

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 black lung benefit trust or private foundation)

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

OMB No 1545-0047  
**2008**  
**Open to Public Inspection**

**A For the 2008 calendar year, or tax year beginning 01-01-2008 and ending 12-31-2008**

<b>B</b> Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	<b>C</b> Name of organization THE ASPEN INSTITUTE  Doing Business As  Number and street (or P O box if mail is not delivered to street address) Room/suite One Dupont Circle NW No 700  City or town, state or country, and ZIP + 4 washington, DC 20036	<b>D</b> Employer identification number 84-0399006  <b>E</b> Telephone number (202) 736-1074  <b>G</b> Gross receipts \$ 307,995,604
<b>F</b> Name and address of Principal Officer walter isaacson One Dupont Circle NW washington, DC 20036		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," attach a list See instructions )  <b>H(c)</b> Group Exemption Number ▶	
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c) ( 3 ) ◀ (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>J</b> Web site: ▶ WWW.ASPENINSTITUTE.ORG	
<b>K</b> Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> trust <input type="checkbox"/> association <input type="checkbox"/> other ▶		<b>L</b> Year of Formation 1949	<b>M</b> State of legal domicile CO

**Part I Summary**

<b>1</b>	Briefly describe the organization's mission or most significant activities Values-based leadership in neutral/balanced venue for discussing critical issues				
<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets				
<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>		66	
<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>		66	
<b>5</b>	Total number of employees (Part V, line 2a)	<b>5</b>		276	
<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>		101	
<b>7a</b>	Total gross unrelated business revenue from Part VIII, line 12, column (C)	<b>7a</b>		9,330,637	
<b>b</b>	Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>		-1,476,086	
		<b>Prior Year</b>		<b>Current Year</b>	
<b>8</b>	Contributions and grants (Part VIII, line 1h)	54,098,271		45,660,759	
<b>9</b>	Program service revenue (Part VIII, line 2g)	23,310,483		22,236,223	
<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	490,290		4,151,542	
<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,897,362		1,671,521	
<b>12</b>	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	82,796,406		73,720,045	
<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	4,768,929		3,146,847	
<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)			0	
<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	18,448,828		20,956,884	
<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)			0	
<b>b</b>	(Total fundraising expenses, Part IX, column (D), line 25 <u>1,922,241</u> )				
<b>17</b>	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	38,735,753		39,398,662	
<b>18</b>	Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A))	61,953,510		63,502,393	
<b>19</b>	Revenue less expenses Subtract line 18 from line 12	20,842,896		10,217,652	
		<b>Beginning of Year</b>		<b>End of Year</b>	
<b>20</b>	Total assets (Part X, line 16)	160,589,414		153,705,491	
<b>21</b>	Total liabilities (Part X, line 26)	15,255,793		12,394,009	
<b>22</b>	Net assets or fund balances Subtract line 21 from line 20	145,333,621		141,311,482	

**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.

**Please Sign Here**

\*\*\*\*\*  
 Signature of officer \_\_\_\_\_ Date 2009-11-12  
 Dolores Gorgone chief financial officer  
 Type or print name and title

<b>Paid Preparer's Use Only</b>	Preparer's signature ▶ Bill Turco	Date	Check if self-employed <input type="checkbox"/>	Preparer's PTIN (See Gen Inst )
	Firm's name (or yours if self-employed), address, and ZIP + 4 RSM MCGLADREY INC 9737 WASHINGTONIAN BLVD 400 GAITHERSBURG, MD 208787340			EIN ▶  Phone no ▶ (301) 296-3600

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

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

**1** Briefly describe the organization's mission

See Additional Data Table

**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 exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts 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 \$ 25,384,664 including grants of \$ 2,181,199 ) (Revenue \$ 2,919,546 )  
 Aspen Institute policy programs advance public and private-sector knowledge on significant policy issues confronting contemporary society They convene leaders and experts to seek constructive solutions to critical problems While each program is unique in substance and approach, they all share a commitment to advancing better policy by bringing diverse perspectives together in pursuit of informed dialogue and effective solutions

**4b** (Code ) (Expenses \$ 14,570,000 including grants of \$ ) (Revenue \$ 12,012,773 )  
 THE INSTITUTE CARRIES OUT MUCH OF ITS WORK ON ITS TWO CAMPUSES, IN ASPEN, COLORADO AND ON THE WYE RIVER ON MARYLAND'S EASTERN SHORE, WHERE NATURAL BEAUTY AND QUIET SURROUNDINGS ENCOURAGE THOUGHTFUL REFLECTION AND REFRESH THE MIND, BODY AND SPIRIT

**4c** (Code ) (Expenses \$ 4,479,488 including grants of \$ ) (Revenue \$ 1,411,088 )  
 Our public programs open the doors of the Aspen Institute to the public, offering opportunities to engage in thoughtful, nonpartisan inquiry Our major events include the Aspen Ideas Festival, the McCloskey Speaker Series, the Aspen Environment Forum, the Aspen Health Forum, Aspen in New York, and the Alma and Joseph Gildenhorn Book Series These public forums engage over 6,800 members of the general public annually

(Code ) (Expenses \$ 6,472,171 including grants of \$ 965,648 ) (Revenue \$ 5,821,111 )




**4d** Other program services (Describe in Schedule O )  
 (Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses \$ 50,906,323 *Must equal Part IX, Line 25, column (B).*

**Part IV Checklist of Required Schedules**

		Yes	No
<b>1</b>	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>	Yes	
<b>2</b>	Is the organization required to complete Schedule B, Schedule of Contributors?	Yes	
<b>3</b>	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		No
<b>4</b>	Section 501(c)(3) organizations Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II.</i>	Yes	
<b>5</b>	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III.</i>		
<b>6</b>	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i>		No
<b>7</b>	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>		No
<b>8</b>	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>		No
<b>9</b>	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i>		No
<b>10</b>	Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i>	Yes	
<b>11</b>	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</i>	Yes	
<b>12</b>	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	Yes	
<b>13</b>	Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		No
<b>14a</b>	Did the organization maintain an office, employees, or agents outside of the U S ?		No
<b>b</b>	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? <i>If "Yes," complete Schedule F, Part I.</i>	Yes	
<b>15</b>	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II.</i>	Yes	
<b>16</b>	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III.</i>		No
<b>17</b>	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I.</i>		No
<b>18</b>	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	Yes	
<b>19</b>	Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		No
<b>20</b>	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>		No
<b>21</b>	Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>	Yes	
<b>22</b>	Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>	Yes	
<b>23</b>	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J.</i>	Yes	
<b>24a</b>	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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25.</i>		No
<b>b</b>	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>c</b>	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>d</b>	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b>	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		No
<b>b</b>	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I.</i>		No
<b>26</b>	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i>		No
<b>27</b>	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III.</i>		No

**Part IV Checklist of Required Schedules** *(Continued)*

		Yes	No
<b>28</b>	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
<b>a</b>	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<b>b</b>	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<b>c</b>	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .		No
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> 		No
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . . 	Yes	
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . . 		No
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .		No
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .		No
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .		No
<b>35</b>	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .		No
<b>36</b>	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .		No
<b>37</b>	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .		No

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable . . . . .		
	<b>1a</b> 360		
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .		
	<b>1b</b> 0		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	Yes	
<b>2a</b>	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return . . . . .		
	<b>2a</b> 276		
<b>b</b>	If at least one is reported in 2a, did the organization file all required federal employment tax returns? . . . . . <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	Yes	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	Yes	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	Yes	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .		No
<b>b</b>	If "Yes," enter the name of the foreign country _____ See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .		No
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .		No
<b>c</b>	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction</i> ? . . . . .		
<b>6a</b>	Did the organization solicit any contributions that were not tax deductible? . . . . .		No
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .		
<b>7</b>	<i>Organizations that may receive deductible contributions under section 170(c).</i>		
<b>a</b>	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? . . . . .		
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	Yes	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .		No
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .		
	<b>7d</b>		
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .		No
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .		No
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . . .		
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .		
<b>8</b>	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</i> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .		
<b>9</b>	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</i>		
<b>a</b>	Did the organization make any taxable distributions under section 4966? . . . . .		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .		
<b>10</b>	<i>Section 501(c)(7) organizations.</i> Enter		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .		
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .		
<b>11</b>	<i>Section 501(c)(12) organizations.</i> Enter		
<b>a</b>	Gross income from members or shareholders . . . . .		
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . .		
<b>12a</b>	<i>Section 4947(a)(1) non-exempt charitable trusts.</i> Is the organization filing Form 990 in lieu of Form 1041? . . . . .		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .		
	<b>12b</b>		

**Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)**

**Section A. Governing Body and Management**

For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body . . . . .		
<b>1b</b>	Enter the number of voting members that are independent . . . . .		
<b>2</b>	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? . . . . .		No
<b>3</b>	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? . . . . .		No
<b>4</b>	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? . . . . .		No
<b>5</b>	Did the organization become aware during the year of a material diversion of the organization's assets? . . . . .		No
<b>6</b>	Does the organization have members or stockholders? . . . . .		No
<b>7a</b>	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .		No
<b>7b</b>	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .		No
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
<b>8a</b>	the governing body? . . . . .	Yes	
<b>8b</b>	each committee with authority to act on behalf of the governing body? . . . . .	Yes	
<b>9a</b>	Does the organization have local chapters, branches, or affiliates? . . . . .		No
<b>9b</b>	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? . . . . .		
<b>10</b>	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 . . . . .	Yes	
<b>11</b>	Is there any officer, director or 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 . . . . .		No

**Section B. Policies**

		Yes	No
<b>12a</b>	Does the organization have a written conflict of interest policy? If "No", go to line 13 . . . . .	Yes	
<b>12b</b>	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .		No
<b>12c</b>	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .		No
<b>13</b>	Does the organization have a written whistleblower policy? . . . . .	Yes	
<b>14</b>	Does the organization have a written document retention and destruction policy? . . . . .	Yes	
<b>15</b>	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		
<b>15a</b>	The organization's CEO, Executive Director, or top management official? . . . . .	Yes	
<b>15b</b>	Other officers or key employees of the organization? . . . . . Describe the process in Schedule O	Yes	
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .		No
<b>16b</b>	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .		

**Section C. Disclosure**

<b>17</b>	List the States with which a copy of this Form 990 is required to be filed	AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, IL, KS, KY, ME, MD, MA, MI, MN, MO, MS, NH, NJ, NM, NY, NC, ND, OH, PA, OR, OK, RI, SC, UT, VA, WA, WV, WI
<b>18</b>	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> own website <input checked="" type="checkbox"/> another's website <input checked="" type="checkbox"/> upon request	
<b>19</b>	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table	
<b>20</b>	State the name, physical address, and telephone number of the person who possesses the books and records of the organization DOLORES GORGONE 1 DuPont Circle NW Ste 700 Washington, DC 20036 (202) 736-1074	

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

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

**1a** Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.  
 \* List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.  
 \* 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.  
 List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.  
 Check this box if the organization did not compensate any officer, director, trustee or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee			
BERL BERNHARD , chairman eminentus	30	X					0	0	
leonard a lauder , chairman eminentus	30	X					0	0	
MADELINE K ALBRIGHT , TRUSTEE	30	X					0	0	
PAUL F ANDERSON , Trustee	30	X					0	0	
MERCEDES BASS , Trustee	30	X					0	0	
WILLIAM D BUDINGER , Trustee	30	X					0	0	
STEPHEN L CARTER , trustee	30	X					0	0	
MELVA BUCKSBAUM , Trustee	30	X					0	0	
ANDREA CUNNINGHAM , Trustee	30	X					0	0	
TARUN DAS , trustee	30	X					0	0	
ANN B FRIEDMAN , trustee	30	X					0	0	
JOHN DOERR , trustee	30	X					0	0	
SYLVIA A EARLE , trustee	30	X					0	0	
MICHAEL EISNER , TRUSTEE	30	X					0	0	
MARC B NATHANSON , trustee	30	X					0	0	
LEONHARD FISCHER , TRUSTEE	30	X					0	0	
ALAN FLETCHER , TRUSTEE	30	X					0	0	
Henetta holsman fore , TRUSTEE	30	X					0	0	
STEPHEN FRIEDMAN , TRUSTEE	30	X					0	0	
HENRY LOUIS GATES , trustee	30	X					0	0	
MIRCEA D GEOANA , TRUSTEE	30	X					0	0	
DAVID GERGEN , trustee	30	X					0	0	
ALMA L GILDENHORN , trustee	30	X					0	0	
JAMSHYD N GODREJ , TRUSTEE	30	X					0	0	
GERALD GREENWALD , trustee	30	X					0	0	
PATRICK W GROSS , trustee	30	X					0	0	
ARJUN GUPTA , trustee	30	X					0	0	
SINDEY HARMAN , trustee	30	X					0	0	
HAYNE HIPPIE , TRUSTEE	30	X					0	0	
GERALD D HOSIER , TRUSTEE	30	X					0	0	
ANN FRASHER HUDSON , trustee	30	X					0	0	
ROBERT J HURST , TRUSTEE	30	X					0	0	
JACQUELINE NOVOGRATZ , trustee	30	X					0	0	
YOTARO KOBAYASHI , trustee	30	X					0	0	
DAVID H KOCH , trustee	30	X					0	0	
ANN McLaughlin korologos , trustee	30	X					0	0	
TIMOTHY K KRAUSKOPF , trustee	30	X					0	0	
ELISABETH LULIN , TRUSTEE	30	X					0	0	
FREDERIC V MALEK , trustee	30	X					0	0	
ANNA DEAVERE SMITH , trustee	30	X					0	0	
James Manyika , TRUSTEE	30	X					0	0	
BONNIE PALMER MCCLOSKEY , trustee	30	X					0	0	
ANNE WELSH MCNULTY , TRUSTEE	30	X					0	0	
ELEANOR MERRILL , TRUSTEE	30	X					0	0	
KARLheinz muhr , trustee	30	X					0	0	
CLARE munana , trustee	30	X					0	0	
ELINOR bunin munroe , trustee	30	X					0	0	
JERRY MURDOCK , trustee	30	X					0	0	
SHASHI THAROOR , TRUSTEE	30	X					0	0	
ALICE YOUNG ESQ , trustee	30	X					0	0	
OLARA A OTUNNU , trustee	30	X					0	0	
ELAINE PAGELS , TRUSTEE	30	X					0	0	
MICHEL PEBEREAU , trustee	30	X					0	0	
CHARLES POWELL , trustee	30	X					0	0	
michael k powell , TRUSTEE	30	X					0	0	
MARGOT PRITZKER , trustee	30	X					0	0	
HER MAJESTY QUEEN , trustee	30	X					0	0	
LYNDA RESNICK , trustee	30	X					0	0	
ISAAC O SHONGWE , trustee	30	X					0	0	
F PETER CUNDILL , HoNORARY TRUSTEE	30	X					0	0	
ROBERT K STEEL , trustee	30	X					0	0	
ANDREW L STERN , Trustee	30	X					0	0	
GIULIO TREMONTI , Trustee	30	X					0	0	
RODERICK K VON , Trustee	30	X					0	0	
vin weber , tRUSTEE	30	X					0	0	
FREDERICK B WHITEMORE , trustee	30	X					0	0	
HRH PRINCE BANDAR bin SU , hoNORARY TRUSTEE	30	X					0	0	
KEITH BERWICK , hoNORARY TRUSTEE	30	X					0	0	
JOHN BRADEMAs , HoNORARY TRUSTEE	30	X					0	0	
JAMES C CALAWAY , HoNORARY TRUSTEE	30	X					0	0	
LISLE C CARTER , HoNORARY TRUSTEE	30	X					0	0	
WILLIAM T COLEMAN , HoNORARY TRUSTEE	30	X					0	0	
AL DIETSCH , HoNORARY TRUSTEE	30	X					0	0	
WILLIAM H DONALDSON , hoNORARY TRUSTEE	30	X					0	0	
JAMES L FERGUSON , HoNORARY TRUSTEE	30	X					0	0	
JACQUELINE GRAPIN , HoNORARY TRUSTEE	30	X					0	0	
IRVINE O HOCKADAY , HoNORARY TRUSTEE	30	X					0	0	
NINA RONDALE HOUGHTON , HoNORARY TRUSTEE	30	X					0	0	
SHIRLEY HUFSTEDLER , HoNORARY TRUSTEE	30	X					0	0	
JEROME HURET , HoNORARY TRUSTEE	30	X					0	0	
ROBERT S INGERSOll , HoNORARY TRUSTEE	30	X					0	0	
HENRY A KISSINGER , HoNORARY TRUSTEE	30	X					0	0	
GERALD M LEVIN , HoNORARY TRUSTEE	30	X					0	0	
JOHN P MASCOTTE , HoNORARY TRUSTEE	30	X					0	0	
ROBERT S MCNAMARA , HoNORARY TRUSTEE	30	X					0	0	
OLIVIER MELLERIO , hoNORARY TRUSTEE	30	X					0	0	
HISASHI OWADA , HoNORARY TRUSTEE	30	X					0	0	
JOHN J PHELAN , HoNORARY TRUSTEE	30	X					0	0	
THOMAS PICKERING , HoNORARY TRUSTEE	30	X					0	0	
WARREN B RUDMAN , HoNORARY TRUSTEE	30	X					0	0	
JAY SANDRICH , hoNORARY TRUSTEE	30	X					0	0	
LLOYD G SCHERMER , HoNORARY TRUSTEE	30	X					0	0	
CARLO SCOGNAMIGLIO , HoNORARY TRUSTEE	30	X					0	0	
KATHY D SMITH , HoNORARY TRUSTEE	30	X					0	0	
PHILLIPS TALBOT , HoNORARY TRUSTEE	30	X					0	0	
SOLOMON D TRUJILLO , HoNORARY TRUSTEE	30	X					0	0	
PAUL A VOLCKER , HoNORARY TRUSTEE	30	X					0	0	
LESLIE H WEXNER , HoNORARY TRUSTEE	30	X					0	0	
DOLORES WHARTON , HoNORARY TRUSTEE	30	X					0	0	
CLIFTON R WHARTON , HoNORARY TRUSTEE	30	X					0	0	
WILLIAM L DAVIS , HoNORARY TRUSTEE	30	X					0	0	
WILLIAM N JOY , HoNORARY TRUSTEE	30	X					0	0	
ROBERT MALOTT , HoNORARY TRUSTEE	30	X					0	0	
ALBERT H SMALL , HoNORARY TRUSTEE	30	X					0	0	
william e mayer , CHAIRMAN	1 10			X			0	0	
HENRY E CATTO , VICE CHAIRMAN	40			X			0	0	
LESTER CROWN , VICE CHAIRMAN	40			X			0	0	
WALTER ISAACSON , PRESIDENT AND CEO	40 00			X		705,711	0	49,714	
AMY MARGERUM , executive vp/corporate s	40 00			X		286,503	0	49,714	
ELLIOT GERSON , EXECUTIVE VP	40 00			X		277,179	0	42,814	
DOLORES GORGONE , cfo/vp finance & human r	40 00			X		183,449	0	27,517	
PETER A REILING , EXECUTIVE VP	40 00			X		282,161	0	42,814	
SUSAN SHERWIN , EXECUTIVE VP	40 00			X		232,806	0	38,335	
nchar d clark , VP DIRECTOR	40 00				X	328,065	0	55,378	
MARY ROBINSON , DIR, EGI	40 00				X	239,605	0	44,899	
CHARLES FIRESTONE , EXEC DIR C&S	40 00				X	247,219	0	49,843	
marvin edwards , dir rodel	40 00				X	241,755	0	39,627	
MARGARET E CLARK , ASSOC DIR EGI	40 00				X	191,928	0	39,188	





**Part VIII Statement of Revenue**

			(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514	
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1a</b>	Federated campaigns . . . . . <b>1a</b>					
	<b>b</b>	Membership dues . . . . .					
	<b>c</b>	Fundraising events . . . . . <b>1b</b>					
	<b>d</b>	Related organizations . . . . . <b>1c</b>					
	<b>e</b>	Government grants (contributions) <b>1d</b>					
	<b>f</b>	Government grants (contributions) <b>1e</b>	14,000				
	<b>g</b>	All other contributions, gifts, grants, and similar amounts not included above <b>1f</b>	45,646,759				
	<b>h</b>	Noncash contributions included in lines 1a-1f \$ 295,019 <b>1g</b>					
	<b>Total (Add lines 1a-1f)</b> . . . . . <b>1h</b>		45,660,759				
<b>Program Service Revenue</b>	<b>2a</b>	Conference Center Reve	Business Code				
			531,390	12,013,282	2,855,770	9,157,512	
	<b>b</b>	seminars	900,099	10,222,941	10,222,941		
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b>	All other program service revenue					
<b>g</b>	<b>Total. Add lines 2a-2f</b> . . . . . <b>2g</b>						
						\$ 22,236,223	
<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest other similar amounts) . . . . . <b>3</b>		605,287		605,287	
	<b>4</b>	Income from investment of tax-exempt bond proceeds . . . . . <b>4</b>					
	<b>5</b>	Royalties . . . . . <b>5</b>					
	<b>6a</b>	Gross Rents	(i) Real	150,006			
			(ii) Personal				
	<b>b</b>	Less rental expenses					
	<b>c</b>	Rental income or (loss)	150,006				
	<b>d</b>	Net rental income or (loss) . . . . . <b>6d</b>		150,006		150,006	
	<b>7a</b>	Gross amount from sales of assets other than inventory	(i) Securities	237,343,208			
			(ii) Other				
			Less cost or other basis and sales expenses	233,796,953			
			Gain or (loss)	3,546,255			
	<b>d</b>	Net gain or (loss) . . . . . <b>7d</b>		3,546,255		3,546,255	
<b>8a</b>	Gross income from fundraising events (not including \$ 1,254,686 of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000 . . . . . <b>8a</b>						
<b>b</b>	Less direct expenses . . . . . <b>8b</b>		931,220				
<b>c</b>	Net income or (loss) from fundraising events . . . . . <b>8c</b>		776,080		776,080		
<b>9a</b>	Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000 . . . . . <b>9a</b>						
<b>b</b>	Less direct expenses . . . . . <b>9b</b>						
<b>c</b>	Net income or (loss) from gaming activities . . . . . <b>9c</b>						
<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . . <b>10a</b>						
<b>b</b>	Less cost of goods sold . . . . . <b>10b</b>						
<b>c</b>	Net income or (loss) from sales of inventory . . . . . <b>10c</b>						
	Miscellaneous Revenue	Business Code					
<b>11a</b>	OTHER income	900,099	286,354		286,354		
<b>b</b>	regranting	900,099	285,956		285,956		
<b>c</b>	advertising revenue	541,800	173,125		173,125		
<b>d</b>	All other revenue _____						
<b>e</b>	<b>Total. Add lines 11a-11d</b> . . . . . <b>11e</b>						
						\$ 745,435	
<b>12</b>	<b>Total Revenue.</b> Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e . . . . . <b>12</b>		73,720,045	13,078,711	9,330,637	5,649,938	

**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) but are not required to complete columns (B), (C), and (D).**

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>		<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
<b>1</b>	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	2,221,160	2,221,160		
<b>2</b>	Grants and other assistance to individuals in the U S See Part IV, line 22	245,327	245,327		
<b>3</b>	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16	680,360	680,360		
<b>4</b>	Benefits paid to or for members				
<b>5</b>	Compensation of current officers, directors, trustees, and key employees . . . . .	2,312,500	492,656	1,562,314	257,530
<b>6</b>	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
<b>7</b>	Other salaries and wages	14,835,598	11,328,738		594,419
<b>8</b>	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	1,282,682	1,186,777	28,012	67,893
<b>9</b>	Other employee benefits . . . . .	1,097,815	1,022,776	17,509	57,530
<b>10</b>	Payroll taxes . . . . .	1,428,289	1,196,528	145,907	85,854
<b>11</b>	Fees for services (non-employees)				
<b>a</b>	Management . . . . .				
<b>b</b>	Legal . . . . .	212,127	20,929	191,198	
<b>c</b>	Accounting . . . . .	90,630	3,530	87,100	
<b>d</b>	Lobbying . . . . .				
<b>e</b>	Professional fundraising See Part IV, line 17 . . . . .				
<b>f</b>	Investment management fees . . . . .	68,390		68,390	
<b>g</b>	Other . . . . .				
<b>12</b>	Advertising and promotion . . . . .				
<b>13</b>	Office expenses . . . . .	3,708,906	2,380,144	1,154,362	174,400
<b>14</b>	Information technology . . . . .				
<b>15</b>	Royalties . . . . .				
<b>16</b>	Occupancy . . . . .				
<b>17</b>	Travel . . . . .	9,176,571	8,491,635	439,079	245,857
<b>18</b>	Payments of travel or entertainment expenses for any Federal, state or local public officials . . . . .				
<b>19</b>	Conferences, conventions and meetings . . . . .				
<b>20</b>	Interest . . . . .	43,145	17,224	25,921	
<b>21</b>	Payments to affiliates . . . . .				
<b>22</b>	Depreciation, depletion, and amortization . . . . .	3,132,252		3,132,252	
<b>23</b>	Insurance . . . . .				
<b>24</b>	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
<b>a</b>	contracted services	22,851,244	21,482,320	1,132,812	236,112
<b>b</b>	fixed costs	321,365	72,101	249,264	
<b>c</b>	bad debt expense	264,791	57,457	5,200	202,134
<b>d</b>	OTHER EXPENSES	7,847	6,661	674	512
<b>e</b>	SPECIAL EVENT EXPENSES	-478,606		-478,606	
<b>f</b>	All other expenses				
<b>25</b>	<b>Total functional expenses.</b> Add lines 1 through 24f	63,502,393	50,906,323	10,673,829	1,922,241
<b>26</b>	<b>Joint Costs.</b> Check <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

**Part X Balance Sheet**

		<b>(A)</b>		<b>(B)</b>	
		Beginning of year		End of year	
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	16,218	<b>1</b>	22,813	
	<b>2</b> Savings and temporary cash investments . . . . .	4,219,912	<b>2</b>	9,047,708	
	<b>3</b> Pledges and grants receivable, net . . . . .	38,395,935	<b>3</b>	30,800,114	
	<b>4</b> Accounts receivable, net . . . . .	3,618,457	<b>4</b>	2,537,134	
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i> . . . . .		<b>5</b>		
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i> . . . . .		<b>6</b>		
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>		
	<b>8</b> Inventories for sale or use . . . . .	107,899	<b>8</b>	170,981	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	1,133,565	<b>9</b>	1,122,260	
	<b>10a</b> Land, buildings, and equipment cost basis				
		<b>10a</b> 78,065,100			
	<b>b</b> Less accumulated depreciation <i>Complete Part VI of Schedule D</i> . . . . .				
		<b>10b</b> 27,105,789	49,528,103	<b>10c</b>	50,959,311
	<b>11</b> Investments—publicly traded securities . . . . .	34,748,290	<b>11</b>	13,221,984	
	<b>12</b> Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i> . . . . .	27,830,894	<b>12</b>	44,867,708	
	<b>13</b> Investments—program-related See Part IV, line 11 <i>Complete Part VIII of Schedule D</i> . . . . .		<b>13</b>		
<b>14</b> Intangible assets . . . . .		<b>14</b>			
<b>15</b> Other assets See Part IV, line 11 <i>Complete Part IX of Schedule D</i> . . . . .	990,141	<b>15</b>	955,478		
<b>16 Total assets. Add lines 1 through 15 (must equal line 34)</b>	160,589,414	<b>16</b>	153,705,491		
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	10,296,797	<b>17</b>	8,305,230	
	<b>18</b> Grants payable . . . . .		<b>18</b>		
	<b>19</b> Deferred revenue . . . . .	3,169,928	<b>19</b>	2,903,944	
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>		
	<b>21</b> Escrow account liability <i>Complete Part IV of Schedule D</i> . . . . .		<b>21</b>		
	<b>22</b> Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i> . . . . .		<b>22</b>		
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	900,200	<b>23</b>		
	<b>24</b> Unsecured notes and loans payable . . . . .		<b>24</b>		
	<b>25</b> Other liabilities <i>Complete Part X of Schedule D</i> . . . . .	888,868	<b>25</b>	1,184,835	
	<b>26 Total liabilities. Add lines 17 through 25</b>	15,255,793	<b>26</b>	12,394,009	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>				
	<b>27</b> Unrestricted net assets . . . . .	67,284,230	<b>27</b>	62,885,349	
	<b>28</b> Temporarily restricted net assets . . . . .	56,519,258	<b>28</b>	55,555,466	
	<b>29</b> Permanently restricted net assets . . . . .	21,530,133	<b>29</b>	22,870,667	
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>				
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>		
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>		
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>		
<b>33</b> Total net assets or fund balances . . . . .	145,333,621	<b>33</b>	141,311,482		
<b>34</b> Total liabilities and net assets/fund balances . . . . .	160,589,414	<b>34</b>	153,705,491		

**Part XI Financial Statements and Reporting**

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990 <input type="checkbox"/> cash <input checked="" type="checkbox"/> accrual <input type="checkbox"/> other		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .		No
<b>2b</b>	Were the organization's financial statements audited by an independent accountant? . . . . .	Yes	
<b>2c</b>	If "Yes" to lines 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? . . . . .	Yes	
<b>3a</b>	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? . . . . .		No
<b>3b</b>	If "Yes," did the organization undergo the required audit or audits? . . . . .		

**SCHEDULE A  
(Form 990 or  
990EZ)**

**Public Charity Status and Public Support**

OMB No 1545-0047

**2008**

**Open to Public  
Inspection**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.  
Attach to Form 990 or Form 990-EZ. See separate instructions.

Department of the  
Treasury  
Internal Revenue  
Service

Name of the organization  
THE ASPEN INSTITUTE

Employer identification number

84-0399006

**Part I Reason for Public Charity Status (to be completed by all organizations) (See Instructions)**

The organization is not a private foundation because it is (Please check only **one** organization )

- 1  A church, convention of churches, or association of churches described in **Section 170(b)(1)(A)(i)**.
- 2  A school described in **Section 170(b)(1)(A)(ii)**. (Attach Schedule E )
- 3  A hospital or a cooperative hospital service organization described in **Section 170(b)(1)(A)(iii)**. (Attach Schedule H )
- 4  A medical research organization operated in conjunction with a hospital described in **Section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **Section 170(b)(1)(A)(iv)**. (Complete Part II )
- 6  A federal, state, or local government or governmental unit described in **Section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **Section 170(b)(1)(A)(vi)** (Complete Part II )
- 8  A community trust described in **Section 170(b)(1)(A)(vi)** (Complete Part II )
- 9  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **Section 509(a)(2)**. (Complete Part III )
- 10  An organization organized and operated exclusively to test for public safety See **Section 509(a)(4)**. (See instructions )
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **Section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h  
 a  Type I      b  Type II      c  Type III - Functionally Integrated      d  Type III - Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f  If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
- (ii) a family member of a person described in (i) above?
- (iii) a 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
<b>11g(i)</b>		
<b>11g(ii)</b>		
<b>11g(iii)</b>		

h Provide the following information about the organizations the organization supports

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (See Instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

**Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**  
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Public Support**

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	25,458,920	53,732,518	45,058,955	54,098,271	46,915,445	225,264,109
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add line 1-3	25,458,920	53,732,518	45,058,955	54,098,271	46,915,445	225,264,109
<b>5</b> The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						26,018,818
<b>6 Public Support</b> subtract line 5 from line 4						199,245,291

**Total Support**

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>7</b> Amounts from line 4	25,458,920	698,742	45,058,955	54,098,271	46,915,445	225,264,109
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	621,778	698,742	746,734	657,132	719,949	3,444,335
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )	407,592	213,596	192,493	274,931	286,354	1,374,966
<b>11 Total Support</b> (Add lines 7 through 10)						230,083,410
<b>12</b> Gross receipts from related activities, etc (See instructions )					<b>12</b>	44,863,187
<b>13 First Five Years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b> <input type="checkbox"/>						

**Computation of Public Support Percentage**

<b>14</b> Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f))	<b>14</b>	86 600 %
<b>15</b> Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f	<b>15</b>	83 340 %

- 16a 33 1/3% Test - 2008.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% Test - 2007.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a 10% Facts and Circumstances Test - 2008.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization
- b 10% Facts and Circumstances Test - 2007.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization
- 18 Private Foundation.** If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

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

(Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total</b> Add lines 1-5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
<b>c</b> Total of lines 7a and 7b						
<b>8 Public Support</b> (Subtract line 7c from line 6)						

**Total Support**

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
<b>13 Total Support</b> (Add lines 9, 10c, 11 and 12)						
<b>14 First Five Years</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b> <input type="checkbox"/>						

**Computation of Public Support Percentage**

<b>15</b> Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	<b>15</b>	
<b>16</b> Public Support Percentage for 2007 Schedule A, Part IV-A, line 27g	<b>16</b>	

**Computation of Investment Income Percentage**

<b>17</b> Investment Income Percentage for <b>2008</b> (line 10c column (f) divided by line 13 column (f))	<b>17</b>	
<b>18</b> Investment Income Percentage from <b>2007</b> Schedule A, Part IV-A, line 27h	<b>18</b>	

- 19a 33 1/3% Tests - 2008.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 20 Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

---

**Part IV** **Supplemental Information.** Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide any other additional information. (see instructions)

---

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

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

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities)

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

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

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

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax)

- Section 501(c)(4), (5), or (6) organizations complete Part III

Name of the organization THE ASPEN INSTITUTE

Employer identification number

84-0399006

Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations. (See the instructions for Schedule C for details.)

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

Part I-B To be completed by all organizations exempt under section 501(c)(3). (See the instructions for Schedule C for details.)

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

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3). (See the instructions for Schedule C for details.)

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$
2 Enter the amount of the filing organization's internal funds contributed to other organizations for section 527 exempt function activities \$
3 Total of direct and indirect exempt function expenditures Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b \$
4 Did the filing organization file Form 1120-POL for this year? Yes No
5 State the names, addresses and Employer Identification Number (EIN) of all section 527 political organizations to which payments were made

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's internal funds, (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.



**Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)).** (See the instructions for Schedule C for details.)

- A** Check  if the filing organization belongs to an affiliated group  
**B** Check  if the filing organization checked box A and "limited control" provisions apply

<b>Limits on Lobbying Expenditures—</b> (The term "expenditures" means amounts paid or incurred.)	<b>(a)</b> Filing Organization's Totals	<b>(b)</b> Affiliated Group Totals
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)	945	
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)	13,061	
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)	14,006	
<b>d</b> Other exempt purpose expenditures	64,189,277	
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)	64,203,283	
<b>f</b> Lobbying nontaxable amount Enter the amount from the following table in both columns— <b>If the amount on line 1e, column (a) or (b) is:</b>	1,000,000	
Not over \$500,000		<b>The lobbying nontaxable amount is:</b> 20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000		\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000		\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000		\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000		\$1,000,000
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)	250,000	
<b>h</b> Subtract line 1g from line 1a Enter -0- if line g is more than line a	0	
<b>i</b> Subtract line 1f from line 1c Enter -0- if line f is more than line c	0	
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No

**4-Year Averaging Period Under Section 501(h)**  
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 1a through 1f of the instructions.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
<b>2a</b> Lobbying non-taxable amount			1,000,000	1,000,000	2,000,000
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					3,000,000
<b>c</b> Total lobbying expenditures			14,907	14,006	28,913
<b>d</b> Grassroots non-taxable amount			250,000	250,000	500,000
<b>e</b> Grassroots ceiling amount (150% of line d, column (e))					750,000
<b>f</b> Grassroots lobbying expenditures				945	945

**Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)).** (See the instructions for Schedule C for details.)

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

**Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).** (See the instructions for Schedule C for details.)

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

**Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes."** (See the instructions for Schedule C for details.)

<b>1</b> Dues, assessments and similar amounts from members	1 \$
<b>2</b> Section 162(e) non-deductible lobbying and political expenditures <i>(do not include amounts of political expenses for which the section 527(f) tax was paid).</i>	
<b>a</b> Current Year	2a \$
<b>b</b> Carryover from last year	2b \$
<b>c</b> Total	2c \$
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3 \$
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4 \$
<b>5</b> Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5 \$

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation



SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Name of the organization THE ASPEN INSTITUTE

Employer identification number

84-0399006

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

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4.

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Yes No

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

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

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

- a Total number of conservation easements
b Total acreage restricted by conservation easements
c Number of conservation easements on a certified historic structure included in (a)
d Number of conservation easements included in (c) acquired after 8/17/06

Table with 2 columns: Line number, Held at the End of the Year. Rows 2a, 2b, 2c, 2d.

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

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

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

6 Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 \$

(ii) Assets included in Form 990, Part X \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 \$

b Assets included in Form 990, Part X \$

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

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a Public exhibition, b Scholarly research, c Preservation for future generations, d Loan or exchange programs, e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain why in Part XIV and complete the following table

Table with 2 columns: Description (1c-1f) and Amount

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

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

Table with 6 columns: (a) Current Year, (b) Prior Year, (c) Two Years Back, (d) Three Years Back, (e) Four Years Back. Rows 1a-1g.

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment, b Permanent endowment, c Term endowment

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

Table with 3 columns: Description (3a(i), 3a(ii), 3b), Yes, No

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

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Depreciation, (d) Book value. Rows 1a-1e and Total.

**Part VII Investments—Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other partnerships	44,867,708	F
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 12 ) ▶	44,867,708	

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 13 ) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
<b>Total.</b> (Column (b) should equal Form 990, Part X, col.(B) line 15.) . . . . . ▶	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

(a) Description of Liability	(b) Amount
Federal Income Taxes	
capital lease	399,880
DEFERRED COMPENSATION	784,955
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 25 ) ▶	1,184,835

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

<b>1</b>	Total revenue (Form 990, Part VIII, column (A), line 12)	<b>1</b>	73,720,045
<b>2</b>	Total expenses (Form 990, Part IX, column (A), line 25)	<b>2</b>	63,502,393
<b>3</b>	Excess or (deficit) for the year Subtract line 2 from line 1	<b>3</b>	10,217,652
<b>4</b>	Net unrealized gains (losses) on investments	<b>4</b>	-14,239,791
<b>5</b>	Donated services and use of facilities	<b>5</b>	
<b>6</b>	Investment expenses	<b>6</b>	
<b>7</b>	Prior period adjustments	<b>7</b>	
<b>8</b>	Other (Describe in Part XIV)	<b>8</b>	
<b>9</b>	Total adjustments (net) Add lines 4 - 8	<b>9</b>	-14,239,791
<b>10</b>	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	<b>10</b>	-4,022,139

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	60,181,144
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains on investments . . . . .	<b>2a</b>	-14,239,791
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	576,630
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	-13,663,161
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	73,844,305
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	68,390
<b>b</b>	Other (Describe in Part XIV) . . . . .	<b>4b</b>	-192,650
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	-124,260
<b>5</b>	Total Revenue Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	73,720,045

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	64,203,283
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	576,630
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Losses reported on Form 990, Part IX, line 25 . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV) . . . . .	<b>2d</b>	192,650
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	769,280
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	63,434,003
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	68,390
<b>b</b>	Other (Describe in Part XIV) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	68,390
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	63,502,393

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation





SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

Name of the organization THE ASPEN INSTITUTE

Employer identification number

84-0399006

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

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

2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed)

Table with 6 columns: (a) Region, (b) Number of offices in the region, (c) Number of employees or agents in region, (d) Activities conducted in region (by type), (e) If activity listed in (d) is a program service, describe specific type of service(s) in region, (f) Total expenditures in region. Rows include europe, east asia and the pacific, south asia, sub-saharan africa, Middle East and North Africa, Central America and the Caribbean, South America, north America, and Totals.

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 . . . . .   
 Use Schedule F-1 if additional space is needed.

<b>1</b>	<b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
			Europe	Working with companies to adopt Human Rights Policies	20,000	wire			
			Sub-Saharan Africa	Develop Value Based Leadership in East Africa	498,637	wire			
			sub-Saharan Africa	Strengthen the Employment aspects of Liberia's Poverty reduction strategy	30,900	wire			
			sub-Saharan Africa	Furtherance of the West African Leadership Initiatives	50,230	wire			
			south asia	Furtherance of the India Leadership Initiatives	74,667	wire			

**2** Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . .  \_\_\_\_\_

**3** Enter total number of other organizations or entities . . . . .  \_\_\_\_\_





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

**Supplemental Information Regarding  
Fundraising or Gaming Activities**

OMB No 1545-0047

**2008**

**Open to Public  
Inspection**

Department of the  
Treasury  
Internal Revenue  
Service

▶ **Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.**

Name of the organization  
THE ASPEN INSTITUTE

**Employer identification number**

84-0399006

**Part I Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a**  Mail solicitations
  - b**  Email solicitations
  - c**  Phone solicitations
  - d**  In-person solicitations
  - e**  Solicitation of non-government grants
  - f**  Solicitation of government grants
  - g**  Special fundraising events

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

**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
<b>Total</b>						

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

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		<u>SUMMER BENEFIT</u> (event type)	<u>ANNUAL DINNER</u> (event type)	(total number)	(Add col (a) through col (c))
<b>Revenue</b>	<b>1</b> Gross receipts . . . . .	613,900	1,424,776	147,230	2,185,906
	<b>2</b> Less Charitable contributions . . . . .	602,050	229,370	99,800	931,220
	<b>3</b> Gross revenue (line 1 minus line 2) . . . . .	11,850	1,195,406	47,430	1,254,686
<b>Direct Expenses</b>	<b>4</b> Cash Prizes . . . . .				
	<b>5</b> Non-cash Prizes . . . . .				
	<b>6</b> Rent/Facility costs . . . . .				
	<b>7</b> Other direct expenses . . . . .	167,033	291,577	19,996	478,606
	<b>8</b> Direct expense summary Add lines 4 through 7 in column (d) . . . . . ▶				478,606
<b>9</b> Net income summary Combine lines 3 and 8 in column (d) . . . . . ▶				776,080	

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
		<b>1</b> Gross revenue . . . . .			
<b>Direct Expenses</b>	<b>2</b> Cash prizes . . . . .				
	<b>3</b> Non-cash prizes . . . . .				
	<b>4</b> Rent/facility costs . . . . .				
	<b>5</b> Other direct expenses . . . . .				
<b>6</b> Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
<b>7</b> Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶					
<b>8</b> Net gaming income summary Combine lines 1 and 7 in column (d) . . . . . ▶					

		Yes	No
<b>9</b>	Enter the state(s) in which the organization operates gaming activities _____		
<b>a</b>	Is the organization licensed to operate gaming activities in each of these states? . . . . .	<b>9a</b>	
<b>b</b>	If "No," Explain _____ _____		
<b>10a</b>	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	<b>10a</b>	
<b>b</b>	If "Yes," Explain _____ _____		
<b>11</b>	Does the organization operate gaming activities with nonmembers? . . . . .	<b>11</b>	
<b>12</b>	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . .	<b>12</b>	

**13** Indicate the percentage of gaming activity operated in

- a** The organization's facility . . . . . **13a**
- b** An outside facility . . . . . **13b**

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

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . .

- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_
- c** If "Yes," enter name and address

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

**16** Gaming manager information

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

- Director/officer
- Employee
- Independent contractor

**17** Mandatory distributions

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . .

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

Yes No

**15a**

**17a**

Schedule I (Form 990)

OMB No 1545-0047

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

Name of the organization THE ASPEN INSTITUTE

Employer identification number 84-0399006

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 if additional space is needed.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section if applicable, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of non-cash assistance, (h) Purpose of grant or assistance. Row 1 contains 'See Additional Data Table'.

- 2 Enter total number of section 501(c)(3) and government organizations
3 Enter total number of other organizations





**Schedule J**  
(Form 990)

**Compensation Information**

OMB No 1545-0047

**2008**

**Open to Public Inspection**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

Department of the Treasury  
Internal Revenue Service

Name of the organization  
THE ASPEN INSTITUTE

Employer identification number

84-0399006

**Part I Questions Regarding Compensation**

	Yes	No								
<p><b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input checked="" type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax idemnification and gross-up payments</td> <td><input checked="" type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax idemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax idemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p><b>b</b> If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain.</p>	1b Yes									
<p><b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?</p>	2 Yes									
<p><b>3</b> Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p><b>4</b> During the year, did any person listed in Form 990, Part VII, Section A, line 1a:</p> <p><b>a</b> Receive a severance payment or change of control payment?</p> <p><b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p><b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p> <p><b>501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.</b></p>	4a	No								
<p><b>5</b> For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p><b>a</b> The organization?</p> <p><b>b</b> Any related organization?</p> <p>If "Yes," to line 5a or 5b, describe in Part III.</p>	5a	No								
<p><b>6</b> For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p><b>a</b> The organization?</p> <p><b>b</b> Any related organization?</p> <p>If "Yes," to line 6a or 6b, describe in Part III.</p>	6a	No								
<p><b>7</b> For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>	7	No								
<p><b>8</b> Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III.</p>	8	No								

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space needed.

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

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
WALTER ISAACSON	(i)	705,711			34,500	19,215	759,426	
	(ii)							
AMY MARGERUM	(i)	286,503			34,500	19,141	340,144	
	(ii)							
ELLIOT GERSON	(i)	277,179			27,600	19,220	323,999	
	(ii)							
DOLORES GORGONE	(i)	183,449			27,517	4,756	215,722	
	(ii)							
PETER A REILING	(i)	282,161			27,600	18,416	328,177	
	(ii)							
SUSAN SHERWIN	(i)	232,806			27,936	17,811	278,553	
	(ii)							
richard clark	(i)	328,065			34,500	20,878	383,443	
	(ii)							
MARY ROBINSON	(i)	239,605			34,500	15,355	289,460	
	(ii)							
CHARLES FIRESTONE	(i)	247,219			34,500	15,343	297,062	
	(ii)							
marvin edwards	(i)	241,755			29,010	16,743	287,508	
	(ii)							
MARGARET E CLARK	(i)	191,928			28,789	13,596	234,313	
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							



SCHEDULE M (Form 990)

Non-Cash Contributions

OMB No 1545-0047

2008

Open to Public Inspection

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

Department of the Treasury Internal Revenue Service

Name of the organization THE ASPEN INSTITUTE

Employer identification number

84-0399006

Part I Types of Property

Table with 4 columns: (a) Check if applicable, (b) Number of Contributions, (c) Revenues reported on Form 990, Part VIII, line 1g, (d) Method of determining revenues. Rows include Art-Works of art, Books and publications, Securities-Publicly traded, and Other (describe travel).

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

Table with 3 columns: Question, Yes, No. Rows include 30a (During the year, did the organization receive by contribution any property...), 31 (Does the organization have a gift acceptance policy...), 32a (Does the organization hire or use third parties...), and 33 (If the organization did not report revenues...).



**SCHEDULE O  
(Form 990)**

**Supplemental Information to Form 990**

OMB No 1545-0047

**2008**

**Open to Public  
Inspection**

Department of the  
Treasury  
Internal Revenue  
Service

**▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.**

**Name of the organization**  
THE ASPEN INSTITUTE

**Employer identification number**

84-0399006

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	The aspen Institute supports roughly a dozen leadership programs in the United States and around the world These programs encourage civically engaged men and w omen to move "from success to significance" and to apply their entrepreneurial skills to the foremost challenges of the day The programs independently select a class of Fellow s and convenes them several times over tw o years for intensive leadership seminars Currently, the aggregate AGLN engage more than 900 Fellow s from 43 countries Expenses \$ 3313187 including grants of \$ 894648 Revenue \$ 382300

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	Seminars bring together diverse groups of experienced leaders to learn from each other and to discuss some of the greatest thinkers and leaders of all time In an environment conducive to reflection and dialogue, participants w restle w ith fundamental questions about the nature of value-centered leadership through Socratic roundtable discussions Through the seminar experience, participants come to a new aw areness of the organizations they lead and the values they find important They return to their organizations w ith renewed energy, inspiration and commitment Expenses \$ 1639290 including grants of \$ 0 Revenue \$ 5267066 other Expenses \$ 1519694 including grants of \$ 71000 Revenue \$ 171745

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		The 990 of The Aspen Institute is prepared by an external tax preparer from information obtained from Institute staff Once the initial draft is prepared it is review ed by Sr Finance/accounting and communications staff If necessary, changes are made and another draft is issued The second draft is review ed by an appointed member of the Audit Committee and the external tax preparer along w ith the CFO and Director of Accounting If necessary, changes are made and another draft is issued The next draft is provided to all members of the audit committee and review ed in the committee and copies are distributed to all board members at the annual meeting in November before the return is due

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		ALL TRUSTEES ARE REQUIRED TO SIGN THE CONFLICT OF INTEREST POLICY WHEN THEY BECOME TRUSTEES Currently, members of the finance committee are required to disclose annually any interests that could give rise to a conflict of interest In 2009, this policy of annual disclosure has been extended to the full Board, officers and key employees

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		The Aspen Institute utilizes an external consultant to review all salaries of the Institute including top management and key employees The consultant performs market comparisons w ithin our peer organizations and makes recommendations on salary levels for positions The salary levels are based on percentages of the peer organizations The Institute strives to stay at the 50% level of our comparative organizations The CEO, other officers and key employees salaries are review ed by this consultant and then presented to the compensation sub-committee of the executive committee The salaries are vetted in this sub-committee and a recommendation is made to the full Board for approval in executive session

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		The governing documents, conflict of interest policy, and financial statements are available upon request

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 84-0399006

**Name:** THE ASPEN INSTITUTE

### **Form 990, Part III, Line 1 - Briefly describe the organization's mission:**

The Aspen Institute mission is twofold: to foster values-based leadership, encouraging individuals to reflect on the ideals and ideas that define a good society, and to provide a neutral and balanced venue for discussing and acting on critical issues. The Institute does this in four ways: Seminars, which help participants reflect on what they think makes a good society and enhancing their capacity to solve the problems leaders face; Young-Leader Fellowships around the globe, which bring proven leaders together for an intense multi-year program and commitment; Policy Programs, which serve as nonpartisan forums for analysis, consensus-building, and problem-solving on a wide variety of issues; and Public Programs, which provide a commons for people to share ideas. The Institute is based in Washington, DC with operations in Aspen, Colorado, New York City and on the Wye River on Maryland's Eastern Shore. It also has an international network of partners.



**Software ID:**  
**Software Version:**  
**EIN:** 84-0399006  
**Name:** THE ASPEN INSTITUTE

**Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe	Working with companies to adopt Human Rights Policies	20,000	wire			
		Sub-Saharan Africa	Develop Value Based Leadership in East Africa	498,637	wire			
		sub-Saharan Africa	Strengthen the Employment aspects of Liberia's Poverty reduction strategy	30,900	wire			
		sub-Saharan Africa	Furtherance of the West African Leadership Initiatives	50,230	wire			
		south asia	Furtherance of the India Leadership Initiatives	74,667	wire			

**Software ID:**  
**Software Version:**  
**EIN:** 84-0399006  
**Name:** THE ASPEN INSTITUTE

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACCIÓN New Mexico 20 First Plaza NW Suite 417 Albuquerque, NM 87102	06-0646973	501(c)(3)	6,000				Grant
ACCIÓN New Mexico 21 First Plaza NW Suite 417 Albuquerque, NM 87103	26-1179317	501(c)(3)	45,000				Grant
ACCIÓN New York 115 East 23rd Street 7th Floor New York, NY 10010	85-0417347	501(c)(3)	7,000				Grant
ACCIÓN San Diego 1250 6th AVE Suite 500 San Diego, CA 92101	13-2875743	501(c)(3)	7,000				Grant
Accion USA 56 Roland Street Suite 300 Boston, MA 02129	11-3317234	501(c)(3)	7,000				Grant
Accion USA 57 Roland Street Suite 300 Boston, MA 02130	33-0620415	501(c)(3)	50,000				Grant
Appalachian Center for Economic Networks Inc 95 Columbus RD Athens, OH 45702	04-3219159	501(c)(3)	20,000				Grant
Appalachian Center for Economic Networks Inc 96 Columbus RD Athens, OH 45703	74-2764780	501(c)(3)	20,000				Grant
Association for Enterprise Opp 1601 N Kent Street Suite 1101 Arlington, VA 22209	23-2689714	501(c)(3)	75,000				Grant
Business Invest in Growth 1050 E 11th ST 350 Austin, TX 78702	52-1749216	501(c)(3)	7,000				Grant

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Capital IDEA504 Lavaca Austin, TX 78701	93-1315010	501(c)(3)	100,000				Grant
Case Western Reserve University10900 Euclid AVE Cleveland, OH 441067015	56-1733266	501(c)(3)	50,000				Grant
Community Career Development Inc3550 Wilshire BLVD Suite 500 Los Angeles, CA 90010	31-1543695	501(c)(3)	100,000				Grant
Community First FundPO Box 524 30 West Orange Street Lancaster, PA 17608	31-1719434	501(c)(3)	7,000				Grant
Dalberg Consulting US LLC205 E 42nd ST Suite 1830 New York, NY 10017	23-2435964		50,000				Grant
Enterprise Corporation of the Delta4 Old River Place Jackson, MS 39202	94-2793122	501(c)(3)	30,000				Grant
GLOBAL DEVELOPMENT INCUBATOR INC206 East 42nd Street Suite 1830 New York, NY 10018	39-1597954	501(c)(3)	50,000				Grant
GLOBAL DEVELOPMENT INCUBATOR INC205 East 42nd Street Suite 1830 New York, NY 10017	87-0495534	501(c)(3)	71,000				Grant
GLOBAL DEVELOPMENT INCUBATOR INC207 East 42nd Street Suite 1830 New York, NY 10019	91-1704028	501(c)(3)	102,000				Grant
Greater Flint Health Coalition519 South Saginaw ST Suite 306 Flint, MI 48502	95-3674624	501(c)(3)	100,000				Grant

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Helicon Collaborative LLC 187 Baltic Street Brooklyn, NY 11201	94-3081525		6,000				Grant
Insight Center for Community Economic Development 2201 Broadway Suite 815 Oakland, CA 94612	23-2741508	501(c)(3)	12,000				Grant
Instituto Del Progreso Latino 2570 S Blue Island AVE Chicago, IL 60608	03-0557778	501(c)(3)	100,000				Grant
Islay Consulting LLC 3378 East Arroyo Chico Tucson, AZ 85717	23-2048721		7,500				Grant
Islay Consulting LLC 3377 East Arroyo Chico Tucson, AZ 85716	41-6007513		17,500				Grant
Justine Petersen 1024 N Grand BLVD ST Louis, MO 63107	05-0258882	501(c)(3)	7,000				Grant
Justine Petersen 1023 N Grand BLVD ST Louis, MO 63106	94-2410277	501(c)(3)	6,000				Grant
Justine Petersen 1025 N Grand BLVD ST Louis, MO 63108	13-2875743	501(c)(3)	60,000				Grant
Latino Economic Development Corp 2316 18th ST NW Washington, DC 20009	04-2103545	501(c)(3)	7,000				Grant
Mayors Fund to Advance New York City One Centre ST 23rd FL New York, NY 10007	03-0557777	501(c)(3)	25,000				Grant

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Mercy Corps Northwest 2069 NE Hoyt ST Portland, OR 97232	31-1129633	501(c)(3)	7,000				Grant
Mountain BizWorks 153 S Lexington AVE Asheville, NC 28801	31-1129634	501(c)(3)	7,000				Grant
Mountain BizWorks 153 S Lexington AVE Asheville, NC 28801	23-2048721	501(c)(3)	50,000				Grant
Nebraska Microenterprise Partnership Fund 233 N Oakland Avenue Oakland, NE 68045	43-1769075	501(c)(3)	7,000				Grant
New Schools Venture Fund 49 Stevenson Street Suite 575 San Francisco, CA 941052943	43-1769074	501(c)(3)	131,768				Grant
New Schools Venture Fund 50 Stevenson Street Suite 575 San Francisco, CA 941052943	23-2048721	501(c)(3)	65,884				Grant
New Schools Venture Fund 51 Stevenson Street Suite 575 San Francisco, CA 941052943	13-3783906	501(c)(3)	65,884				Grant
Northern Virginia Family Service 10455 White Granite Drive Suite 100 Oakton, VA 22124	23-1352685	501(c)(3)	100,000				Grant
Opportunity Fund 111 West Saint John Street Suite 800 San Jose, CA 95113	64-0851798	501(c)(3)	7,000				Grant
Opportunity Fund 111 West Saint John Street Suite 800 San Jose, CA 95113	85-0417348	501(c)(3)	50,000				Grant

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Philadelphia Development Partnership 111 South Independence Mall East Suite 810 Philadelphia, PA 19106	04-3219160	501(c)(3)	7,000				Grant
PublicPrivate Ventures 2002 Market ST Suite 600 Philadelphia, PA 19103	34-1018992	501(c)(3)	8,000				Grant
PublicPrivate Ventures 2001 Market ST Suite 600 Philadelphia, PA 19103	26-1546220	501(c)(3)	21,000				Grant
PublicPrivate Ventures 2003 Market ST Suite 600 Philadelphia, PA 19103	14-1945287	501(c)(3)	21,000				Grant
Regents of the University of Minnesota 200 Oak Street SE Suite 450 Minneapolis, MN 55455 2070	56-1733266	501(c)(3)	10,000				Grant
Renaissance Entrepreneurship Center 275 5th Street San Francisco, CA 94103	31-1719434	501(c)(3)	7,000				Grant
Seattle King County Workforce Development Council 2003 Western AVE Suite 250 Seattle, WA 98121 2162	74-6000203	501(c)(3)	100,000				Grant
Structured Employment Economic Development Corp 915 Broadway 17th FL New York, NY 10010	85-0367809	501(c)(3)	6,250				Grant
Structured Employment Economic Development Corp 915 Broadway 17th FL New York, NY 10010	94-3281780	501(c)(3)	12,500				Grant
The Foundation Center 79 Fifth AVE 4th Floor New York, NY 10003	94-3281780	501(c)(3)	67,000				Grant

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
The John Hope Settlement House 7 Thomas P Whitten Way Providence, RI 02903	94-3281780	501(c)(3)	10,000				Grant
The University of Texas at Austin PO Box 7726 Austin, TX 787137726	94-3281780	501(c)(3)	60,000				Grant
The Wisconsin Women's Business Initiative Corp 2745 N Dr Martin Luther King Jr DR Milwaukee, WI 53212	13-1837418	501(c)(3)	7,000				Grant
Trustees of Boston College 36 College RD Chestnut Hill, MA 02467	14-1945286	501(c)(3)	15,000				Grant
Trustees University of Pennsylvania PO Box 785541 Philadelphia, PA 191785541	36-3834357	501(c)(3)	26,255				Grant
Utah Microenterprise Loan Fund 154 Ford Avenue Suite A Salt Lake City, UT 84115	74-2893041	501(c)(3)	7,000				Grant
Washington CASH 2100 24th AVE South Suite 380 Seattle, WA 98144	23-7209115	501(c)(3)	7,000				Grant
WESST Corp 414 Silver SW Albuquerque, NM 87102	38-3301514	501(c)(3)	60,000				Grant
Womens Economic Ventures 333 South Salinas Street Santa Barbara, CA 93103	36-2937375	501(c)(3)	7,000				Grant
Womens Initiative for Self Employment 1398 Valencia ST San Francisco, CA 94110	54-0791977	501(c)(3)	7,000				Grant

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Womens Opportunities Resource Center 2010 Chestnut ST Philadelphia, PA 19103	91-2051978	501(c)(3)	7,000				Grant
Yale University PO Box 208321 / 370 Temple ST New Haven, CT 06520	14-1945288	501(c)(3)	5,430				Grant



**Software ID:**  
**Software Version:**  
**EIN:** 84-0399006  
**Name:** THE ASPEN INSTITUTE

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

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
WALTER ISAACSON	(i) (ii)	705,711		34,500	19,215	759,426	
AMY MARGERUM	(i) (ii)	286,503		34,500	19,141	340,144	
ELLIOT GERSON	(i) (ii)	277,179		27,600	19,220	323,999	
DOLORES GORGONE	(i) (ii)	183,449		27,517	4,756	215,722	
PETER A REILING	(i) (ii)	282,161		27,600	18,416	328,177	
SUSAN SHERWIN	(i) (ii)	232,806		27,936	17,811	278,553	
richard clark	(i) (ii)	328,065		34,500	20,878	383,443	
MARY ROBINSON	(i) (ii)	239,605		34,500	15,355	289,460	
CHARLES FIRESTONE	(i) (ii)	247,219		34,500	15,343	297,062	
marvin edwards	(i) (ii)	241,755		29,010	16,743	287,508	
MARGARET E CLARK	(i) (ii)	191,928		28,789	13,596	234,313	

**Part III Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation
------------	------------------	-------------