Form **990**

Department of the Treasury
Internal Revenue Service

# 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

**2020**

**Open to Public Inspection**

**A** For the 2020 calendar year, or tax year beginning 01-01-2020 , and ending 12-31-2020

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

**C** Name of organization
AARP FOUNDATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
601 E STREET NW TAX DEPT

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

**D Employer identification number**
52-0794300

E Telephone number
(202) 434-3399

**G** Gross receipts $ 924,118,567

**F** Name and address of principal officer:
LISA MARSH RYERSON
601 E STREET NW TAX DEPT
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) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

**J Website:** ▶ WWW.AARP.ORG/FOUNDATION

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

**L** Year of formation: 1961

**M** State of legal domicile: DC

## Part I Summary

**Activities & Governance**

1 Briefly describe the organization's mission or most significant activities:
A COUNTRY FREE OF POVERTY WHERE NO OLDER PERSON FEELS VULNERABLE. SEE SCHEDULE O.AARP FOUNDATION SERVES VULNERABLE PEOPLE 50+ BY CREATING AND ADVANCING EFFECTIVE SOLUTIONS THAT HELP THEM SECURE THE ESSENTIALS.

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 | 10 |
| 4 | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 10 |
| 5 | Total number of individuals employed in calendar year 2020 (Part V, line 2a) | 5 | 345 |
| 6 | Total number of volunteers (estimate if necessary) | 6 | 38,598 |
| 7a | Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 96,516 |
| b | Net unrelated business taxable income from Form 990-T, line 39 | 7b | 42,723 |

| | | | Prior Year | Current Year |
|---|---|---|---|---|
| Revenue | 8 | Contributions and grants (Part VIII, line 1h) | 263,901,185 | 167,121,308 |
| | 9 | Program service revenue (Part VIII, line 2g) | 1,387,081 | 673,239 |
| | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d ) | 30,703,169 | 19,272,863 |
| | 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | -189,481 | -520,867 |
| | 12 | Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 295,801,954 | 186,546,543 |
| Expenses | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) | 80,209,169 | 69,721,631 |
| | 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) | 38,099,911 | 41,959,162 |
| | 16a | Professional fundraising fees (Part IX, column (A), line 11e) | 1,528,682 | 1,652,307 |
| | b | Total fundraising expenses (Part IX, column (D), line 25) ▶21,950,712 | | |
| | 17 | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) | 67,588,163 | 59,928,874 |
| | 18 | Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) | 187,425,925 | 173,261,974 |
| | 19 | Revenue less expenses. Subtract line 18 from line 12 | 108,376,029 | 13,284,569 |
| Net Assets or Fund Balances | | | Beginning of Current Year | End of Year |
| | 20 | Total assets (Part X, line 16) | 598,934,811 | 636,519,309 |
| | 21 | Total liabilities (Part X, line 26) | 64,765,477 | 54,627,484 |
| | 22 | Net assets or fund balances. Subtract line 21 from line 20 | 534,169,334 | 581,891,825 |

## 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: 2021-11-09

LISA MARSH RYERSON PRESIDENT
Type or print name and title

**Paid Preparer Use Only**

| Print/Type preparer's name | Preparer's signature | Date | Check ☐ if self-employed | PTIN P00955143 |
|---|---|---|---|---|
| Firm's name ▶ ANDERSEN TAX LLC | | | Firm's EIN ▶ 33-1197384 | |
| Firm's address ▶ 400 SOUTH HOPE STREET SUITE 1000 LOS ANGELES, CA 90071 | | | Phone no. (213) 593-2300 | |

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 FOUNDATION ADDRESSES SENIOR POVERTY BY SPARKING BOLD, INNOVATIVE SOLUTIONS THAT HELP VULNERABLE OLDER ADULTS BUILD ECONOMIC OPPORTUNITY AND SOCIAL CONNECTEDNESS - FOSTERING RESILIENCE, STRENGTHENING COMMUNITIES AND RESTORING HOPE. SEE SCHEDULE O.WE OPERATE AT THE INTERSECTION OF COLLABORATION, INNOVATION, LEGAL ADVOCACY AND GRANTMAKING, BY BRINGING TOGETHER INDUSTRY, GOVERNMENT, ACTIVISTS, AND VOLUNTEERS TO FORGE PRACTICAL APPROACHES THAT PAIR BRAINPOWER WITH SOME SERIOUS WILLPOWER.

**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 $ 74,096,938 including grants of $ 57,504,270 ) (Revenue $ 0 )

THE SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM (SCSEP)- SCSEP IS THE NATION'S OLDEST PROGRAM TO HELP LOW-INCOME, UNEMPLOYED INDIVIDUALS AGED 55+ FIND WORK. AARP FOUNDATION FIRST MATCHES ELIGIBLE OLDER JOB SEEKERS WITH LOCAL NONPROFITS AND PUBLIC AGENCIES SO THEY CAN INCREASE SKILLS AND BUILD SELF-CONFIDENCE WHILE EARNING A MODEST INCOME. BASED ON THEIR EMPLOYMENT INTERESTS AND GOALS, PARTICIPANTS MAY ALSO RECEIVE SUPPORTIVE SERVICES AND SKILLS TRAINING THROUGH AN EDUCATIONAL INSTITUTION. SCSEP IS PRIMARILY FUNDED BY THE U.S. DEPARTMENT OF LABOR. AARP FOUNDATION SCSEP OPERATES IN 19 STATES AND PUERTO RICO. IN PROGRAM YEAR 2019/2020 MORE THAN 12,000 PEOPLE WERE SERVED AND MORE THAN 3,000 OBTAINED UNSUBSIDIZED EMPLOYMENT. AARPFOUNDATION.ORG/SCSEP

**4b** (Code: ) (Expenses $ 13,468,913 including grants of $ ) (Revenue $ )

AARP FOUNDATION TAX-AIDE IS THE NATION'S LARGEST, FREE, VOLUNTEER-BASED TAX PREPARATION AND ASSISTANCE SERVICE. IT IS AVAILABLE TO LOW- AND MODERATE-INCOME TAXPAYERS WITH SPECIAL EMPHASIS ON TAXPAYERS OVER 60. IN 2020, 1.5 MILLION TAXPAYERS WHO USED AARP FOUNDATION TAX-AIDE RECEIVED MORE THAN $1 BILLION IN INCOME TAX REFUNDS. THE PROGRAM PROVIDED TAX ASSISTANCE USING A VARIETY OF VIRTUAL AND IN-PERSON METHODS (WHERE SAFE DURING THE PANDEMIC). WWW.AARPFOUNDATION.ORG/TAXAIDE

**4c** (Code: ) (Expenses $ 9,368,671 including grants of $ 1,904,408 ) (Revenue $ 268,525 )

AARP FOUNDATION EXPERIENCE CORPS- AARP FOUNDATION EXPERIENCE CORPS ("EXPERIENCE CORPS") IS AN EVIDENCE-BASED, VOLUNTEER TUTORING AND MENTORING PROGRAM THAT ADDRESSES A MAJOR CONTRIBUTOR TO POVERTY - THE INABILITY OF CHILDREN IN KINDERGARTEN THROUGH THIRD GRADE TO READ AT GRADE LEVEL. EXPERIENCE CORPS HAD MORE 2,000 HIGHLY TRAINED VOLUNTEERS WORKING IN MORE THAN 22 CITIES AND SERVED OVER 9,000 STUDENTS IN 2020 IN HIGH-NEED ELEMENTARY SCHOOLS. EACH EXPERIENCE CORPS SITE OPERATES ONE OF THREE TUTORING MODELS: ONE TO ONE; SMALL GROUP; AND LITERACY ASSISTANCE (WHERE VOLUNTEERS TUTOR AND HELP TEACHERS WITH CLASSROOM-WIDE ACTIVITIES). AFTER ONE YEAR, MANY STUDENTS WHO WORK WITH EXPERIENCE CORPS VOLUNTEER TUTORS ACHIEVE AS MUCH AS 60% IMPROVEMENT IN CRITICAL LITERACY SKILLS COMPARED TO THEIR PEERS. VOLUNTEERS PROVIDE AN AVERAGE OF 6-15 HOURS OF SUPPORT EACH WEEK THROUGHOUT THE SCHOOL YEAR. HTTPS://WWW.AARP.ORG/EXPERIENCE-CORPS/

(Code: ) (Expenses $ 7,098,043 including grants of $ 3,235,611 ) (Revenue $ 19,925 )

AARP FOUNDATION'S FOOD SECURITY INITIATIVES ARE DEDICATED TO ENDING HUNGER AMONG OLDER AMERICANS (50+) BY FOCUSING ON SUSTAINABLE, LONG-TERM PUBLIC HEALTH AND MARKET-DRIVEN SOLUTIONS TO HELP MEET THE DIETARY NEEDS OF OLDER ADULTS, ESPECIALLY THOSE OF THE NEARLY TEN MILLION FOOD INSECURE. OUR FOCUS IS ON SHOWING POSITIVE CHANGE IN FOOD SECURITY AMONG LOW INCOME OLDER ADULTS BY ENSURING THEY CAN AFFORD TO PURCHASE HEALTHY FOODS. THROUGH GRANT MAKING, AARP FOUNDATION SUPPORTS NONPROFIT COMMUNITY ORGANIZATIONS THAT RECEIVED WAIVERS FROM THE USDA TO ENACT THE ELDERLY SIMPLIFIED APPLICATION PROJECT (ESAP). ESAP STREAMLINES THE APPLICATION PROCESS, MAKING IT EASIER FOR PEOPLE WHO ARE OVER 60 AND HAVE NO EARNED INCOME TO RECEIVE SNAP BENEFITS SO THEY CAN AFFORD TO BUY HEALTHY FOOD. IN 2020, WORKING WITH NINE GRANTEES IN FIVE STATES, WE WERE ABLE TO RAISE GREATER AWARENESS ABOUT ESAP AND HELP NEARLY 40,000 ELIGIBLE OLDER ADULTS APPLY FOR AND GET SNAP BENEFITS. HTTPS://WWW.AARP.ORG/AARP-FOUNDATION/OUR-WORK/FOOD-SECURITY/

(Code: ) (Expenses $ 5,278,270 including grants of $ 6,500 ) (Revenue $ 125,718 )

LITIGATION-AARP FOUNDATION LITIGATION ADVOCATES IN COURTS NATIONWIDE TO ADVANCE THE LEGAL RIGHTS AND INTERESTS OF PEOPLE 50 AND OLDER BY REPRESENTING THEM IN SIGNIFICANT CASES AND BY WRITING AMICUS CURIAE ("FRIEND OF THE COURT") BRIEFS. AARP FOUNDATION LITIGATION FOCUSES ON WIDESPREAD PRACTICES OR POLICIES OF INDUSTRY, BUSINESS, OR GOVERNMENT THAT AFFECT OLDER AMERICANS' DAY-TO-DAY LIVES, INCLUDING EMPLOYMENT, PENSIONS, HOUSING, LONG-TERM CARE, AND FINANCIAL EXPLOITATION. WWW.AARPFOUNDATION.ORG/LITIGATION

(Code: ) (Expenses $ 1,398,932 including grants of $ 85,323 ) (Revenue $ 257,196 )

HOUSING-THE HOUSING IMPACT AREA IS FOCUSED ON DEVELOPING NEW SOLUTIONS THAT ENABLE LOW-INCOME OLDER ADULTS TO AGE IN THEIR HOMES AND COMMUNITIES BY ENSURING THAT THEIR HOMES ARE AFFORDABLE, LIVABLE AND HEALTHY. PROPERTY TAX-AIDE WAS LAUNCHED IN 2019 TO HELP LOW-INCOME OLDER ADULTS ACCESS PROPERTY TAX RELIEF PROGRAMS. HERE TO STAY, A PROGRAM THAT HELPS OLDER ADULTS WITH HOME MAINTENANCE ALSO LAUNCHED IN 2019.PROPERTY TAX-AIDE USES AN INNOVATIVE ONLINE TOOL TO SIMPLIFY THE PROCESS OF APPLYING FOR PROPERTY TAX REFUNDS AND CREDITS. SINCE 2019, THE PROGRAM HAS ASSISTED OVER 23,000 OLDER HOMEOWNERS AND RENTERS IN SECURING PROJECTED BENEFITS TOTALING OVER $10.5 MILLION IN TAX REBATES AND CREDITS. AARP FOUNDATION DEVELOPED HERE TO STAY: HOME UPKEEP FOR ALL. THE PROGRAM OFFERS IN-PERSON HOME MAINTENANCE WORKSHOPS AND AN ONLINE TOOLKIT. SINCE JUNE 2019, MORE THAN 50,000 USERS HAVE DOWNLOADED THE TOOLKIT, COMPLETED THE HOME ANALYSIS, AND SOUGHT HOME MAINTENANCE SERVICES.

(Code: ) (Expenses $ 6,609,091 including grants of $ 2,119,070 ) (Revenue $ 1,875 )

ISOLATION-MORE THAN 8 MILLION OLDER ADULTS ARE SOCIALLY ISOLATED AND, THEREFORE, AT RISK OF POOR HEALTH. AARP FOUNDATION'S ISOLATION WORK IS FOCUSED ON DEVELOPING AND DELIVERING SOLUTIONS THAT HELP VULNERABLE INDIVIDUALS OVER 50 STAY SOCIALLY CONNECTED, PREVENT ISOLATION, AND IMPROVE RELATED HEALTH OUTCOMES. BECAUSE THE ISSUE OF SOCIAL ISOLATION IS SO COMPLEX, AARP FOUNDATION SPEARHEADED CONNECT2AFFECT.ORG TO SEEK OUT SOLUTIONS. SINCE THE BEGINNING OF THE PANDEMIC TWO-THIRDS OF ADULTS REPORTED EXPERIENCING SOCIAL ISOLATION AND HIGH LEVELS OF ANXIETY. IN 2020 AARP FOUNDATION, WITH FUNDING SUPPORT FROM UNITED HEALTH FOUNDATION, LAUNCHED A NATIONWIDE PUBLIC AWARENESS CAMPAIGN TO HELP OLDER ADULTS OVERCOME SOCIAL ISOLATION THROUGH CONNECT2AFFECT.ORG. THE GOAL IS TO ENSURE THAT SOCIALLY ISOLATED OLDER ADULTS KNOW ABOUT THE ISSUE AND WHERE TO LOOK FOR INFORMATION AND RESOURCES TO STRENGTHEN THEIR SOCIAL BONDS AND TO GAIN ACCESS TO CRITICAL RESOURCES IN THEIR COMMUNITIES. THROUGH RESEARCH AND INNOVATIVE EFFORTS, THE FOUNDATION IS WORKING TO CREATE A DEEPER UNDERSTANDING OF LONELINESS AND ISOLATION, DRAW CRUCIAL ATTENTION TO THE ISSUE, AND CATALYZE ACTION TO END SOCIAL ISOLATION AMONG OLDER ADULTS. THROUGH CONNECT2AFFECT, WE PROVIDE VISITORS WITH INFORMATION AND TIPS ABOUT HOW TO STAY CONNECTED, ALONG WITH AN ASSESSMENT THAT ALLOWS USERS TO IDENTIFY THEIR ISOLATION RISK (OR THAT OF A LOVED ONE) AND GET GUIDANCE. OVER 23,000 VISITORS HAVE TAKEN THE RISK ASSESSMENT IN 2020 (BETWEEN SEPTEMBER 1ST 2020 AND DECEMBER 31ST 2020).IN 2018, AARP FOUNDATION SPONSORED A NATIONAL CONSENSUS STUDY WITH THE NATIONAL ACADEMIES OF SCIENCE (NAS), SOCIAL ISOLATION AND LONELINESS IN OLDER ADULTS: OPPORTUNITIES FOR THE HEALTH CARE SYSTEM. THIS 18-MONTH STUDY, PUBLISHED IN 2020, EXAMINED HOW SOCIAL ISOLATION AND LONELINESS IMPACT HEALTH OUTCOMES IN OLDER ADULTS AGED 50 AND OLDER, PARTICULARLY AMONG LOW INCOME, UNDERSERVED, AND VULNERABLE POPULATIONS. THE STUDY PROVIDED EVIDENCE-BASED RECOMMENDATIONS ON TRANSLATING RESEARCH INTO PRACTICE WITHIN THE HEALTH CARE SYSTEM THAT COULD FACILITATE PROGRESS IN REDUCING THE INCIDENCE AND ADVERSE HEALTH IMPACTS OF SOCIAL ISOLATION AND LONELINESS AMONG THE LOW-INCOME 50+ POPULATION. AS OF JUNE 2020, THE REPORT WAS DOWNLOADED 8,200 TIMES, THERE WERE AN ESTIMATED 639 MILLION UNIQUE VIEWERS FOR ONLINE ARTICLES AND AROUND 55% OF ARTICLES COVER THE REPORT IN THE CONTEXT OF THE COVID-19 PANDEMIC. HTTPS://WWW.NAP.EDU/CATALOG/25663/SOCIAL-ISOLATION-AND-LONELINESS-IN-OLDER-ADULTS-OPPORTUNITIES-FOR-THE CONNECTED COMMUNITIES USES VOICE-ENABLED TECHNOLOGY TO REDUCE ISOLATION IN AFFORDABLE SENIOR HOUSING FACILITIES. WE WORK WITH AFFORDABLE SENIOR

HOUSING PROVIDERS TO EQUIP THEIR COMMUNITIES WITH DEVICES, TOOLS AND TRAINING THAT HELP RESIDENTS MAINTAIN THE SOCIAL CONNECTIONS THEY NEED TO REMAIN INDEPENDENT AND AGE IN PLACE LONGER. MORE THAN 50% OF THE PARTICIPANTS IN THE CONNECTED COMMUNITIES SITES SAY THEY HAVE INCREASED OR MAINTAINED THEIR LEVEL OF SOCIAL PARTICIPATION SINCE THE PROGRAM WAS INTRODUCED TO THEIR COMMUNITY.

(Code: ) (Expenses $ 4,635,761 including grants of $ 1,812,305 ) (Revenue $ )

INCOME SECURITY-AARP FOUNDATION IS CREATING NEW PLATFORMS FOR ENSURING THAT LOW-INCOME OLDER ADULTS HAVE OPPORTUNITIES TO CONTINUE TO GENERATE INCOME AND BUILD SAVINGS TO HELP THEM BECOME MORE FINANCIALLY STABLE AND SECURE.NEW INNOVATIONS WERE ALSO DEVELOPED IN 2019 THAT FOCUS ON ADAPTING FINANCIAL TECHNOLOGY PLATFORMS TO MAKE IT EASIER AND MORE AUTOMATIC FOR LOW INCOME OLDER ADULTS TO BUILD EMERGENCY SAVINGS. IN 2019, WE LAUNCHED THE AARP FOUNDATION SELF-SAVER, WHICH AIMS TO CREATE A FUTURE OF SELF-EMPLOYED OLDER ADULTS WHO ARE FINANCIALLY RESILIENT. SELF-SAVER PROVIDES BOOKKEEPING AND TAX PREPARATION SUPPORT THAT MAKES IT EASY FOR SELF-EMPLOYED PEOPLE TO WITHHOLD AND SUBMIT QUARTERLY TAXES.AARP FOUNDATION MYSAVINGSJAR IS A FREE COMMUNITY PLATFORM OF OVER 20,000 MEMBERS WHO ARE COMMITTED TO STARTING A MONTHLY SAVINGS HABIT SO THEY CAN SET ASIDE CASH FOR LIFE'S UPS AND DOWNS.

(Code: ) (Expenses $ 4,485,772 including grants of $ 903,639 ) (Revenue $ )

BACK TO WORK 50+ - AARP FOUNDATION'S BACK TO WORK 50+ HELPS UNEMPLOYED OLDER WORKERS BUILD THE SKILLS AND CONFIDENCE THEY NEED TO COMPETE FOR IN-DEMAND JOBS. JOB CANDIDATES RECEIVE FREE JOB-SEEKING TOOLS AND CONNECT WITH EXPERIENCED COACHES WHO SUPPORT THEM THROUGH ONLINE AND IN-PERSON WORKSHOPS AND COACHING SESSIONS. SINCE 2020, AARP FOUNDATION HAS OFFERED TWO MODELS OF BACK TO WORK 50+. BACK TO WORK 50+ COACHING-NATIONAL ONLINE IS THE DIRECT-TO-CONSUMER MODEL THAT OFFERS ONLINE COACHING, TOOLS AND RESOURCES TO UNEMPLOYED JOBSEEKERS ACROSS THE COUNTRY. SIMULTANEOUSLY, BACK TO WORK 50+ COACHING PROVIDERS IN 12 COMMUNITIES HOST IN-PERSON AND ONLINE WORKSHOPS AND COACHING FOR JOBSEEKERS IN THEIR COMMUNITIES. SINCE 2017, OVER 40,000 OLDER WORKERS HAVE USED BACK TO WORK 50+ TOOLS IN THEIR JOB SEARCHES AND OVER 4,000 HAVE REPORTED EMPLOYMENT AFTER PARTICIPATING IN THE PROGRAM. WWW.AARP.ORG/AARP-FOUNDATION/OUR-WORK/INCOME/BACK-TO-WORK-50-PLUS/

(Code: ) (Expenses $ 10,692,854 including grants of $ 2,150,505 ) (Revenue $ )

CONTRIBUTIONS AND OTHER PROGRAMS-THE FOUNDATION SPONSORED ORGANIZATIONS, EVENTS, AND VIRTUAL CONFERENCES THAT HIGHLIGHTED TANGIBLE WAYS TO BUILD ECONOMIC OPPORTUNITY AND SOCIAL CONNECTEDNESS IN AMERICA FOR LOW-INCOME SENIORS. THE FOUNDATION ALSO SUPPORTED RELIEF FOR OLDER VICTIMS OF HURRICANE SALLY, HURRICANE LAURA AND THE DEVASTATING U.S. WILDFIRES IN 2020.AARP SUB-GRANTS-AARP FOUNDATION HAS AWARDED GRANTS TO AARP IN THE AMOUNT OF $143,028 TO FURTHER THE FOUNDATION'S CHARITABLE MISSION OF HELPING LOW INCOME OLDER AMERICANS SECURE ESSENTIALS THROUGH PROGRAMS THAT FOCUS ON HEALTH ACCESS AND NURSING.

**4d** Other program services (Describe in Schedule O.)
(Expenses $ 40,198,723 including grants of $ 10,312,953 ) (Revenue $ 404,714 )

**4e** **Total program service expenses ▶** 137,133,245

**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 | Yes | |
| 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 | | No |
| 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 Revenue Procedure 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 | Yes | |
| 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 | Yes | |
| 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 | | No |
| 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 | | No |
| 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)*

| | | Line | 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 | Yes | |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | No |
| 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 | | No |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | No |
| 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 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 lines 28a or 28b? *If "Yes," complete Schedule L, Part IV* | 28c | Yes | |
| 29 | Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M* | 29 | Yes | |
| 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 | | No |
| 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 | | No |
| 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 | | |
| 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 | Yes | |
| 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 in 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 | 167 | | |
| b | Enter the number of Forms W-2G included in 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)*

| Line | Question | Box | Amount | | Yes | No |
|---|---|---|---|---|---|---|
| 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 | 345 | | | |
| 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: ▶KS<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 | | No |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | | | 6b | | |
| 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 | | No |
| 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 | | No |
| 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 | | No |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | | 7f | | No |
| 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?<br>**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?<br>If "Yes," see instructions and file Form 4720, Schedule N. | | | 15 | | No |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment income?<br>If "Yes," complete Form 4720, Schedule O. | | | 16 | | No |

**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** 10 | | | |
| **b** | Enter the number of voting members included in line 1a, above, who are independent | **1b** 10 | | | |
| **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** | Yes | |
| **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** | Yes | |
| **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** | | No |
| **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** | | |
| **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 in Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| **12a** | Did the organization have a written conflict of interest policy? *If "No," go to line 13* | **12a** | Yes | |
| **b** | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | **12b** | Yes | |
| **c** | Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in 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** | | No |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | | |
| **16a** | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 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,OK,IN

**18** Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

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

**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:
▶PATRICIA D SHANNON 601 E STREET NW WASHINGTON, DC 20049 (202) 434-3399

**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 instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- 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 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): Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| (1) DIANE D MILLER<br>BOARD / VICE CHAIR (AS OF 8/12/20) | 6.00 | X | | | | | | 0 | 0 | 0 |
| (2) HARRY E JOHNSON<br>BOARD / FINANCE CHA (UNTIL 6/10/20) | 6.00 | X | | | | | | 0 | 0 | 0 |
| (3) GREGORY J DYSON<br>BOARD MEMBER (AS OF 10/14/20) | 6.00 | X | | | | | | 0 | 0 | 0 |
| (4) MARGOT JAMES COPELAND<br>BOARD MEMBER (AS OF 6/10/20) | 6.00<br>10.00 | X | | | | | | 0 | 0 | 0 |
| (5) ANN G DAW<br>BOARD / FINANCE COMMITTEE CHAIR | 6.00 | X | | | | | | 0 | 0 | 0 |
| (6) PATRICIA BANKS<br>BOARD MEMBER | 6.00 | X | | | | | | 0 | 0 | 0 |
| (7) SUSAN WERTH<br>BOARD MEMBER | 6.00 | X | | | | | | 0 | 0 | 0 |
| (8) DAVID ADAME<br>BOARD MEMBER | 6.00 | X | | | | | | 0 | 0 | 0 |
| (9) LLOYD JOHNSON<br>BOARD CHAIR (UNTIL 6/10/20) | 6.00<br>10.00 | X | | | | | | 0 | 2,473 | 0 |
| (10) LIBBY SARTAIN<br>BOARD CHAIR (AS OF 6/10/20) | 6.00<br>10.00 | X | | | | | | 0 | 1,666 | 0 |
| (11) ROBERT BLANCATO<br>BOARD MEMBER (AS OF 6/10/20) | 6.00<br>10.00 | X | | | | | | 0 | 0 | 0 |
| (12) JAIME GUTIERREZ<br>BOARD / VICE CHAIR (UNTIL 6/10/20) | 6.00 | X | | | | | | 0 | 0 | 0 |
| (13) BETTY J HUDSON<br>BOARD MEMBER (AS OF 10/14/20) | 6.00 | X | | | | | | 0 | 0 | 0 |
| (14) PATRICIA D SHANNON<br>CFO & SENIOR VICE PRESIDENT | 40.00 | | | X | | | | 420,568 | 0 | 66,507 |
| (15) LISA MARSH RYERSON<br>PRESIDENT | 40.00 | | | X | | | | 483,801 | 6,349 | 75,617 |
| (16) JAMI L WYATT<br>SECRETARY | 1.00<br>40.00 | | | X | | | | 0 | 293,915 | 71,948 |
| (17) DAVID WHITEHEAD<br>SVP & CHIEF DEVELOPMENT OFFICER | 40.00 | | | | X | | | 354,425 | 15,249 | 71,948 |

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) Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| (18) WILLIAM A RIVERA<br>SVP - LITIGATION | 40.00 | | | | X | | | 296,907 | 12,120 | 54,663 |
| (19) EMILY S ALLEN<br>SVP - AARP FDN PROGRAMS | 40.00 | | | | X | | | 336,388 | 0 | 61,598 |
| (20) MARC MCDONALD<br>VP - FD INTEGRATION | 40.00 | | | | | X | | 252,468 | 0 | 63,094 |
| (21) STEVEN DELVECCHIO<br>VP - DIRECT RESPONSE | 40.00 | | | | | X | | 193,227 | 69,806 | 49,669 |
| (22) STEPHEN VENUTE<br>VP - CORP & FOUNDATION RELATIONS | 40.00 | | | | | X | | 268,527 | 0 | 57,530 |
| (23) DEMETRIOS ANTZOULATOS<br>VP - FINANCE, GRANTS, & OPERATIONS | 40.00 | | | | | X | | 267,919 | 0 | 70,356 |
| (24) PATRICK LANDERS<br>VP - STRATEGY & INNOVATION | 40.00 | | | | | X | | 264,825 | 0 | 61,290 |

| | (D) | (E) | (F) |
|---|---|---|---|
| **1b Sub-Total** ▶ | | | |
| **c Total from continuation sheets to Part VII, Section A** ▶ | | | |
| **d Total (add lines 1b and 1c)** ▶ | 3,139,055 | 401,578 | 704,220 |

**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 ▶ 111

| | | 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* | 3 | | 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* | 4 | 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* | 5 | | 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 |
|---|---|---|
| CP DIRECT INC<br>4600 BOSTON WAY<br>LANHAM, MD 20706 | COMMERCIAL PRINTING SERVICES | 1,611,593 |
| CONCORD LITHO GROUP INC<br>92 OLD TURNPIKE RD<br>CONCORD, NH 033017309 | PRINTING & DIRECT MARKETING SERVICES | 1,595,448 |
| GRACEWORKZ LLC<br>1311 W BADGER RD<br>MADISON, WI 53713 | IT PRINTER SERVICE AND IMAGING SUPPLIES | 1,490,084 |
| DIRECT MAIL SOLUTIONS<br>5540 KETCH ROAD<br>PRINCE FREDERICK, MD 20678 | COMMERCIAL PRINTING SERVICES | 1,209,673 |
| HIRSCHFELD MARKETING SOLUTIONS<br>10231 BAILEY RD<br>CORNELIUS, NC 28031 | MEAL PACK MARKETING & OPERATIONS | 1,048,048 |

**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 ▶ 122

**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 Other Similar Amounts** | | | | | | |
| 1a Federated campaigns . . | 1a | 122,097 | | | | |
| b Membership dues . . | 1b | | | | | |
| c Fundraising events . . | 1c | | | | | |
| d Related organizations | 1d | 10,416,962 | | | | |
| e Government grants (contributions) | 1e | 87,516,620 | | | | |
| f All other contributions, gifts, grants, and similar amounts not included above | 1f | 69,065,629 | | | | |
| g Noncash contributions included in lines 1a - 1f:$ | 1g | 273,248 | | | | |
| h **Total.** Add lines 1a-1f . . . . . . . . ▶ | | | 167,121,308 | | | |
| **Program Service Revenue** | | Business Code | | | | |
| 2a EXPERIENCE CORPS PROGRAM FEES | | 900099 | 268,525 | 268,525 | | |
| b | | | | | | |
| c | | | | | | |
| d | | | | | | |
| e | | | | | | |
| f All other program service revenue. | | | 404,714 | 404,714 | | |
| g **Total.** Add lines 2a–2f. . . . . ▶ | | | 673,239 | | | |
| **Other Revenue** | | | | | | |
| 3 Investment income (including dividends, interest, and other similar amounts) . . . ▶ | | | 15,124,937 | | 20,373 | 15,104,564 |
| 4 Income from investment of tax-exempt bond proceeds ▶ | | | | | | |
| 5 Royalties . . . . . . . . . . . . . ▶ | | | | | | |

| | | (i) Real | (ii) Personal |
|---|---|---|---|
| 6a Gross rents | 6a | | |
| b Less: rental expenses | 6b | | |
| c Rental income or (loss) | 6c | | |

| | (A) | (B) | (C) | (D) |
|---|---|---|---|---|
| d Net rental income or (loss) . . . . . . . . ▶ | | | | |

| | | (i) Securities | (ii) Other |
|---|---|---|---|
| 7a Gross amount from sales of assets other than inventory | 7a | 741,719,950 | |
| b Less: cost or other basis and sales expenses | 7b | 737,572,024 | |
| c Gain or (loss) | 7c | 4,147,926 | |

| | (A) | (B) | (C) | (D) |
|---|---|---|---|---|
| d Net gain or (loss) . . . . . . . . . . . . ▶ | 4,147,926 | | 80,657 | 4,067,269 |

| | | |
|---|---|---|
| 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 | |

| | (A) | (B) | (C) | (D) |
|---|---|---|---|---|
| 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 | |

| | (A) | (B) | (C) | (D) |
|---|---|---|---|---|
| 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** CHARITABLE GIFT ANNUITY SEVERANCE | 900099 | | 117,822 | | | 117,822 |
| **b** CHANGE IN VALUE- CHARITABLE GIFT | 900099 | | -266,358 | | | -266,358 |
| **c** K-1 PARTNERSHIP INCOME | 900099 | | -372,331 | | -4,514 | -367,817 |
| **d** All other revenue . . . . | | | | | | |
| **e** **Total.** Add lines 11a–11d . . . . . . ▶ | | | -520,867 | | | |
| **12** **Total revenue.** See instructions . . . . . ▶ | | | 186,546,543 | 673,239 | 96,516 | 18,655,480 |

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 . . . . | 11,811,762 | 11,811,762 | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . . . . . . . . . . | 57,909,869 | 57,909,869 | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. . . . . . . . . . . . . . | | | | |
| 4 Benefits paid to or for members . . . . . . . . | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees . . . . . . . . . . . . . | 2,014,497 | 666,385 | 963,324 | 384,788 |
| 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 . . . . . . . . . . | 32,166,781 | 23,466,954 | 5,219,519 | 3,480,308 |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . | 1,104,680 | 785,789 | 194,069 | 124,822 |
| 9 Other employee benefits . . . . . . . . | 4,345,716 | 3,047,594 | 811,870 | 486,252 |
| 10 Payroll taxes . . . . . . . . . . . . . | 2,327,488 | 1,616,467 | 448,930 | 262,091 |
| 11 Fees for services (non-employees): | | | | |
| a Management . . . . . . . | | | | |
| b Legal . . . . . . . . . . | 301,496 | 301,496 | | |
| c Accounting . . . . . . . . . . . . . | 164,000 | | 164,000 | |
| d Lobbying . . . . . . . . . . . . . | | | | |
| e Professional fundraising services. See Part IV, line 17 | 1,652,307 | | | 1,652,307 |
| f Investment management fees . . . . . . . | 1,801,014 | | 1,801,014 | |
| g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) | 12,431,706 | 10,102,698 | 1,294,414 | 1,034,594 |
| 12 Advertising and promotion . . . . | 3,519,038 | 1,431,836 | 1,228,018 | 859,184 |
| 13 Office expenses . . . . . . . . | 3,088,710 | 3,060,881 | 4,311 | 23,518 |
| 14 Information technology . . . . . . | 5,932,249 | 5,403,797 | 289,016 | 239,436 |
| 15 Royalties . . | | | | |
| 16 Occupancy . . . . . . . . . . . . . | 3,070,967 | 2,703,915 | 244,539 | 122,513 |
| 17 Travel . . . . . . . . . . . . . . . | 370,960 | 303,418 | 28,293 | 39,249 |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . | | | | |
| 19 Conferences, conventions, and meetings . . . . | 29,467 | 27,614 | -7,188 | 9,041 |
| 20 Interest . . . . . . . . . . . . . | 252,399 | 89,656 | 139,207 | 23,536 |
| 21 Payments to affiliates . . . . . . . | | | | |
| 22 Depreciation, depletion, and amortization . . | 1,555,392 | 766,668 | 589,306 | 199,418 |
| 23 Insurance . . . | | | | |
| 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 AND POSTAGE | 20,603,210 | 7,763,526 | 37,696 | 12,801,988 |
| b VOLUNTEER TRAVEL/ACTIVI | 3,666,993 | 3,655,753 | 11,240 | |
| c TELECOMMUNICATION EXPEN | 1,810,066 | 1,685,402 | 99,954 | 24,710 |
| d MISCELLANEOUS OPERATING | 1,331,207 | 531,765 | 616,485 | 182,957 |
| e All other expenses | | | | |
| 25 **Total functional expenses.** Add lines 1 through 24e | 173,261,974 | 137,133,245 | 14,178,017 | 21,950,712 |
| 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). | 15,183,286 | 5,305,458 | 0 | 9,877,828 |

## 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 | | 3,393,270 | 1 | 1,893,064 |
| | 2 | Savings and temporary cash investments | | 19,697,220 | 2 | 4,701,759 |
| | 3 | Pledges and grants receivable, net | | 13,583,525 | 3 | 14,997,156 |
| | 4 | Accounts receivable, net | | | 4 | |
| | 5 | 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 | | | 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 | | 867,035 | 9 | 1,439,048 |
| | 10a | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 30,183,162 | | | |
| | b | Less: accumulated depreciation | 10b 16,629,348 | 14,997,045 | 10c | 13,553,814 |
| | 11 | Investments—publicly traded securities | | 534,768,098 | 11 | 587,702,333 |
| | 12 | Investments—other securities. See Part IV, line 11 | | 5,209,704 | 12 | 6,071,530 |
| | 13 | Investments—program-related. See Part IV, line 11 | | 6,165,767 | 13 | 5,924,718 |
| | 14 | Intangible assets | | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | 253,147 | 15 | 235,887 |
| | 16 | **Total assets.** Add lines 1 through 15 (must equal line 33) | | 598,934,811 | 16 | 636,519,309 |
| **Liabilities** | 17 | Accounts payable and accrued expenses | | 28,012,161 | 17 | 17,792,852 |
| | 18 | Grants payable | | 8,532,978 | 18 | 8,330,839 |
| | 19 | Deferred revenue | | 170,827 | 19 | 240,000 |
| | 20 | Tax-exempt bond liabilities | | 25,000,000 | 20 | 25,000,000 |
| | 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 | | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D | | 3,049,511 | 25 | 3,263,793 |
| | 26 | **Total liabilities.** Add lines 17 through 25 | | 64,765,477 | 26 | 54,627,484 |
| **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 | | 112,088,429 | 27 | 130,846,601 |
| | 28 | Net assets with donor restrictions | | 422,080,905 | 28 | 451,045,224 |
| | | **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 | | 534,169,334 | 32 | 581,891,825 |
| | 33 | Total liabilities and net assets/fund balances | | 598,934,811 | 33 | 636,519,309 |

## 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 | 186,546,543 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 173,261,974 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 13,284,569 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 534,169,334 |
| 5 | Net unrealized gains (losses) on investments | 5 | 34,440,602 |
| 6 | Donated services and use of facilities | 6 | -2,680 |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | 0 |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column | 10 | 581,891,825 |

## 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 ________<br>If the organization changed its method of accounting from a prior year or checked "Other," explain in 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:<br>☐ 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:<br>☐ 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 | Yes | |
| 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 | Yes | |

# Additional Data

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**Software ID:**

**Software Version:**

**Form 990, Special Condition Description:**

| Special Condition Description |
|---|

**Schedule B**
**(Form 990, 990-EZ, or 990-PF)**
Department of the Treasury
Internal Revenue Service

# Schedule of Contributors

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

OMB No. 1545-0047

**2020**

| Name of the organization | Employer identification number |
|---|---|
| AARP FOUNDATION | 52-0794300 |

**Organization type** (check one):

| **Filers of:** | **Section:** |
|---|---|
| Form 990 or 990-EZ | ☐ 501(c)( ) (enter number) organization |
| | ☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation |
| | ☐ 527 political organization |
| Form 990-PF | ☐ 501(c)(3) exempt private foundation |
| | ☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation |
| | ☐ 501(c)(3) taxable private foundation |

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

**General Rule**

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

**Special Rules**

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

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

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

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

Name of organization
AARP FOUNDATION

**Employer identification number**
52-0794300

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

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|---|---|---|---|
| RESTRICTED | , | $ RESTRICTED | ☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.) |
| - | | $ | ☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.) |
| - | | $ | ☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.) |
| - | | $ | ☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.) |
| - | | $ | ☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.) |
| - | | $ | ☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.) |

| Name of organization | Employer identification number |
|---|---|
| AARP FOUNDATION | 52-0794300 |

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

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
|---|---|---|---|
| - | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
|---|---|---|---|
| - | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
|---|---|---|---|
| - | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
|---|---|---|---|
| - | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
|---|---|---|---|
| - | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
|---|---|---|---|
| - | | $ | |

Name of organization
AARP FOUNDATION

Employer identification number
52-0794300

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

Use duplicate copies of Part III if additional space is needed.

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| - | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP 4 | Relationship of transferor to transferee |
|---|---|
| - | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| - | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP 4 | Relationship of transferor to transferee |
|---|---|
| - | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| - | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP 4 | Relationship of transferor to transferee |
|---|---|
| - | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| - | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP 4 | Relationship of transferor to transferee |
|---|---|
| - | |

## Additional Data

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**Software ID:**

**Software Version:**

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

**Schedule K (Form 990)**

Department of the Treasury
Internal Revenue Service

# Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990.
▶Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

Name of the organization
AARP FOUNDATION

**Employer identification number**
52-0794300

## Part I Bond Issues

| | (a) Issuer name | (b) Issuer EIN | (c) CUSIP # | (d) Date issued | (e) Issue price | (f) Description of purpose | (g) Defeased Yes | (g) Defeased No | (h) On behalf of issuer Yes | (h) On behalf of issuer No | (i) Pool financing Yes | (i) Pool financing No |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| A | DISTRICT OF COLUMBIA | 53-6001131 | 254839H48 | 10-21-2004 | 25,000,000 | PURCHASE OF OFFICE SPACE | | X | | X | | X |

## Part II Proceeds

| | | A | B | C | D |
|---|---|---|---|---|---|
| 1 | Amount of bonds retired | | | | |
| 2 | Amount of bonds legally defeased | | | | |
| 3 | Total proceeds of issue | 25,000,000 | | | |
| 4 | Gross proceeds in reserve funds | | | | |
| 5 | Capitalized interest from proceeds | | | | |
| 6 | Proceeds in refunding escrows | | | | |
| 7 | Issuance costs from proceeds | | | | |
| 8 | Credit enhancement from proceeds | | | | |
| 9 | Working capital expenditures from proceeds | | | | |
| 10 | Capital expenditures from proceeds | 23,688,767 | | | |
| 11 | Other spent proceeds | 1,311,233 | | | |
| 12 | Other unspent proceeds | | | | |
| 13 | Year of substantial completion | 2004 | | | |

| | | A Yes | A No | B Yes | B No | C Yes | C No | D Yes | D No |
|---|---|---|---|---|---|---|---|---|---|
| 14 | Were the bonds issued as part of a current refunding issue of tax-exempt bonds (or, if issued prior to 2019, a current refunding issue)? | | X | | | | | | |
| 15 | Were the bonds issued as part of an advance refunding issue of taxable bonds (or, if issued prior to 2019, an advance refunding issue)? | | X | | | | | | |
| 16 | Has the final allocation of proceeds been made? | X | | | | | | | |
| 17 | Does the organization maintain adequate books and records to support the final allocation of proceeds? | X | | | | | | | |

## Part III Private Business Use

| | | A Yes | A No | B Yes | B No | C Yes | C No | D Yes | D No |
|---|---|---|---|---|---|---|---|---|---|
| 1 | Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? | | X | | | | | | |
| 2 | Are there any lease arrangements that may result in private business use of bond-financed property? | | X | | | | | | |

**Part III Private Business Use** (Continued)

| | | A Yes | A No | B Yes | B No | C Yes | C No | D Yes | D No |
|---|---|---|---|---|---|---|---|---|---|
| 3a | Are there any management or service contracts that may result in private business use of bond-financed property? | | X | | | | | | |
| b | If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? | | | | | | | | |
| c | Are there any research agreements that may result in private business use of bond-financed property? | | X | | | | | | |
| d | If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? | | | | | | | | |
| 4 | Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶ | 0.700 % | | | | | | | |
| 5 | Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶ | | | | | | | | |
| 6 | Total of lines 4 and 5 | 0.700 % | | | | | | | |
| 7 | Does the bond issue meet the private security or payment test? | | X | | | | | | |
| 8a | Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued? | | X | | | | | | |
| b | If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. | | | | | | | | |
| c | If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? | | | | | | | | |
| 9 | Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? | | X | | | | | | |

**Part IV Arbitrage**

| | | A Yes | A No | B Yes | B No | C Yes | C No | D Yes | D No |
|---|---|---|---|---|---|---|---|---|---|
| 1 | Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? | | X | | | | | | |
| 2 | If "No" to line 1, did the following apply? | | | | | | | | |
| a | Rebate not due yet? | | X | | | | | | |
| b | Exception to rebate? | | X | | | | | | |
| c | No rebate due? | | X | | | | | | |
| | If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed | | | | | | | | |
| 3 | Is the bond issue a variable rate issue? | X | | | | | | | |
| 4a | Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? | | X | | | | | | |
| b | Name of provider | | | | | | | | |
| c | Term of hedge | | | | | | | | |
| d | Was the hedge superintegrated? | | | | | | | | |
| e | Was the hedge terminated? | | | | | | | | |

**Part IV Arbitrage** (Continued)

| | | A | | B | | C | | D | |
|---|---|---|---|---|---|---|---|---|---|
| | | Yes | No | Yes | No | Yes | No | Yes | No |
| **5a** | Were gross proceeds invested in a guaranteed investment contract (GIC)? | | X | | | | | | |
| **b** | Name of provider . . . . . . . . . . | | | | | | | | |
| **c** | Term of GIC . . . . . . . . . | | | | | | | | |
| **d** | Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? . . . . . . . . | | | | | | | | |
| **6** | Were any gross proceeds invested beyond an available temporary period? | | X | | | | | | |
| **7** | Has the organization established written procedures to monitor the requirements of section 148? . . . | | X | | | | | | |

**Part V Procedures To Undertake Corrective Action**

| | A | | B | | C | | D | |
|---|---|---|---|---|---|---|---|---|
| | Yes | No | Yes | No | Yes | No | Yes | No |
| Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations? | X | | | | | | | |

**Part VI Supplemental Information.** Provide additional information for responses to questions on Schedule K. (See instructions).

| Return Reference | Explanation |
|---|---|

## Additional Data

Return to Form

**Software ID:**
**Software Version:**

**Schedule L**
**(Form 990 or 990-EZ)**

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

**2020**

**Open to Public Inspection**

Name of the organization
AARP FOUNDATION

**Employer identification number**

52-0794300

## 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 |
|---|---|---|---|---|
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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 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
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| **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) DAVID ADAME | PRESIDENT OF CHICANOS POR LA CAUSA INC AND BOARD MEMBER OF AARP FOUNDATION | | RESTRICTED GRANT | SUPPORT FOR THE PROPERTY TAX-AIDE ARIZONA PILOT PROGRAM |
| | | | | |
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## 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 |
|---|---|---|---|---|---|
| (1) AARP INC | AFFILIATED ENTITY | 143,028 | GRANT | | No |
| | | | | | |
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## Part V Supplemental Information

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

| Return Reference | Explanation |
|---|---|
| PART IV, COLUMN (D) | GRANTS FOR PERFORMANCE OF CHARITABLE ACTIVITIES ON BEHALF OF AARP FOUNDATION |

## Additional Data

Return to Form

**Software ID:**

**Software Version:**

**SCHEDULE M (Form 990)**

Department of the Treasury
Internal Revenue Service

# Noncash Contributions

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

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

Name of the organization
AARP FOUNDATION

**Employer identification number**
52-0794300

## Part I Types of Property

| | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d) Method of determining noncash contribution amounts |
|---|---|---|---|---|
| 1 Art—Works of art | | | | |
| 2 Art—Historical treasures | | | | |
| 3 Art—Fractional interests | | | | |
| 4 Books and publications | | | | |
| 5 Clothing and household goods | | | | |
| 6 Cars and other vehicles | | | | |
| 7 Boats and planes | | | | |
| 8 Intellectual property | | | | |
| 9 Securities—Publicly traded | X | 12 | 24,738 | HIGH / LOW AVERAGE |
| 10 Securities—Closely held stock | | | | |
| 11 Securities—Partnership, LLC, or trust interests | | | | |
| 12 Securities—Miscellaneous | | | | |
| 13 Qualified conservation contribution—Historic structures | | | | |
| 14 Qualified conservation contribution—Other | | | | |
| 15 Real estate—Residential | | | | |
| 16 Real estate—Commercial | | | | |
| 17 Real estate—Other | | | | |
| 18 Collectibles | | | | |
| 19 Food inventory | | | | |
| 20 Drugs and medical supplies | | | | |
| 21 Taxidermy | | | | |
| 22 Historical artifacts | | | | |
| 23 Scientific specimens | | | | |
| 24 Archeological artifacts | | | | |
| 25 Other ▶ ( TABLETS ) | X | 220 | 168,000 | MARKET VALUE |
| 26 Other ▶ ( PHONES ) | X | 481 | 80,510 | MARKET VALUE |
| 27 Other ▶ ( ) | | | | |
| 28 Other ▶ ( ) | | | | |

| | | Yes | No |
|---|---|---|---|
| 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement | 29 | | |
| 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? | 30a | | No |
| b If "Yes," describe the arrangement in Part II. | | | |
| 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? | 31 | Yes | |
| 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? | 32a | | No |
| b If "Yes," describe in Part II. | | | |
| 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. | | | |

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

| Return Reference | Explanation |
|---|---|
| PART I, COLUMN (B): | AARP FOUNDATION REPORTS THE NUMBER OF ITEMS RECEIVED. PER THE IRS ISSUED INSTRUCTIONS TO SCHEDULE M, EACH SEPARATE CONTRIBUTION OF PUBLICLY TRADED STOCK WAS TREATED AS AN ITEM. |

## Additional Data

Return to Form

**Software ID:**

**Software Version:**

**SCHEDULE O**
**(Form 990 or 990-EZ)**

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

**2020**

**Open to Public Inspection**

Name of the organization
AARP FOUNDATION

**Employer identification number**
52-0794300

| Return Reference | Explanation |
|---|---|
| FORM 990, PART VI, SECTION A, LINE 7A | THE AARP BOARD OF DIRECTORS APPOINTS UP TO TEN VOTING MEMBERS OF THE AARP FOUNDATION BOARD OF DIRECTORS. UP TO FOUR OF THE AARP FOUNDATION BOARD MEMBERS MAY BE CURRENT AARP BOARD MEMBERS. THE REMAINING BOARD MEMBERS SHALL BE UNAFFILIATED WITH AARP. |
| FORM 990, PART VI, SECTION A, LINE 7B | THE AARP BOARD OF DIRECTORS APPOINTS UP TO TEN VOTING MEMBERS OF THE AARP FOUNDATION BOARD OF DIRECTORS. UP TO FOUR OF THE AARP FOUNDATION BOARD MEMBERS MAY BE CURRENT AARP BOARD MEMBERS. THE REMAINING BOARD MEMBERS SHALL BE UNAFFILIATED WITH AARP. AN AARP FOUNDATION BOARD MEMBER MAY BE REMOVED, WITH OR WITHOUT CAUSE, BY FORMAL ACTION OF THE AARP FOUNDATION BOARD OF DIRECTORS, DESIGNATING A SUCCESSOR. THE AARP FOUNDATION BYLAWS PROVIDE THAT NO AMENDMENTS TO THE BYLAWS ADOPTED BY THE FOUNDATION MAY TAKE EFFECT UNTIL APPROVED BY THE AARP BOARD OF DIRECTORS. |
| FORM 990, PART VI, SECTION B, LINE 11B | THE FORM 990 FOR AARP FOUNDATION ("FOUNDATION") IS PREPARED BY AN OUTSIDE CONSULTANT AND REVIEWED BY AARP FOUNDATION'S CFO, PRESIDENT, AND OTHER INTERNAL REVIEWERS. THE FORM 990 IS THEN PROVIDED TO THE AARP FOUNDATION BOARD OF DIRECTORS. ONCE ALL REVIEWS ARE COMPLETE, THE RETURN IS ELECTRONICALLY FILED 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, AND IF NECESSARY, THE BOARD OF DIRECTORS), 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 THESE REQUIREMENTS AND ENSURES PROPER FOLLOW-UP AS NEEDED. |
| FORM 990, PART VI, SECTION B, LINE 15A | THROUGH ITS SHARED SERVICES AGREEMENT WITH AARP, AARP FOUNDATION PARTICIPATES IN AARP'S ENTERPRISE-WIDE COMPENSATION REVIEWS. AARP HAS A COMPETITIVE POSITION IN THE MARKETPLACE THAT CONSIDERS RELEVANT FOR-PROFIT AND NOT-FOR-PROFIT DATA SINCE THIS IS THE LANDSCAPE IN WHICH AARP AND ITS AFFILIATES COMPETE 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 IS 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 AWARD PROGRAMS. THIS PROCESS APPLIES TO ALL EMPLOYEES OF THE FOUNDATION INCLUDING THE PRESIDENT, CFO, AND KEY EMPLOYEES. BASED ON THE PROCESS DESCRIBED ABOVE, THE AARP FOUNDATION BOARD CHAIR APPROVES ADJUSTMENTS TO THE PRESIDENT'S COMPENSATION PACKAGE. THE JOB PERFORMANCE OF THE CFO AND OTHER KEY EMPLOYEES ARE DISCUSSED ANNUALLY WITH THE STRATEGY AND GOVERNANCE COMMITTEE. |
| FORM 990, PART VI, SECTION C, LINE 18 | AARP FOUNDATION MAKES ITS FORM 990 AVAILABLE FOR PUBLIC INSPECTION ON ITS WEBSITE AND UPON REQUEST TO THE AARP FOUNDATION'S OFFICE OF THE CFO. |
| FORM 990, PART VI, SECTION C, LINE 19 | AARP FOUNDATION MAKES ITS AUDITED FINANCIAL STATEMENTS AVAILABLE FOR PUBLIC INSPECTION ON ITS WEBSITE AND UPON REQUEST TO THE AARP FOUNDATION'S OFFICE OF THE CFO. |
| PART VII, SEC. A, OFFICERS, KEY EMPLOYEES AND HIGHEST COMPENSATED EMPLOYEES | AARP FOUNDATION HAS A STANDARD 40 HOUR WORK WEEK AND THE AVERAGE HOURS ARE DISCLOSED ON FORM 990. OFFICERS, KEY EMPLOYEES, AND HIGHEST COMPENSATED EMPLOYEES OFTEN WORK IN EXCESS OF THAT AMOUNT. |

## Additional Data

Return to Form

**Software ID:**

**Software Version:**

**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

2020

**Open to Public Inspection**

Name of the organization
AARP FOUNDATION

**Employer identification number**
52-0794300

**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 |
|---|---|---|---|---|---|
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**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 | No |
|---|---|---|---|---|---|---|---|
| **(1)** AARP (CONSOLIDATED)<br>601 E STREET NW<br><br>WASHINGTON, DC 20049<br>95-1985500 | SOCIAL WELFARE ORGANIZATION DEDICATED TO PERSONS OVER AGE 50 | DC | 501(C)(4) | N/A | N/A | | No |
| **(2)** LEGAL COUNSEL FOR THE ELDERLY<br>601 E STREET NW<br><br>WASHINGTON, DC 20049<br>52-1194741 | PUBLIC CHARITY PROVIDING LEGAL ASSISTANCE/EDUCATION TO DC ELDERLY RESIDENTS | DC | 501(C)(3) | 509(A)(1) | AARP | | No |
| **(3)** AARP INSURANCE PLAN<br>601 E STREET NW<br><br>WASHINGTON, DC 20049<br>52-6069387 | GRANTOR TRUST HOLDING CERTAIN AARP GROUP HEALTH INSURANCE POLICIES | DC | 501(C)(4) | N/A | AARP | | No |
| **(4)** WISH OF A LIFETIME<br>303 EAST 17TH AVE STE 850<br><br>DENVER, CO 80203<br>26-2123649 | SHIFT HOW SOCIETY VALUES SENIORS BY GRANTING/SHARING LIFELONG WISHES | CO | 501(C)(3) | 509(A)(1) | AARP | | No |
| | | | | | | | |
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**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 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
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**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<br><br>601 E STREET NW<br>WASHINGTON, DC 20049<br>52-1367607 | REAL ESTATE HOLDING COMPANY | DE | AARP | C | | | | | No |
| **(2)**AARP SERVICES INC (CONSOLIDATED)<br><br>620 F STREET NW<br>WASHINGTON, DC 20004<br>52-2141065 | QUALITY CONTROL AND RESEARCH | DE | AARP | C | | | | | No |
| **(3)**THE H WAYNE AND ANNE D BARBETTI CHARITABLE REMAINDER UNITRUST<br><br>5011 HAVEN AVENUE<br>OCEAN CITY, NJ 08226<br>20-6379297 | CHARITABLE REMAINDER TRUST | NJ | N/A | T | | | | | No |
| **(4)**AARP FOUNDATION TRUST<br><br>400 HOWARD STREET<br>SAN FRANCISCO, CA 94105<br>30-6645384 | GRANTOR TRUST | CA | AARP FOUNDATION | T | | | | | No |
| | | | | | | | | | |
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**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 organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? | | | |
| a | Receipt of **(i)** interest, **(ii)**annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity | 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 | | No |
| e | Loans or loan guarantees by related organization(s) | 1e | Yes | |
| f | Dividends from related organization(s) | 1f | | No |
| 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 | | No |
| k | Lease of facilities, equipment, or other assets from related organization(s) | 1k | | No |
| l | Performance of services or membership or fundraising solicitations for related organization(s) | 1l | | No |
| 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 | | No |

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

| **(a)** Name of related organization | **(b)** Transaction type (a-s) | **(c)** Amount involved | **(d)** Method of determining amount involved |
|---|---|---|---|
| **(1)**AARP INC - GRANT AWARDS TO AARP FOR PERFROMANCE OF CHARITABLE ACTIVITIES | B | 143,028 | GRANT AGREEMENTS |
| **(2)**AARP INC - CASH CONTRIBUTIONS | C | 10,414,962 | CASH PAID |
| **(3)**AARP INC - BOND STANDBY AGREEMENT | E | 25,000,000 | IN THE EVENT OF DEFAULT |
| **(4)**AARP INC - IN-KIND SHARED SERVICES | M | 25,391,350 | ALLOCABLE COST |
| **(5)**AARP INC - IN-KIND ADVERTISING | M | 5,255,443 | PUBLICATION SPACE MARKET VALUE |
| **(6)**AARP INC - MAILING LISTS | N | | SEE SUPPLEMENTAL INFORMATION |
| **(7)**AARP INC - IN-KIND RENT | N | 67,660 | ALLOCABLE COST |
| **(8)**AARP INC - MAINTENANCE & TELEPHONE | P | 832,856 | COSTS INCURRED |
| **(9)**AARP INC - SHARED EMPLOYEE SALARY | Q | 455,481 | ACTUAL SALARY FOR TIME REPORTED |
| **(10)**AARP INC - 25K ANNUAL FEE LINE OF CREDIT | R | 25,000 | CASH PAID |
| **(11)**AARP SERVICES INC | C | 2,000 | CASH PAID |
| **(12)**ANDRUS INSURANCE FUND INC - WORKERS COMP & OTHER INSURANCE | R | 2,408,296 | PREMIUMS PAID |

**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 | |
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**Part VII** **Supplemental Information**

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

| Return Reference | Explanation |
|---|---|
| SCHEDULE R, PART V, LINE 2(A) (7) | AARP FOUNDATION AND AARP, ITS PARENT ORGANIZATION, 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

Return to Form

**Software ID:**

**Software Version:**