

g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶ **27g**

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶ **27h**

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant **Do not file this list with your return.** Do not include these grants in line 15

Part V **Private School Questionnaire** (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)			
32	Does the organization maintain the following			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
33	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement			
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check ▶ **a** ☐ if the organization belongs to an affiliated group Check ▶ **b** ☐ if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		**(a)** Affiliated group totals	**(b)** To be completed for all electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	**36**		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	**37**		
38 Total lobbying expenditures (add lines 36 and 37)	**38**		
39 Other exempt purpose expenditures	**39**		
40 Total exempt purpose expenditures (add lines 38 and 39)	**40**		
41 Lobbying nontaxable amount Enter the amount from the following table—	**41**		
42 Grassroots nontaxable amount (enter 25% of line 41)	**42**		
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	**43**		0
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	**44**		0

If the amount on line 40 is—	**The lobbying nontaxable amount is—**
Not over $500,000	20% of the amount on line 40
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

Caution: *If there is an amount on either line 43 or line 44, you must file Form 4720.*

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 13 of the instructions)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	**(a)** 2006	**(b)** 2005	**(c)** 2004	**(d)** 2003	**(e)** Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers		No	
b Paid staff or management (Include compensation in expenses reported on lines **c** through **h.**)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines **c** through **h.**)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 13 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of			
(i) Cash	51a(i)		No
(ii) Other assets	a(ii)		No
b Other transactions			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		No
(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		No
(iii) Rental of facilities, equipment, or other assets	b(iii)		No
(iv) Reimbursement arrangements	b(iv)		No
(v) Loans or loan guarantees	b(v)		No
(vi) Performance of services or membership or fundraising solicitations	b(vi)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		No

d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☑ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

TY 2006 General Explanation Attachment

Name: AMERICAN ENTERPRISE INSTITUTE FOR PUBLIC POLICY RESEARCH

EIN: 53-0218495

Identifier	Return Reference	Explanation
FIXED ASSET SCHEDULE	PART IV - LINE 57	LAND, BUILDINGS & EQUIPMENT FURNITURE & FIXTURES BEGINNING BALANCE 5,614,881 ADDITIONS 126,922 ENDING BALANCE 5,741,803 LEASEHOLD IMPROVEMENTS BEGINNING BALANCE 1,784,150 ADDITIONS 49,964 ENDING BALANCE 1,834,114 TOTAL BEGINNING BALANCE 7,399,031, TOTAL ENDING BALANCE 7,575,917 ACCUM DEPRECIATION BEGINNING BALANCE 4,498,286 ADDITIONS 389,501 ENDING BALANCE 4,887,787 ACCUM AMORTIZATION 587,973 ADDITIONS 193,989 ENDING BALANCE 781,962 TOTAL NET BEGINNING 2,312,772 TOTAL NET ENDING 1,906,168

Identifier	Return Reference	Explanation
DEPRECIATION SCHEDULE - ASSETS	990 PART II, LINE 42	FURNITURE & FIXTURES BEGINNING BALANCE, 4,498,286 ADDITIONS 389,501 ENDING BALANCE 4,887,787 LEASEHOLD IMPROVEMENTS BEGINNING BALANCE, 587,973 ADDITONS 193,989 ENDING BALANCE 781,962 TOTAL BEGINNING 5,086,259 TOTAL ADDITIONS 583,490 TOTAL ENDING 5,669,749

Identifier	Return Reference	Explanation
NET GAIN ON SALE OF SECURITIES	990 PART I - LINE 8	VANGUARD SECURITIES 1,125,454 WACHOVIA SECURITIES 6,827 DODGE & COX INTERNATIONAL STOCK FUND 30,273 THE FAIRHOLME FUND 12,823 OFFIT HALL ABOSOLUTE RETURN FUND OFFSHORE FEEDER, LP 129,102 VALUEACT CAPITAL PARTNERS II, LP 156,525 FARALLON FUNDS 685,498 CAXTON SELECT, LLC 3,277,112 TOTAL 5,423,614

TY 2006 Investments - Securities Schedule

Name: AMERICAN ENTERPRISE INSTITUTE FOR PUBLIC POLICY RESEARCH

EIN: 53-0218495

Description	Book Value	Cost/FMV
OFFIT HALL ABSOLUTE RETURN - OTHER		
FUND OFFSHORE FEEDER, LP - OTHER	3,129,102	F
VALUEACT CAPITAL PTRS II, LP - OTHER	4,226,386	F
FARALLON FUNDS - OTHER	5,685,498	F
EATON PARK OVERSEAS FUND LTD - OTHER	3,000,000	F
GANDHARA FUND LTD - OTHER	2,107,706	F
CAXTON SELECT LLC - OTHER	36,298,769	F

TY 2006 Other Changes in Net Assets Schedule

Name: AMERICAN ENTERPRISE INSTITUTE FOR PUBLIC POLICY RESEARCH

EIN: 53-0218495

Description	Amount
UNREALIZED GAIN	441,894

TY 2006 Other Liabilities Schedule

Name: AMERICAN ENTERPRISE INSTITUTE FOR PUBLIC POLICY RESEARCH

EIN: 53-0218495

Description	Beginning of Year Amount	End of Year Amount
DEFERRED RENT	1,589,115	1,513,837

TY 2006 Self Dealing Statement

Name: AMERICAN ENTERPRISE INSTITUTE FOR PUBLIC POLICY RESEARCH

EIN: 53-0218495

Line Number	Explanation
2d	SEE PART V-A

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2006 Supplemental Support Schedule

Name: AMERICAN ENTERPRISE INSTITUTE FOR PUBLIC POLICY RESEARCH

EIN: 53-0218495

Year	Gifts, Grants and Contributions Received	Membership Fees Received	Gross Receipts From Admissions, Etc.	Gross Investment Income And Post 1975UBI	Net UBI Pre 1975	Tax Revenues Levied For Organization's Benefit	Value Of Services, Facilities Furnished By Government	Other Income	Total
2005	23,831,268		1,802,595	365,350					25,999,213
2004	19,476,933		1,961,162	327,787					21,765,882
2003	24,652,342		1,657,439	266,269					26,576,050
2002	20,671,224		3,055,203	416,659					24,143,086

Additional Data

Software ID:
Software Version:
EIN: 53-0218495
Name: AMERICAN ENTERPRISE INSTITUTE FOR PUBLIC POLICY RESEARCH

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
CHRISTOPHER DEMUTH 1150 SEVENTEENTH STREET NW WASHINGTON,DC 200364670	PRESIDENT/TRUSTEE 40 0	656,250	36,559	0
DAVID GERSON 1150 SEVENTEENTH STREET NW WASHINGTON,DC 200364670	EXECUTIVE VICE PRES 40 0	340,000	33,931	0
DANIELLE PLETKA 1150 SEVENTEENTH STREET NW WASHINGTON,DC 200364670	VICE PRESIDENT 40 0	172,500	21,759	0
HENRY OLSEN III 1150 SEVENTEENTH STREET NW WASHINGTON,DC 200364670	VICE PRESIDENT 40 0	154,776	27,904	0
JASON BERTSCH 1150 SEVENTEENTH STREET NW WASHINGTON,DC 200364670	VICE PRESIDENT 40 0	145,000	27,139	0
ELIZABETH BOWEN 1150 SEVENTEENTH STREET NW WASHINGTON,DC 200364670	BOARD SECRETARY 40 0	125,700	22,083	0
MARTHA NEWTON 1150 SEVENTEENTH STREET NW WASHINGTON,DC 200364670	CFO/CONTROLLER 40 0	81,359	18,714	0
MARGARET GOCHAL 1150 SEVENTEENTH STREET NW WASHINGTON,DC 200364670	OUTGOING CFO 40 0	45,843	9,194	0
BRUCE KOVNER CAXTON ASSOCIATES LLC NEW YORK,NY 10022	TRUSTEE 1 0	0	0	0
LEE R RAYMOND EXXON MOBIL CORPORATION 5959 LAS COLINAS BLVD IRVING,TX 750392298	TRUSTEE 1 0	0	0	

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
TULLY M FRIEDMAN FRIEDMAN FLEISCHER LOWE LLC 1 MARITIME PLAZA STE 2200 SAN FRANCISCO,CA 94111	TRUSTEE 1 0	0	0	0
GORDON M BINDER COASTVIEW CAPITAL LLC 11111 SANTA MONICA BLVD STE 1851 LOS ANGELES,CA 90025	TRUSTEE 1 0	0	0	0
HARLAN CROW CROW HOLDINGS 2100 MCKINNEY AVE STE 700 DALLAS,TX 752012997	TRUSTEE 1 0	0	0	0
JOHN V FARACI INTERNATIONAL PAPER COMPANY 6420 POPLAR AVENUE TOWER III 2-120 MEMPHIS,TN 38197	TRUSTEE 1 0	0	0	0
CHRISTOPHER B GALVIN HARRISON STREET CAPTIAL LLC 71 SOUTH WACKER DR STE 3575 CHICAGO,IL 60606	TRUSTEE 1 0	0	0	0
RAYMOND V GILMARTIN MERK CO INC 50 TICE BLVD WOODCLIFF LAKE,NJ 07677	TRUSTEE 1 0	0	0	0
HARVEY GOLUB AMERICAN EXPRESS COMPANY 500 FRANK W BURR BLVD SUITE 4 TEANECK,NJ 07666	TRUSTEE 1 0	0	0	0
ROBERT GREENHILL GREENHILL CO INC 1150 17TH ST NW 23RD FLR WASHINGTON,DC 20036	TRUSTEE 1 0	0	0	0
ROGER HERTOG ALLIANCE BERNSTEIN 1345 AVENUE OF THE AMERICAS 39TH FL NEW YORK,NY 101050096	TRUSTEE 1 0	0	0	0
MARTIN M KOFFEL URS CORPORATION 600 MONTGOMERY STREET 25TH FL SAN FRANCISCO,CA 941112727	TRUSTEE 1 0	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
MARC S LIPSHULTZ KOHLBERG KRAVIS ROBERTS CO 9 WEST 57TH STREET 42ND FLOOR NEW YORK,NY 10019	TRUSTEE 1 0	0	0	0
JOHN A LUKE JR MEAD WESTVACO CORPORATION 11013 WEST BROAD STREET GLEN ALLEN,VA 230605937	TRUSTEE 1 0	0	0	0
L BEN LYTLE HEALTHWAYS INC 9280 SOUTH KYRENE RD STE 107 TEMPE,AZ 85284	TRUSTEE 1 0	0	0	0
ROBERT A PRITZKER COLSON AND ASSOCIATES 1150 17TH ST NW STE 2420 WASHINGTON,DC 20036	TRUSTEE 1 0	0	0	0
J PETER RICKETTS PLATTE INSTITUTE 6450 PRAIRIE AVE OMAHA,NE 68132	TRUSTEE 1 0	0	0	0
KEVIN B ROLLINS 2500 STRARFORD DR AUSTIN,TX 78746	TRUSTEE 1 0	0	0	0
D GIDEON SEARLE THE SERAFIN GROUP LLC 750 GREEN BAY RD WINNETKA,IL 60093	TRUSTEE 1 0	0	0	0
MEL SEMBLER THE SEMBLER COMPANY 5858 CENTRAL AVENUE WASHINGTON,DC 20036	TRUSTEE 1 0	0	0	0
WILLIAM S STAVROPOULOS THE DOW CHEMICAL COMPANY 2030 DOW CENTER MIDLAND,TX 48674	TRUSTEE 1 0	0	0	0
WILSON H TAYLOR CIGNA CORPORATION 1601 CHESTNUT ST PHILADELPHIA,PA 19192	TRUSTEE 1 0	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
WILLIAM H WALTON ROCKPOINT GROUP 1 INDEPENDENT DR STE 1600 JACKSONVILLE,FL 32202	TRUSTEE 1 0	0	0	0
JAMES Q WILSON PEPERDINE UNIVERSITY 32910 CAMINO DE BUENA VENTURA MALIBU,CA 902652500	TRUSTEE 1 0	0	0	0
WILLARD C BUTCHER 1150 SEVENTEENTH STREET NW WASHINGTON,DC 200364670	EMERITUS TRUSTEE 1 0	0	0	0
RICHARD B MADDEN 1150 SEVENTEENTH STREET NW WASHINGTON,DC 200364670	EMERITUS TRUSTEE 1 0	0	0	0
ROBERT H MALOTT 1150 SEVENTEENTH STREET NW WASHINGTON,DC 200364670	EMERITUS TRUSTEE 1 0	0	0	0
PAUL W MCCRACKEN 1150 SEVENTEENTH STREET NW WASHINGTON,DC 200364670	EMERITUS TRUSTEE 1 0	0	0	0
PAUL F OREFFICE 1150 SEVENTEENTH STREET NW WASHINGTON,DC 200364670	EMERITUS TRUSTEE 1 0	0	0	0
HENRY WENDT 1150 SEVENTEENTH STREET NW WASHINGTON,DC 200364670	EMERITUS TRUSTEE 1 0	0	0	0
EDWARD B RUST JR STATE FARM INSURANCE COMPANIES ONE STATE FARM PLAZA BLOOMINGTON,IL 617100001	TRUSTEE 1 0	0	0	0

Form 990, Part VIII - Relationship of Activities to the Accomplishment of Exempt Purposes:

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93A	AEI SEMINARS/CONFERENCES/OUTREACH BRING TOGETHER SCHOLARS,
0	POLITICIANS, AND THE GENERAL PUBLIC AND MEDIA TO ADDRESS,
0	DISCUSS, AND DEBATE PUBLIC POLICY ISSUES AND OPTIONS IN THE
0	AREA OF ECONOMIC, HEALTH, ENVIRONMENTAL, REGULATORY,
0	FOREIGN, POLITICAL, AND SOCIAL POLICY
93B	AEI PUBLICATIONS PROVIDE SOURCES OF ORIGINAL NON-PARTISAN,
0	PRACTICAL RESEARCH ON ECONOMIC, HEALTH, ENVIRONMENTAL,
0	REGULATORY, FOREIGN, POLITICAL, AND SOCIAL POLICY