

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047
2019
Open to Public Inspection

A For the **2019** calendar year, or tax year beginning **01-01-2019**, and ending **12-31-2019**

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

C Name of organization: **AARP FOUNDATION**
 Doing business as: _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite: **601 E STREET NW TAX DEPT**
 City or town, state or province, country, and ZIP or foreign postal code: **WASHINGTON, DC 20049**

D Employer identification number: **52-0794300**

E Telephone number: **(202) 434-3399**

F Name and address of principal officer:
LISA MARSH RYERSON
601 E STREET NW TAX DEPT
WASHINGTON, DC 20049

G Gross receipts \$ **966,873,763**

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)
H(c) Group exemption number ▶ _____

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

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

K Form of organization: Corporation Trust Association Other ▶ _____

L Year of formation: 1961 **M** State of legal domicile: DC

Part I Summary

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

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	8
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	8
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	353
6 Total number of volunteers (estimate if necessary)	6	41,892
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	101,845
7b Net unrelated business taxable income from Form 990-T, line 39	7b	13,940

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	248,393,739	263,901,185
9 Program service revenue (Part VIII, line 2g)	1,121,191	1,387,081
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	32,766,638	30,703,169
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-198,827	-189,481
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	282,082,741	295,801,954
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	70,197,948	80,209,169
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	37,172,276	38,099,911
16a Professional fundraising fees (Part IX, column (A), line 11e)	1,137,486	1,528,682
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 22,730,179		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	62,415,930	67,588,163
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	170,923,640	187,425,925
19 Revenue less expenses. Subtract line 18 from line 12	111,159,101	108,376,029

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	439,330,745	598,934,811
21 Total liabilities (Part X, line 26)	52,750,956	64,765,477
22 Net assets or fund balances. Subtract line 21 from line 20	386,579,789	534,169,334

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: _____ Date: **2020-11-10**

LISA MARSH RYERSON PRESIDENT
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: _____ Preparer's signature: _____ Date: _____

Check if self-employed PTIN: P00955143

Firm's name ▶ **ANDERSEN TAX LLC** Firm's EIN ▶ **33-1197384**

Firm's address ▶ **400 SOUTH HOPE STREET SUITE 1000** Phone no. (213) 593-2300
LOS ANGELES, CA 90071

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

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

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 72,044,853 including grants of \$ 56,513,567) (Revenue \$ 935)

See Additional Data

4b (Code:) (Expenses \$ 21,230,793 including grants of \$) (Revenue \$)

See Additional Data

4c (Code:) (Expenses \$ 9,857,245 including grants of \$ 1,728,848) (Revenue \$ 945,380)

See Additional Data

See Additional Data Table

4d Other program services (Describe in Schedule O.)
(Expenses \$ 48,564,433 including grants of \$ 21,966,754) (Revenue \$ 440,766)

4e Total program service expenses ▶ 151,697,324

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question/Description, Yes, No. Rows include questions 22 through 38 regarding organizational reporting, compensation, tax-exempt bonds, and controlled entities.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question/Description, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 353			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		2b Yes		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? . . .		3a Yes		
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i> . . .		3b Yes		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . .		4a Yes		
b If "Yes," enter the name of the foreign country: ▶ <u>DA, ID, IS, NO, PO, KS, SW, UK, TU, MX</u> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .		5a	No	
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b	No	
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .		6a	No	
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a	No	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c	No	
d If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e	No	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .		7f	No	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		
9 Sponsoring organizations maintaining donor advised funds.				
a Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .		9b		
10 Section 501(c)(7) organizations. Enter:				
a Initiation fees and capital contributions included on Part VIII, line 12	10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11 Section 501(c)(12) organizations. Enter:				
a Gross income from members or shareholders	11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c Enter the amount of reserves on hand	13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a	No	
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i> . . .		14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.		15	No	
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . . If "Yes," complete Form 4720, Schedule O.		16	No	

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



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (Voting members), 1b (Independent members), 2 (Family/Business relationships), 3 (Delegation of control), 4 (Changes to governing documents), 5 (Asset diversion), 6 (Members/stockholders), 7a (Power to elect/appoint), 7b (Governance decisions), 8 (Meeting documentation), 8a (Governing body), 8b (Committees), 9 (Unreachable officer).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a (Local chapters), 10b (Written policies), 11a (Form 990 distribution), 11b (Review process), 12a (Conflict of interest policy), 12b (Disclosure of interests), 12c (Compliance monitoring), 13 (Whistleblower policy), 14 (Document retention), 15a/b (Compensation review), 16a (Joint ventures), 16b (Participation policy).

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed (CA, OK, IN)
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: PATRICIA D SHANNON 601 E STREET NW WASHINGTON, DC 20049 (202) 434-3399

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) LLOYD JOHNSON BOARD CHAIR	6.00 10.00	X						0	4,105	0
(2) JAIME GUTIERREZ BOARD / VICE CHAIR / AUDIT	6.00	X						0	0	0
(3) HARRY E JOHNSON BOARD MEMBER / FINANCE CHA	6.00	X						0	0	0
(4) DIANE D MILLER BOARD MEMBER	6.00	X						0	0	0
(5) DAVID ADAME BOARD MEMBER	6.00	X						0	0	0
(6) PATRICIA BANKS BOARD MEMBER	6.00	X						0	0	0
(7) SUSAN WERTH BOARD MEMBER	6.00	X						0	0	0
(8) ANN DAW BOARD MEMBER	6.00	X						0	0	0
(9) LISA MARSH RYERSON PRESIDENT	40.00			X				468,741	370	66,255
(10) PATRICIA D SHANNON CFO & SENIOR VICE PRESIDEN	40.00			X				406,669	0	57,755
(11) JAMI L WYATT AS OF 3319 SECRETARY	1.00 40.00			X				0	285,499	66,630
(12) DAVID WHITEHEAD SVP & CHIEF DEVELOPMENT OF	40.00				X			346,314	13,663	66,914
(13) WILLIAM A RIVERA SVP- LITIGATION	40.00				X			299,497	1,307	46,813
(14) EMILY S ALLEN SVP - AARP FDN PROGRAMS	40.00				X			323,844	0	54,590
(15) KEANNE C HENRY VP - EXPERIENCE CORPS	40.00					X		259,176	0	47,945
(16) STEVEN DELVECCHIO VP - DIRECT RESPONSE	40.00					X		192,399	60,391	41,853
(17) STEPHEN VENUTE VP - CORP & FOUNDATION REL	40.00					X		258,332	0	48,626

Part VIII Statement of Revenue

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

Table with 5 columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 1a-1g for Federated campaigns, membership dues, fundraising events, related organizations, government grants, and other contributions.

Table for Program Service Revenue with 5 columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 2a-2f for Experience Corps Program Fees and other program service revenue.

Table for Other Revenue with 5 columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 3-12 for investment income, royalties, rents, gains from sales, fundraising events, gaming activities, and miscellaneous revenue.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	23,345,062	23,345,062		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	56,864,107	56,864,107		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,967,507	656,791	931,465	379,251
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	30,474,168	22,760,582	4,326,499	3,387,087
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	935,140	690,813	141,839	102,488
9 Other employee benefits	2,815,990	2,024,721	498,627	292,642
10 Payroll taxes	1,907,106	1,392,426	304,146	210,534
11 Fees for services (non-employees):				
a Management				
b Legal	236,636	236,636		
c Accounting	164,000		164,000	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	1,528,682			1,528,682
f Investment management fees	1,956,439		1,956,439	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	11,026,762	8,920,746	1,285,061	820,955
12 Advertising and promotion	3,835,328	2,028,534	940,029	866,765
13 Office expenses	10,629,257	10,585,120	26,102	18,035
14 Information technology	2,383,870	1,976,639	348,396	58,835
15 Royalties				
16 Occupancy	3,047,337	2,698,145	232,721	116,471
17 Travel	1,526,688	1,272,147	142,774	111,767
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	672,911	646,115	8,356	18,440
20 Interest	375,130	209,981	110,026	55,123
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,424,428	763,718	462,066	198,644
23 Insurance	2,381		2,381	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PRINTING AND POSTAGE	20,791,096	6,403,154	58,398	14,329,544
b VOLUNTEER TRAVEL/ACTIVI	6,361,688	6,318,411	43,267	10
c MISCELLANEOUS OPERATING	1,909,711	723,784	976,552	209,375
d TELECOMMUNICATION EXPEN	1,244,501	1,179,692	39,278	25,531
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	187,425,925	151,697,324	12,998,422	22,730,179
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720).	14,897,483	4,323,365	0	10,574,118

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	2,220,950	1	3,393,270
	2 Savings and temporary cash investments	9,850,314	2	19,697,220
	3 Pledges and grants receivable, net	9,263,625	3	13,583,525
	4 Accounts receivable, net		4	
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	2,044,836	9	867,035
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 30,088,261		
	b Less: accumulated depreciation	10b 15,091,216	15,835,661	10c 14,997,045
	11 Investments—publicly traded securities	389,129,995	11	534,768,098
	12 Investments—other securities. See Part IV, line 11	4,814,593	12	5,209,704
	13 Investments—program-related. See Part IV, line 11	5,900,364	13	6,165,767
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	270,407	15	253,147
16 Total assets. Add lines 1 through 15 (must equal line 34)	439,330,745	16	598,934,811	
Liabilities	17 Accounts payable and accrued expenses	15,212,537	17	28,012,161
	18 Grants payable	6,177,902	18	8,532,978
	19 Deferred revenue	3,305,114	19	170,827
	20 Tax-exempt bond liabilities	25,000,000	20	25,000,000
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	3,055,403	25	3,049,511
	26 Total liabilities. Add lines 17 through 25	52,750,956	26	64,765,477
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	95,487,650	27	112,088,429
	28 Net assets with donor restrictions	291,092,139	28	422,080,905
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	386,579,789	32	534,169,334	
33 Total liabilities and net assets/fund balances	439,330,745	33	598,934,811	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	295,801,954
2	Total expenses (must equal Part IX, column (A), line 25)	2	187,425,925
3	Revenue less expenses. Subtract line 2 from line 1	3	108,376,029
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	386,579,789
5	Net unrealized gains (losses) on investments	5	39,213,516
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	534,169,334

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

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

Additional Data

Software ID:

Software Version:

EIN: 52-0794300

Name: AARP FOUNDATION

Form 990 (2019)

Form 990, Part III, Line 4a:

THE SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM (SCSEP) IS THE NATION'S OLDEST PROGRAM TO HELP LOW-INCOME, UNEMPLOYED INDIVIDUALS AGED 55+ FIND WORK. AARP FOUNDATION FIRST MATCHES ELIGIBLE OLDER JOB SEEKERS WITH LOCAL NONPROFITS AND PUBLIC AGENCIES SO THEY CAN INCREASE SKILLS AND BUILD SELF-CONFIDENCE, WHILE EARNING A MODEST INCOME. BASED ON THEIR EMPLOYMENT INTERESTS AND GOALS, PARTICIPANTS MAY ALSO RECEIVE SUPPORTIVE SERVICES AND SKILLS TRAINING THROUGH AN EDUCATIONAL INSTITUTION. THEIR SCSEP EXPERIENCE MOST OFTEN LEADS TO PERMANENT EMPLOYMENT. SCSEP IS ADMINISTERED BY THE U.S. DEPARTMENT OF LABOR. AARP FOUNDATION OPERATES IN 21 STATES AND PUERTO RICO. IN PROGRAM YEAR 2018/2019 MORE THAN 13,000 PEOPLE WERE SERVED AND MORE THAN 3,600 OBTAINED UNSUBSIDIZED EMPLOYMENT. [HTTP://WWW.AARP.ORG/AARP-FOUNDATION/OUR-WORK/INCOME/SCSEP/](http://www.aarp.org/aarp-foundation/our-work/income/scsep/)

Form 990, Part III, Line 4b:

AARP FOUNDATION TAX-AIDE IS THE NATION'S LARGEST, FREE, VOLUNTEER-RUN TAX PREPARATION AND ASSISTANCE SERVICE. IT IS AVAILABLE TO LOW- AND MODERATE-INCOME TAXPAYERS WITH SPECIAL ATTENTION TO THOSE AGED 50 AND OLDER. IN 2019, OVER 35,000 AARP FOUNDATION TRAINED AND IRS-CERTIFIED VOLUNTEERS HELPED OVER 2.5 MILLION PEOPLE FILE THEIR TAXES, RESULTING IN OVER \$1.4 BILLION IN INCOME TAX REFUNDS FOR TAXPAYERS AND MORE THAN \$200 MILLION IN EARNED INCOME TAX CREDITS. SITES WERE OPEN LATE JANUARY/EARLY FEBRUARY THROUGH MID-APRIL FOR FACE-TO-FACE SERVICE. ONLINE ASSISTANCE WAS AVAILABLE THROUGHOUT THE REST OF THE YEAR. TAX-AIDE PREPARED RETURNS ARE ELECTRONICALLY FILED, WHICH HELPS TO INCREASE BOTH THE ACCURACY OF RETURNS PREPARED AND THE SPEED OF REFUNDS TO TAXPAYERS. [HTTP://WWW.AARP.ORG/TAXAIDE](http://www.aarp.org/taxaide)

Form 990, Part III, Line 4c:

AARP FOUNDATION EXPERIENCE CORPS ("EXPERIENCE CORPS") IS AN EVIDENCE-BASED, VOLUNTEER TUTORING AND MENTORING PROGRAM THAT ADDRESSES A MAJOR CONTRIBUTOR TO POVERTY - THE INABILITY OF CHILDREN IN KINDERGARTEN THROUGH THIRD GRADE TO READ AT GRADE LEVEL. EXPERIENCE CORPS HAS MORE THAN 2,000 HIGHLY TRAINED VOLUNTEERS WORKING IN MORE THAN 22 CITIES AND SERVES OVER 30,000 STUDENTS IN 2019 IN HIGH-NEED ELEMENTARY SCHOOLS. EACH EXPERIENCE CORPS SITE OPERATES ONE OF THREE TUTORING MODELS: ONE TO ONE; SMALL GROUP; AND LITERACY ASSISTANCE (WHERE VOLUNTEERS TUTOR AND HELP TEACHERS WITH CLASSROOM-WIDE ACTIVITIES). STUDIES SHOW THAT AARP FOUNDATION EXPERIENCE CORPS WORKS. AFTER ONE YEAR, MANY STUDENTS WHO WORK WITH EXPERIENCE CORPS VOLUNTEER TUTORS ACHIEVE AS MUCH AS 60% IMPROVEMENT IN CRITICAL LITERACY SKILLS COMPARED TO THEIR PEERS. VOLUNTEERS PROVIDE AN AVERAGE OF 6-15 HOURS OF SUPPORT EACH WEEK THROUGHOUT THE SCHOOL YEAR.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

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.

(Code:) (Expenses \$ 4,588,345 including grants of \$ 2,611,837) (Revenue \$)

FOOD SECURITY-AARP FOUNDATION'S FOOD SECURITY INITIATIVES ARE DEDICATED TO ENDING HUNGER AMONG OLDER AMERICANS (50+) BY FOCUSING ON SUSTAINABLE, LONG-TERM PUBLIC HEALTH AND MARKET-DRIVEN SOLUTIONS TO HELP MEET THE DIETARY NEEDS OF OLDER ADULTS, ESPECIALLY THOSE OF THE NEARLY TEN MILLION FOOD INSECURE. OUR FOCUS IS ON SHOWING POSITIVE CHANGE IN FOOD SECURITY AMONG LOW INCOME OLDER ADULTS BY ENSURING THEY CAN AFFORD TO PURCHASE HEALTHY FOODS. THROUGH GRANTMAKING, AARP FOUNDATION SUPPORTS NONPROFIT COMMUNITY ORGANIZATIONS IN 10 STATES THAT RECEIVED WAIVERS FROM THE USDA TO ENACT THE ELDERLY SIMPLIFIED APPLICATION PROJECT (ESAP). ESAP STREAMLINES THE APPLICATION PROCESS, MAKING IT EASIER FOR PEOPLE WHO ARE OVER 60 AND HAVE NO EARNED INCOME TO RECEIVE SNAP BENEFITS SO THEY CAN AFFORD TO BUY HEALTHY FOOD. IN 2019, WE FUNDED 16 ORGANIZATIONS IN SEVEN STATES, ENABLING THEM TO RAISE GREATER AWARENESS ABOUT ESAP AND HELP ALMOST 50,000 ELIGIBLE OLDER ADULTS APPLY FOR AND GET SNAP BENEFITS.

(Code:) (Expenses \$ 12,544,586 including grants of \$ 12,544,586) (Revenue \$)

AARP SUB-GRANTS-AARP FOUNDATION HAS AWARDED GRANTS TO AARP TO FURTHER THE FOUNDATION'S CHARITABLE MISSION OF HELPING LOW INCOME OLDER AMERICANS SECURE ESSENTIALS THROUGH PROGRAMS THAT FOCUS ON CAREGIVING, NURSING, DEMENTIA RESEARCH AND POLICY, AND DRIVER SAFETY TO COMBAT ISOLATION, AND ASSET PROTECTION TO SAFEGUARD INCOME.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

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.

(Code:) (Expenses \$ 4,785,770 including grants of \$ 43,750) (Revenue \$ 158,014)

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

(Code:) (Expenses \$ 1,663,954 including grants of \$ 185,114) (Revenue \$ 265,403)

HOUSING-THE HOUSING IMPACT AREA IS FOCUSED ON DEVELOPING NEW SOLUTIONS THAT ENABLE LOW-INCOME OLDER ADULTS TO AGE IN THEIR HOMES AND COMMUNITIES BY ENSURING THAT THEIR HOMES ARE AFFORDABLE, LIVABLE AND HEALTHY. PROPERTY TAX-AIDE WAS LAUNCHED IN 2019 TO HELP LOW-INCOME OLDER ADULTS ACCESS PROPERTY TAX RELIEF PROGRAMS AND HERE TO STAY, A PROGRAM THAT HELPS OLDER ADULTS WITH HOME MAINTENANCE.PROPERTY TAX-AIDE USES AN INNOVATIVE ONLINE FINTECH TOOL TO SIMPLIFY THE PROCESS OF APPLYING FOR PROPERTY TAX REFUNDS AND CREDITS. IN 2019, THE 15,000 OLDER HOMEOWNERS AND RENTERS WHO USED PROPERTY TAX-AIDE WERE PROJECTED TO RECEIVE A TOTAL OF \$7 MILLION IN TAX REBATES AND CREDITS. AARP FOUNDATION DEVELOPED HERE TO STAY: HOME UPKEEP FOR ALL. THE PROGRAM OFFERS IN-PERSON HOME MAINTENANCE WORKSHOPS. SINCE JUNE 2019, MORE 33,000 USERS HAVE DOWNLOADED THE TOOLKIT.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

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.

(Code:) (Expenses \$ 4,349,696 including grants of \$ 2,366,396) (Revenue \$)

ISOLATION-MORE THAN 8 MILLION OLDER ADULTS ARE SOCIALLY ISOLATED AND, THEREFORE, AT RISK OF POOR HEALTH. AARP FOUNDATION'S ISOLATION WORK IS FOCUSED ON DEVELOPING AND DELIVERING SOLUTIONS THAT HELP VULNERABLE INDIVIDUALS OVER 50 STAY SOCIALLY CONNECTED, PREVENT ISOLATION, AND IMPROVE RELATED HEALTH OUTCOMES. BECAUSE THE ISSUE OF SOCIAL ISOLATION IS SO COMPLEX, AARP FOUNDATION SPEARHEADED CONNECT2AFFECT TO SEEK OUT SOLUTIONS. THROUGH RESEARCH AND INNOVATIVE EFFORTS, THE FOUNDATION IS WORKING TO CREATE A DEEPER UNDERSTANDING OF LONELINESS AND ISOLATION, DRAW CRUCIAL ATTENTION TO THE ISSUE, AND CATALYZE ACTION TO END SOCIAL ISOLATION AMONG OLDER ADULTS. THROUGH CONNECT2AFFECT (CONNECT2AFFECT.ORG), WE PROVIDE VISITORS WITH RESEARCH AND TIPS ON STAYING CONNECTED, ALONG WITH AN ASSESSMENT THAT ALLOWS USERS TO EVALUATE THEIR ISOLATION RISK (OR THAT OF A LOVED ONE) AND GET GUIDANCE ON HOW TO STRENGTHEN THEIR SOCIAL BONDS. NEARLY 100,000 VISITORS TO CONNECT2AFFECT.ORG HAVE TAKEN THE ASSESSMENT TO FIND OUT WHETHER THEY ARE AT RISK OF ISOLATION. IN 2018, AARP FOUNDATION SPONSORED A NATIONAL CONSENSUS STUDY WITH THE NATIONAL ACADEMIES OF SCIENCE. THIS 18-MONTH STUDY, TO BE PUBLISHED IN 2020, EXAMINED HOW SOCIAL ISOLATION AND LONELINESS IMPACT HEALTH OUTCOMES IN OLDER ADULTS AGED 50 AND OLDER, PARTICULARLY AMONG LOW INCOME, UNDERSERVED, AND VULNERABLE POPULATIONS. THE STUDY PROVIDED EVIDENCE-BASED RECOMMENDATIONS ON TRANSLATING RESEARCH INTO PRACTICE WITHIN THE HEALTH CARE SYSTEM THAT COULD FACILITATE PROGRESS IN REDUCING THE INCIDENCE AND ADVERSE HEALTH IMPACTS OF SOCIAL ISOLATION AND LONELINESS AMONG THE LOW-INCOME 50+ POPULATION. CONNECTED COMMUNITIES USES VOICE-ENABLED TECHNOLOGY TO REDUCE ISOLATION IN AFFORDABLE SENIOR HOUSING FACILITIES. WE WORK WITH AFFORDABLE SENIOR HOUSING PROVIDERS TO EQUIP THEIR COMMUNITIES WITH DEVICES, TOOLS AND TRAINING THAT HELP RESIDENTS MAINTAIN THE SOCIAL CONNECTIONS THEY NEED TO REMAIN INDEPENDENT AND AGE IN PLACE LONGER. MORE THAN 50% OF THE PARTICIPANTS IN THE CONNECTED COMMUNITIES SITES SAY THEY HAVE INCREASED OR MAINTAINED THEIR LEVEL OF SOCIAL PARTICIPATION SINCE THE PROGRAM WAS INTRODUCED TO THEIR COMMUNITY.

(Code:) (Expenses \$ 5,740,030 including grants of \$ 1,490,490) (Revenue \$)

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

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

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.

(Code:) (Expenses \$ 4,099,493 including grants of \$ 1,284,581) (Revenue \$)

BACK TO WORK 50+ - AARP FOUNDATION LAUNCHED BACK TO WORK 50+ TO INCREASE THE SERVICES AND RESOURCES AVAILABLE TO 50+ JOB CANDIDATES NATIONALLY AND IN COMMUNITIES AND TO FACILITATE THEIR ACCESS TO IN-DEMAND JOBS TO ENABLE THEM TO GENERATE INCOME AND INCREASE THEIR FINANCIAL SECURITY. IN 2019, THE PROGRAM SERVED OVER 14,000 DIRECTLY AND THROUGH PARTNERS AND OVER 1,000 PEOPLE WERE EMPLOYED (WWW.AARP.ORG/BACKTOWORK50PLUS). IN 2014 THE PROGRAM WAS AWARDED A SOCIAL INNOVATION FUND GRANT FROM THE CORPORATION FOR NATIONAL AND COMMUNITY SERVICE TO EVALUATE AND SCALE THE MODEL. BACK TO WORK 50+ PROVIDES JOB SEARCH GUIDES, WORKSHOPS, AND COACHING FOR STRUGGLING JOBSEEKERS 50 AND OLDER TO HELP THEM REGAIN THEIR CONFIDENCE, AND REFRESH THEIR SKILLS SO THEY CAN CONTINUE TO WORK FOR AS LONG AS NEEDED.

(Code:) (Expenses \$ 10,792,559 including grants of \$ 1,440,000) (Revenue \$ 17,349)

CONTRIBUTIONS AND OTHER PROGRAMS-THE FOUNDATION ALSO SPONSORED ORGANIZATIONS, EVENTS, AND CONFERENCES THAT HIGHLIGHTED TANGIBLE WAYS TO BUILD ECONOMIC OPPORTUNITY AND SOCIAL CONNECTEDNESS IN AMERICA FOR LOW-INCOME SENIORS, AND SUPPORTED RELIEF FOR OLDER VICTIMS OF CALIFORNIA WILDFIRES AND FLOODING IN NEBRASKA AND SOUTH DAKOTA.

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
AARP FOUNDATION

Employer identification number
52-0794300

Employer identification number
52-0794300

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 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 (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 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 agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III.
 If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	152,271,399	281,047,140	249,808,214	248,393,740	263,901,186	1,195,421,679
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 Total. Add lines 1 through 3	152,271,399	281,047,140	249,808,214	248,393,740	263,901,186	1,195,421,679
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). . .						433,768,582
6 Public support. Subtract line 5 from line 4.						761,653,097

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4. . .	152,271,399	281,047,140	249,808,214	248,393,740	263,901,186	1,195,421,679
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . .	2,454,168	6,172,014	10,040,083	11,340,283	16,687,555	46,694,103
9 Net income from unrelated business activities, whether or not the business is regularly carried on . . .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .	518,240	1,708,479	640,882	922,364	1,197,600	4,987,565
11 Total support. Add lines 7 through 10						1,247,103,347

12 Gross receipts from related activities, etc. (see instructions) **12**

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	61.070 %
15 Public support percentage for 2018 Schedule A, Part II, line 14	15	65.320 %

16a 33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2	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						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6.						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . .						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c	Add lines 10a and 10b.						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
PART II, LINE 10(A);	2015 OTHER PROGRAM INCOME - \$105,873 2015 EXPERIENCE CORPS SCHOOL FEES - \$107,065 2015 CGA SEVERANCE - \$361,524 2015 CGA CHANGE IN VALUE - \$(56,222) TOTAL PROGRAM SERVICES REVENUE - \$518,240

990 Schedule A, Supplemental Information

Return Reference	Explanation
PART II, LINE 10(B);	2016 EXPERIENCE CORPS PROGRAM FEES - \$1,185,995 2016 ALL OTHER PROGRAM INCOME - \$372,069 2016 CGA SEVERANCE - \$244,961 2016 CGA CHANGE IN VALUE - \$(94,546) TOTAL PROGRAM SERVICE & OTHER INCOME - \$1,708,479

990 Schedule A, Supplemental Information

Return Reference	Explanation
PART II, LINE 10(C);	2017 EXPERIENCE CORPS PROGRAM FEES - \$765,957 2017 ALL OTHER PROGRAM INCOME - \$20,232 2017 CGA SEVERANCE - \$134,642 2017 CGA CHANGE IN VALUE - \$(279,949) TOTAL PROGRAM SERVICE & OTHER INCOME - \$640,882

990 Schedule A, Supplemental Information

Return Reference	Explanation
PART II, LINE 10(D);	2018 EXPERIENCE CORPS PROGRAM FEES - \$907,953 2018 ALL OTHER PROGRAM INCOME - \$213,238 2018 CGA SEVERANCE - \$226,859 2018 CGA CHANGE IN VALUE - \$(436,277) 2018 FUNDRAISING & MISCELLANEOUS INCOME - 10,591 TOTAL PROGRAM SERVICE & OTHER INCOME - \$922,364

990 Schedule A, Supplemental Information

Return Reference	Explanation
PART II, LINE 10(E);	2019 EXPERIENCE CORPS PROGRAM FEES - \$945,380 2019 ALL OTHER PROGRAM INCOME - \$441,701 2019 CGA SEVERANCE - \$215,914 2019 CGA CHANGE IN VALUE - \$(405,481) 2019 MISCELLANEOUS INCOME - \$86 TOTAL PROGRAM SERVICE & OTHER INCOME - \$1,197,601

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047
2019
Open to Public Inspection

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization
AARP FOUNDATION

Employer identification number
52-0794300

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

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

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

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

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

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

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

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

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

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

Part IV Escrow and Custodial Arrangements.

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

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

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	307,583,157	244,360,170	141,651,935	17,139,004	17,983,362
b Contributions	81,030,355	78,113,983	76,682,864	116,229,945	336,554
c Net investment earnings, gains, and losses	55,109,672	-13,990,060	26,913,632	9,190,695	-328,393
d Grants or scholarships					
e Other expenditures for facilities and programs	952,396	-900,936	888,261	907,709	852,519
f Administrative expenses					
g End of year balance	442,770,788	307,583,157	244,360,170	141,651,935	17,139,004

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ 5.410 %
 - b** Permanent endowment ▶ 94.590 %
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|---------------|----|
| (i) unrelated organizations | 3a(i) | No |
| (ii) related organizations | 3a(ii) | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		4,440,000		4,440,000
b Buildings		22,736,908	13,372,594	9,364,314
c Leasehold improvements				
d Equipment				
e Other		2,911,353	1,718,622	1,192,731
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				14,997,045

Part VII Investments—Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments—Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	3,049,511

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	387,981,050
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	39,213,516	
b	Donated services and use of facilities	2b	55,081,386	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d			2e 94,294,902
3	Subtract line 2e from line 1			3 293,686,148
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	2,115,806	
c	Add lines 4a and 4b			4c 2,115,806
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)			5 295,801,954

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

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

1	Total expenses and losses per audited financial statements		1	240,391,505
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	55,081,386	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d			2e 55,081,386
3	Subtract line 2e from line 1			3 185,310,119
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	2,115,806	
c	Add lines 4a and 4b			4c 2,115,806
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)			5 187,425,925

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 52-0794300
Name: AARP FOUNDATION

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	PERMANENTLY RESTRICTED ENDOWMENT IN JANUARY 2019, THE FOUNDATION RECEIVED A CONTRIBUTION OF \$78,917,500 FROM AARP, INC. FOR ITS PERMANENTLY RESTRICTED ENDOWMENT FUND. IN ACCORDANCE WITH THE TERMS OF THE DONOR AGREEMENT, THE FOUNDATION IS REQUIRED TO ADD ALL INVESTMENT INCOME AND GAINS TO THE BALANCE OF THIS ENDOWMENT FUND UNTIL SUCH TIME AS ESTABLISHED BY THE DONOR. BOARD DESIGNATED QUASI-ENDOWMENT THE FOUNDATION'S UNRESTRICTED NET ASSETS INCLUDE AMOUNTS DESIGNATED BY ITS BOARD OF DIRECTORS TO FUNCTION AS A QUASI-ENDOWMENT FUND. IN CONNECTION WITH ITS QUASI-ENDOWMENT FUND, THE BOARD HAS ADOPTED A SPENDING POLICY, WHICH PERMITS AN ANNUAL TRANSFER TO OPERATING FUNDS UP TO 6% OF THE PREVIOUS 12 QUARTERS' AVERAGE QUASI-ENDOWMENT FUND BALANCE. ASSETS OF BOTH THE PERMANENTLY RESTRICTED AND QUASI-ENDOWMENT FUNDS ARE INVESTED IN A BROADLY DIVERSIFIED PORTFOLIO SPREAD OVER MULTIPLE ASSET CLASSES.

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	AARP FOUNDATION HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE CONSOLIDATED FINANCIAL STATEMENTS.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	INVESTMENT EXPENSES TREATED AS CONTRA REVENUE ON FS 915,417. INVESTMENT EXPENSES FROM K-1S INCLUDED IN UNREALIZED GAIN ON FS 1,200,389.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	INVESTMENT EXPENSES TREATED AS CONTRA REVENUE ON FS 915,417. INVESTMENT EXPENSES FROM K-1S INCLUDED IN UNREALIZED GAIN ON FS 1,200,389.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
AARP FOUNDATION

Employer identification number
52-0794300

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

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a** Mail solicitations
 - b** Internet and email solicitations
 - c** Phone solicitations
 - d** In-person solicitations
 - e** Solicitation of non-government grants
 - f** Solicitation of government grants
 - g** Special fundraising events
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(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			
CHAPMAN CUBINE AND HUSSEY 2000 15TH STREET NORTH SUITE 550 ARLINGTON, VA 22201	DIRECT MAIL PRODUCTION MANAGEMENT SERVICES		No	0	780,532	0
GIFT STRATEGIES 1539 FALLS RIVER AVE SUITE 3 SEEKONK, MA 02771	CALLING SERVICES TO INDIVIDUALS		No	0	537,950	0
BLUE STATE DIGITAL 101 AVENUE OF THE AMERICAS 12TH FL NEW YORK, NY 10013	MARKETING ADVISORY SERVICES		No	0	465,567	0
Total					1,784,049	

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

AL, AK, CA, CT, CO, DC, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MO, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI, AR, ME

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

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

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

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

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

13 Indicate the percentage of gaming activity conducted in:

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

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

Name ▶

Address ▶

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

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

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

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions:

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

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

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

Return Reference	Explanation
SCHEDULE G, PART I, LINE 2B, COLUMN (V)	THESE ENTITIES DO NOT RAISE FUNDS DIRECTLY FOR AARP FOUNDATION, BUT PROVIDE COUNSEL, SERVICES, AND SUPPORT TO AARP FOUNDATION'S INTERNAL DEVELOPMENT OFFICE. THE AMOUNTS REFLECTED IN SCHEDULE G ARE FOR THE PROFESSIONAL SERVICES AND REIMBURSEMENTS PAID BY AARP FOUNDATION FOR PROMOTIONAL AND TRAVEL EXPENSES.
SCHEDULE G, PART I, LINE 2 B(V)	CHAPMAN CUBINE AND HUSSEY PROFESSIONAL FUNDRAISING FEE \$630,732 MISCELLANEOUS OFFICE EXPENSES \$562 ADVERTISING & PROMOTION \$149,238 TOTAL PAID TO CHAPMAN CUBINE AND HUSSEY \$780,532 BLUE STATE DIGITAL PROFESSIONAL FUNDRAISING FEE \$360,000 CONSULTING SERVICES \$105,567 TOTAL PAID TO BLUE STATE DIGITAL \$465,567 GIFT STRATEGIES PROFESSIONAL FUNDRAISING FEE \$537,950 TOTAL PAID TO GIFT STRATEGIES \$537,950 TOTAL AMOUNTS PAID TO FUNDRAISERS \$1,784,049

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Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization
AARP FOUNDATION

Employer identification number
52-0794300

Part I General Information on Grants and Assistance

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(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 (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	70
3	Enter total number of other organizations listed in the line 1 table	7

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) SCSEP ENROLLEE WAGES AND BENEFITS (SEE PAGE 2, PART III, LINE 4A)	13000	56,313,590			
(2) EXPERIENCE CORPS MENTORING & TUTORING STIPENDS	2000	536,517			
(3) EMPLOYEE CRISIS FUND	4	14,000			
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2:	AARP FOUNDATION HAS WRITTEN GRANT AGREEMENTS IN PLACE WITH FINANCIAL AND PROGRAMMATIC REPORTING REQUIREMENTS. THE REPORTS ARE REVIEWED AND FINAL PAYMENTS ARE NOT MADE UNTIL ALL WORK HAS BEEN COMPLETED.

Additional Data

Software ID:
Software Version:
EIN: 52-0794300
Name: AARP FOUNDATION

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AARP 601 E STREET NW WASHINGTON, DC 20049	95-1985500	501(C)(4)	12,544,586				CHARITABLE WORK CONDUCTED ON BEHALF OF AARP FOUNDATION
AMERICAN BAR ASSOCIATION FUND FOR JUSTICE & EDUCATION 321 N CLARK STREET CHICAGO, IL 60654	36-6110299	501(C)(3)	10,000				DONATION TO THE ABA 2019 NATIONAL AGING & LAW CONFERENCE

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACCESS HEARS 14301 COOPER RD PHOENIX, MD 21131	47-4175242	501(C)(3)	150,000				GRANT TO SUPPORT AARP FOUNDATION'S ISOLATION PROGRAM
AGENCY ON AGING OF SOUTH CENTRAL CONNECTICUT 1 LONG WHARF DR STE 1L NEW HAVEN, CT 06511	06-0915531	501(C)(3)	44,651				GRANT TO SUPPORT AARP FOUNDATION'S EXPERIENCE CORPS AFTERSCHOOL PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AUSTIN COMMUNITY COLLEGE DISTRICT 9101 TUSCANY WAY RM 153 AUSTIN, TX 78754	74-1742036		132,017				GRANT TO SUPPORT AARP FOUNDATION'S BACK TO WORK 50+ PROGRAM
BENEFITS DATA TRUST CENTRE SQUARE WEST 1500 MARKET STREET SUITE 2800 PHILADELPHIA, PA 19102	20-3455598	501(C)(3)	350,000				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BREVARD WORKFORCE DEVELOPMENT BOARD INC 297 BARNES BLVD ROCKLEDGE, FL 32955	59-3031785	501(C)(3)	84,682				GRANT TO SUPPORT AARP FOUNDATION'S BACK TO WORK 50+ PROGRAM
CARVER COMMUNITY ORGANIZATION INC 400 SE 8TH ST EVANSVILLE, IN 47713	35-0869030	501(C)(3)	77,475				GRANTS TO SUPPORT AARP FOUNDATION'S EXPERIENCE CORPS PROGRAM AND SPONSORSHIP

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHICAGO COOK WORKFORCE 69 W WASHINGTON SUITE 2860 CHICAGO, IL 60602	36-4122225	501(C)(3)	210,000				GRANT TO SUPPORT AARP FOUNDATION'S BACK TO WORK 50+ PROGRAM
CHICANOS POR LA CAUSA INC 1112 E BUCKEYE RD PHOENIX, AZ 850344043	86-0227210	501(C)(3)	100,000				GRANT TO SUPPORT AARP FOUNDATION'S HOUSING PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF TEMPE 20 E SIXTH ST TEMPE, AZ 85281	86-6000262		61,636				GRANT TO SUPPORT AARP FOUNDATION'S EXPERIENCE CORPS AFTERSCHOOL PROGRAM
EAST SIDE LEARNING CENTER 740 YORK AVE SAINT PAUL, MN 55106	04-3699678	501(C)(3)	66,880				GRANT TO SUPPORT AARP FOUNDATION'S EXPERIENCE CORPS PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FEEDING CHILDREN EVERYWHERE INC 830 S RONALD REAGAN BLVD STE 142 LONGWOOD, FL 32750	27-3274349	501(C)(3)	25,000				DONATION TO THE SNAP GAP PROJECT
FEEDING SOUTH FLORIDA 2501 SW 32 TERRACE PEMBROKE PARK, FL 33023	59-2097520	501(C)(3)	60,000				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FEEDING THE GULF COAST 5248 MOBILE SOUTH STREET THEODORE, AL 36582	63-0821997	501(C)(3)	100,000				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM
FINANCIAL HEALTH NETWORK 135 SOUTH LASALLE STREET SUITE 2125 CHICAGO, IL 60603	20-3006098	501(C)(3)	1,210,500				GRANT TO SUPPORT AARP FOUNDATION'S INCOME SECURITY PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOOD RESEARCH AND ACTION CENTER 1200 18TH ST NW STE 400 WASHINGTON, DC 20036	23-7200739	501(C)(3)	30,000				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM AND SPONSORSHIP
FOUNDATION FOR ART & HEALING 77 STEARNS ROAD BROOKLINE, MA 02446	33-1125148	501(C)(3)	250,000				GRANT TO SUPPORT AARP FOUNDATION'S ISOLATION PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GENERATIONS INCORPORATED 25 KINGSTON ST 4TH FL BOSTON, MA 02111	04-3227007	501(C)(3)	303,908				GRANT TO SUPPORT AARP FOUNDATION'S EXPERIENCE CORPS AFTERSCHOOL PROGRAM
GEORGIA LEGAL SERVICES PROGRAM 104 MARIETTA STREET SUITE 250 ATLANTA, GA 30303	58-1111590	501(C)(3)	60,000				AARP FOUNDATION DISASTER RELIEF GRANT

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREATER CLEVELAND VOLUNTEERS 4415 EUCLID AVE STE 200 CLEVELAND, OH 44103	34-1356768	501(C)(3)	62,102				GRANTS TO SUPPORT AARP FOUNDATION'S EXPERIENCE CORPS PROGRAM AND SPONSORSHIP
MAINTAINING ACTIVE CITIZENS INC 909 PROGRESS CIRCLE SALISBURY, MD 21804	52-0992005	501(C)(3)	40,000				GRANT TO SUPPORT AARP FOUNDATION'S HOUSING PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOUSING ASSISTANCE COUNCIL 1025 VERMONT AVE NW STE 606 WASHINGTON, DC 20005	52-0939288	501(C)(3)	55,000				SPONSORSHIP OF CONFERENCE AND GENERAL SUPPORT
INFO LINE OF SAN DIEGO COUNTY DBA 2-1-1 SAN DIEGO 3860 CALLE FORTUNADA SUITE 101 SAN DIEGO, CA 92123	33-1029843	501(C)(3)	60,000				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERFAITH WORKS OF CENTRAL NEW YORK 1010 JAMES STREET SYRACUSE, NY 13203	16-1064233	501(C)(3)	100,000				GRANT TO SUPPORT AARP FOUNDATION'S ISOLATION PROGRAM
JEFFERSON STATE COMMUNITY COLLEGE 2601 CARSON RD BIRMINGHAM, AL 35215	63-0501357		114,482				GRANT TO SUPPORT AARP FOUNDATION'S BACK TO WORK 50+ PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LA'S BEST 200 N SPRING ST M 120 LOS ANGELES, CA 90012	95-4311058	501(C)(3)	32,694				GRANT TO SUPPORT AARP FOUNDATION'S EXPERIENCE CORPS AFTERSCHOOL PROGRAM
LEGAL SERVICES OF NORTHERN CALIFORNIA 517 12TH ST SACRAMENTO, CA 95814	94-1384659	501(C)(3)	100,000				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOS ANGELES REGIONAL FOOD BANK 1734 E 41ST STREET LOS ANGELES, CA 90058	95-3135649	501(C)(3)	60,000				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM
MEDICAL COLLEGE OF VIRGINIA FOUNDATION 1228 W BROAD STREET BOX 980234 RICHMOND, VA 232980234	54-6053660	501(C)(3)	518,698				GRANT TO SUPPORT AARP FOUNDATION'S ISOLATION PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MERCY HOUSING MOUNTAIN PLAINS 1600 BROADWAY SUITE 2000 DENVER, CO 80202	20-1583332	501(C)(3)	8,000				GRANT TO SUPPORT AARP FOUNDATION'S ISOLATION PROGRAM
METROPOLITAN FAMILY SERVICE 230 NE 2ND AVE STE 2 HILLSBORO, OR 97124	93-0397825	501(C)(3)	83,985				GRANT TO SUPPORT AARP FOUNDATION'S EXPERIENCE CORPS PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MEXICAN AMERICAN OPPORTUNITY FOUNDATION 401 N GARFIELD AVE MONTEBELLO, CA 90640	95-2594166	501(C)(3)	50,000				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM
MIAMI DADE COLLEGE 11011 SW 104TH ST ROOM 9254 MIAMI, FL 33176	59-1210485		305,716				GRANT TO SUPPORT AARP FOUNDATION'S BACK TO WORK 50+ PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL FOUNDATION TO END SENIOR HUNGER 1004 DUKE STREET ALEXANDRIA, VA 22314	54-1780226	501(C)(3)	115,000				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM
NATIONAL CONSUMER VOICE FOR QUALITY LONGTERM CARE 1001 CONNECTICUT AVE NW STE 425 WASHINGTON, DC 20036	52-1122531	501(C)(3)	360,000				GRANT TO SUPPORT AARP FOUNDATION LEGAL PROGRAM AND SPONSORSHIP OF RESIDENT'S RIGHTS LUNCHEON

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL HEALTH LAW PROGRAM 1444 I ST NW STE 1105 WASHINGTON, DC 20005	95-3080947	501(C)(3)	10,000				SPONSORSHIP OF THE 2019 NHLP 30TH ANNUAL HEALTH ADVOCATES CONFERENCE
NATIONAL HOUSING CONFERENCE INC 1900 M ST NW STE 200 WASHINGTON, DC 20036	53-0208180	501(C)(3)	10,000				SPONSORSHIP OF NATIONAL HOUSING CONFERENCE

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEIGHBORHOOD LEGAL SERVICES OF LOS ANGELES COUNTY 1102 E CHEVY CHASE DRIVE GLENDALE, CA 91205	95-2408642	501(C)(3)	150,000				AARP FOUNDATION DISASTER RELIEF GRANT
NORTH VALLEY COMMUNITY FDN 240 MAIN STREET SUITE 260 CHICO, CA 95928	68-0161455	501(C)(3)	356,475				AARP FOUNDATION DISASTER RELIEF GRANT

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL OLDER WORKER CAREER CENTER 3811 N FAIRFAX DRIVE SUITE 900 ARLINGTON, VA 22203	52-2003078	501(C)(3)	200,000				GRANT TO SUPPORT AARP FOUNDATION'S WORKFORCE PROGRAM
PARENTIS HEALTH FOUNDATION 24012 CALLE DE LA PLATA 400 LAGUNA HILLS, CA 92653	81-1188544	501(C)(3)	27,500				GRANT TO SUPPORT AARP FOUNDATION'S EXPERIENCE CORPS AFTERSCHOOL PROGRAM AND EVENT SPONSORSHIP

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIMA COMMUNITY COLLEGE 4905 EAST BROADWAY STE 113 TUCSON, AZ 857094905	86-0208787		56,000				GRANT TO SUPPORT AARP FOUNDATION'S BACK TO WORK 50+ PROGRAM
PROJECT BREAD-THE WALK FOR HUNGER INC 145 BORDER STREET BOSTON, MA 02128	04-2931195	501(C)(3)	40,106				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PROPEL NONPROFITS 1 SE MAINE STREET SUITE 600 MINNEAPOLIS, MN 55114	41-1916337	501(C)(3)	146,699				GRANT TO SUPPORT AARP FOUNDATION'S EXPERIENCE CORPS PROGRAM
QUALITY EDUCATION SERVICES OF MN INC 1731 LOUISE AVE SAINT PAUL, MN 55106	46-4014810	501(C)(3)	28,500				CONTRIBUTION TO SUPPORT AARP FOUNDATION'S EXPERIENCE CORPS PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RHODE ISLAND PUBLIC HEALTH FOUNDATION DBA RHODE ISLAND PUBLIC HEALTH INSTIT 121 SOUTH MAIN STREET BOX G-S121-8 PROVIDENCE, RI 02913	05-0474726	501(C)(3)	750,000				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM
ROCK HEALTH INC 615 GRANT AVE 3RD FL SAN FRANCISCO, CA 94108	45-1204321	501(C)(3)	40,000				SPONSORSHIP OF ROCK HEALTH SUMMIT TO SUPPORT AARP FOUNDATION'S HOUSING PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SACRAMENTO CHINESE COMMUNITY SERVICES CENTER INC 420 I ST STE 5 SACRAMENTO, CA 95814	94-2581434	501(C)(3)	20,000				GRANT TO SUPPORT AARP FOUNDATION'S EXPERIENCE CORPS PROGRAM
SACRAMENTO FOOD BANK & FAMILY SERVICES 3333 3RD AVENUE SACRAMENTO, CA 95817	94-3315566	501(C)(3)	60,000				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAN DIEGO HUNGER COALITION 4305 UNIVERSITY AVE SUITE 545 SAN DIEGO, CA 92105	30-0507718	501(C)(3)	60,000				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM
SAN FRANCISCO-MARIN FOOD BANK 900 PENNSYLVANIA AVENUE SAN FRANCISCO, CA 94107	94-3041517	501(C)(3)	60,000				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANTA FE COLLEGE 3000 NW 83 ST GAINESVILLE, FL 32606	59-1207627	501(C)(3)	95,621				GRANT TO SUPPORT AARP FOUNDATION'S BACK TO WORK 50+ PROGRAM
SC THRIVE 2211 ALPINE ROAD EXTENSION COLUMBIA, SC 29223	90-1011409	501(C)(3)	80,000				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SENIOR HOUSING OPTIONS 1510 17TH STREET DENVER, CO 80202	84-0820084	501(C)(3)	14,500				GRANT TO SUPPORT AARP FOUNDATION'S ISOLATION PROGRAM
SEQUOIA LIVING 1525 POST ST SAN FRANCISCO, CA 94109	94-1437728	501(C)(3)	230,000				GRANT TO SUPPORT AARP FOUNDATION'S EXPERIENCE CORPS PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SERVICES AND ADVOCACY FOR GLBT ELDERS 305 7TH AVE 15TH FL NEW YORK, NY 10001	13-2947657	501(C)(3)	300,000				GRANT TO SUPPORT AARP FOUNDATION'S ISOLATION PROGRAM AND GENERAL SUPPORT
SHEPERDS CENTERS OF AMERICA 5559 NW BARRY RD BOX 333 KANSAS CITY, MO 64154	43-1056482	501(C)(3)	212,520				GRANT TO SUPPORT AARP FOUNDATION'S ISOLATION PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SUBSTANTIAL CLASSROOMS CO PLAYWORKS EDUCATION ENERGIZED 638 THIRD STREET OAKLAND, CA 94607	94-3251867	501(C)(3)	95,000				GRANT TO SUPPORT AARP FOUNDATION'S INCOME SECURITY PROGRAM
THE CHILDREN'S INITIATIVE 3625 RUFFIN ROAD SUITE 100 SAN DIEGO, CA 92123	77-0587835	501(C)(3)	20,000				GRANT TO SUPPORT AARP FOUNDATION'S EXPERIENCE CORPS PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE FINANCIAL CLINIC 254 36TH STREET SUITE B321 BROOKLYN, NY 11232	76-0833915	501(C)(3)	280,000				GRANT TO SUPPORT AARP FOUNDATION'S INCOME SECURITY PROGRAM
THE RESEARCH FOUNDATION OF THE STATE UNIVERSITY AT NEW YORK 907 KIMBALL TOWER BUFFALO, NY 14214	14-1368361	501(C)(3)	337,143				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRI COUNTY TECH COLLEGE FOUNDATION PO BOX 587 PENDLETON, SC 29670	57-0734955	501(C)(3)	21,000				GRANT TO SUPPORT AARP FOUNDATION'S BACK TO WORK 50+ PROGRAM
TEXAS HEALTH RESOURCES FOUNDATION 612 E LAMAR BLVD STE 300 ARLINGTON, TX 76011	75-2022128	501(C)(3)	660,000				GRANT TO SUPPORT AARP FOUNDATION'S ISOLATION PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF GREATER ATLANTA 40 COURTLAND AVE NE ATLANTA, GA 30303	58-0566194	501(C)(3)	99,925				GRANT TO SUPPORT AARP FOUNDATION'S EXPERIENCE CORPS PROGRAM
UNITED WAY OF NEW YORK CITY 205 E 42ND ST 12TH FLOOR NEW YORK, NY 10017	13-2617681	501(C)(3)	300,000				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF NORTHERN CALIFORNIA PO BOX 990248 REDDING, CA 96099	94-1251675	501(C)(3)	150,000				AARP FOUNDATION DISASTER RELIEF GRANT
URBAN INSTITUTE 500 LENFANT PLAZA SW WASHINGTON, DC 20024	52-0880375	501(C)(3)	199,977				GRANT TO SUPPORT AARP FOUNDATION'S WORKFORCE PROGRAM AND GENERAL SUPPORT

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VENTURA COUNTY COMMUNITY FOUNDATION 4001 MISSION OAKS BLVD SUITE A CAMARILLO, CA 93012	77-0165029	501(C)(3)	150,000				AARP FOUNDATION DISASTER RELIEF GRANT
VETERANS RESOURCE CENTERS OF AMERICA 2455 BENNETT VALLEY ROAD C-105 SANTA ROSA, CA 95404	94-2699571	501(C)(3)	30,000				AARP FOUNDATION DISASTER RELIEF GRANT

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIRTU-WEST JERSEY HEALTH SYSTEM INC 303 LIPPINCOTT DR MARLTON, NJ 08053	21-0634532	501(C)(3)	52,833				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM
YOUTH CO-OP 3525 NW 7 STREET MIAMI, FL 33125	23-7320351	501(C)(3)	231,000				GRANT TO SUPPORT AARP FOUNDATION'S BACK TO WORK 50+ PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALAMEDA COUNTY COMMUNITY FOOD BANK 7900 EDGEWATER DRIVE OAKLAND, CA 94621	94-2960297	501(C)(3)	60,000				GRANT TO SUPPORT AARP FOUNDATION'S FOOD SECURITY PROGRAM
CALIFORNIA COMMUNITY FOUNDATION 221 S FIGUEROA STREET SUITE 400 LOS ANGELES, CA 90012	95-3510055	501(C)(3)	50,000				AARP FOUNDATION DISASTER RELIEF GRANT

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY ACTION AGENCY OF BUTTE COUNTY INC 181 E SHASTA AVE CHICO, CA 95973	94-1640546	501(C)(3)	60,000				AARP FOUNDATION DISASTER RELIEF GRANT
UNIVERSITY OF WASHINGTON HEALTH PROMOTION RESEARCH CENTER 1107 NE 45TH STREET SUITE 400 SEATTLE, WA 98105	91-6001537		137,179				GRANT TO SUPPORT AARP FOUNDATION'S ISOLATION PROGRAM

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

(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 (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VOLUNTEERS OF AMERICA NATIONAL SERVICES 7485 OFFICE RIDGE CIRCLE EDEN PRAIRIE, MN 55344	41-1467162	501(C)(3)	12,500				GRANT TO SUPPORT AARP FOUNDATION'S ISOLATION PROGRAM

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
AARP FOUNDATION

Employer identification number
52-0794300

Part I Questions Regarding Compensation

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

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 1A	ALL NON-EMPLOYEE OFFICERS AND DIRECTORS FOR AARP FOUNDATION SERVE ON A VOLUNTEER BASIS AND ARE NOT COMPENSATED FOR THEIR GENEROUS COMMITMENT TO AARP FOUNDATION. THE OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE REIMBURSED BY AARP FOUNDATION FOR TRAVEL AND SUBSISTENCE COSTS INCURRED IN CARRYING OUT THEIR DUTIES. IN ADDITION, ALL NON-EMPLOYEE OFFICERS AND DIRECTORS ARE REIMBURSED FOR TRAVEL AND SUBSISTENCE COSTS INCURRED FOR SPOUSES/COMPANIONS ACCOMPANYING THEM TO FOUNDATION FUNCTIONS. ALL SPOUSE/COMPANION TRAVEL REIMBURSEMENTS, INCLUDING TAX GROSS-UP PAYMENTS, ARE TREATED AS TAXABLE INCOME AND FORM 1099-MISC ARE ISSUED AS REQUIRED BY LAW. BOARD MEMBER L. JOHNSON SITS ON BOTH THE AARP, INC. BOARD AND THE AARP FOUNDATION BOARD. AARP, INC. PAYS ALL SPOUSE/COMPANION TRAVEL EXPENSES FOR THIS BOARD MEMBER AND ISSUES THE REQUIRED 1099-MISC WITH THE APPLICABLE INCOME TAX GROSS-UP PAYMENT. BOARD MEMBERS GUTIERREZ, H. JOHNSON, ADAME, MILLER, DAW, BANKS, AND WERTH SIT ONLY ON THE AARP FOUNDATION BOARD.
PART I, LINE 5	AARP FOUNDATION PARTICIPATES IN AARP'S ENTERPRISE-WIDE COMPENSATION PLAN. UNDER THAT COMPENSATION PLAN, NUMEROUS ORGANIZATIONAL FACTORS ARE CONSIDERED IN EMPLOYEE COMPENSATION, OF WHICH GROSS REVENUES IS ONE.

Additional Data

Software ID:
Software Version:
EIN: 52-0794300
Name: AARP FOUNDATION

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 LISA MARSH RYERSON PRESIDENT	(i)	357,715	107,462	3,564	11,200	21,078	501,019	0
	(ii)	370	0	0	33,977	0	34,347	0
1 PATRICIA D SHANNON CFO & SENIOR VICE PRESIDENT	(i)	322,910	81,441	2,318	11,200	12,578	430,447	0
	(ii)	0	0	0	33,977	0	33,977	0
2 JAMI L WYATT AS OF 3319 SECRETARY	(i)	0	0	0	0	0	0	0
	(ii)	229,112	55,858	529	45,177	21,453	352,129	0
3 DAVID WHITEHEAD SVP & CHIEF DEVELOPMENT OF	(i)	275,432	68,905	1,977	11,200	21,737	379,251	0
	(ii)	13,663	0	0	33,977	0	47,640	0
4 WILLIAM A RIVERA SVP- LITIGATION	(i)	239,923	58,294	1,280	11,200	1,636	312,333	0
	(ii)	1,307	0	0	33,977	0	35,284	0
5 EMILY S ALLEN SVP - AARP FDN PROGRAMS	(i)	259,712	62,760	1,372	11,200	9,413	344,457	0
	(ii)	0	0	0	33,977	0	33,977	0
6 KEANNE C HENRY VP - EXPERIENCE CORPS	(i)	208,403	50,038	735	10,338	6,246	275,760	0
	(ii)	0	0	0	31,361	0	31,361	0
7 STEVEN DELVECCHIO VP - DIRECT RESPONSE	(i)	141,501	48,788	2,110	10,027	1,407	203,833	0
	(ii)	60,391	0	0	30,419	0	90,810	0
8 STEPHEN VENUTE VP - CORP & FOUNDATION REL	(i)	207,096	49,930	1,306	10,281	7,156	275,769	0
	(ii)	0	0	0	31,189	0	31,189	0
9 PATRICK LANDERS VP - STRATEGY & INNOVATION	(i)	205,413	51,807	366	10,289	7,734	275,609	0
	(ii)	0	0	0	31,213	0	31,213	0
10 DEMETRIOS ANTZOULATOS VP - FINANCE, GRANTS, & OPERATIONS	(i)	205,514	51,315	758	10,273	19,424	287,284	0
	(ii)	0	0	0	31,165	0	31,165	0

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

Schedule K (Form 990)

Supplemental Information on Tax-Exempt Bonds

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

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
 Internal Revenue Service
 Name of the organization
 AARP FOUNDATION

Employer identification number
 52-0794300

Part I Bond Issues

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

Part II Proceeds

		A	B	C	D				
1	Amount of bonds retired								
2	Amount of bonds legally defeased								
3	Total proceeds of issue	25,000,000							
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds								
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	23,688,767							
11	Other spent proceeds	1,311,233							
12	Other unspent proceeds								
13	Year of substantial completion	2004							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?		X						
15	Were the bonds issued as part of an advance refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

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

Part III Private Business Use (Continued)

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

Part IV Arbitrage

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

Part IV Arbitrage (Continued)

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

Part V Procedures To Undertake Corrective Action

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

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

Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No. 1545-0047

2019

Open to Public Inspection

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**
▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization AARP FOUNDATION	Employer identification number 52-0794300
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Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

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

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

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

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

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

Part III Grants or Assistance Benefiting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1) DAVID ADAME	PRESIDENT OF CHICANOS POR LA CAUSA INC AND BOARD MEMBER OF AARP FOUNDATION		RESTRICTED GRANT	SUPPORT FOR THE PROPERTY TAX-AIDE ARIZONA PILOT PROGRAM

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) AARP INC	AFFILIATED ENTITY	12,544,586	GRANT		No

Part V Supplemental Information

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

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

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
AARP FOUNDATION

Employer identification number
52-0794300

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	14	31,840	HIGH / LOW AVERAGE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

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

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

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

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

SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019**Open to Public Inspection**

Department of the Treasury

Name of the organization

AARP FOUNDATION

Employer identification number

52-0794300

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	THE AARP BOARD OF DIRECTORS APPOINTS UP TO TEN VOTING MEMBERS OF THE AARP FOUNDATION BOARD OF DIRECTORS. UP TO FOUR OF THE AARP FOUNDATION BOARD MEMBERS MAY BE CURRENT AARP BOARD MEMBERS. THE REMAINING BOARD MEMBERS SHALL BE UNAFFILIATED WITH AARP.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	THE AARP BOARD OF DIRECTORS APPOINTS UP TO TEN VOTING MEMBERS OF THE AARP FOUNDATION BOARD OF DIRECTORS. UP TO FOUR OF THE AARP FOUNDATION BOARD MEMBERS MAY BE CURRENT AARP BOARD MEMBERS. THE REMAINING BOARD MEMBERS SHALL BE UNAFFILIATED WITH AARP. AN AARP FOUNDATION BOARD MEMBER MAY BE REMOVED, WITH OR WITHOUT CAUSE, BY FORMAL ACTION OF THE AARP FOUNDATION BOARD OF DIRECTORS, DESIGNATING A SUCCESSOR. THE AARP FOUNDATION BYLAWS PROVIDE THAT NO AMENDMENTS TO THE BYLAWS ADOPTED BY THE FOUNDATION MAY TAKE EFFECT UNTIL APPROVED BY THE AARP BOARD OF DIRECTORS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 FOR AARP FOUNDATION ("FOUNDATION") IS PREPARED BY AN OUTSIDE CONSULTANT AND REVIEWED BY AARP FOUNDATION'S CFO AND PRESIDENT AND OTHER INTERNAL REVIEWERS. THE FORM 990 IS THEN PROVIDED TO THE AARP FOUNDATION BOARD OF DIRECTORS. ONCE ALL REVIEWS ARE COMPLETE, THE RETURN IS ELECTRONICALLY FILED WITH THE INTERNAL REVENUE SERVICE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ANNUALLY, ALL BOARD MEMBERS AND EMPLOYEES (INCLUDING OFFICERS) ARE REQUIRED TO REVIEW THE CODE OF CONDUCT, FORMALLY ACKNOWLEDGE THEIR UNDERSTANDING OF THE CODE, AND DISCLOSE ANY REAL OR POTENTIAL CONFLICTS OF INTEREST. DISCLOSURES ARE REVIEWED BY APPROPRIATE MANAGEMENT (OR IN THE CASE OF A BOARD MEMBER, THE BOARD CHAIR, AND IF NECESSARY, THE BOARD OF DIRECTORS), AND THE ETHICS & COMPLIANCE OFFICE. THE APPROPRIATE RESOLUTION PLAN IS IMPLEMENTED (FOR EXAMPLE, RECUSAL FROM PARTICIPATING IN ANY DELIBERATIONS AND DECISIONS RELEVANT TO THE DISCLOSURE). THE ETHICS & COMPLIANCE OFFICE MONITORS COMPLIANCE WITH THESE REQUIREMENTS AND ENSURES PROPER FOLLOW-UP AS NEEDED.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	<p>THROUGH ITS SHARED SERVICES AGREEMENT WITH AARP, AARP FOUNDATION PARTICIPATES IN AARP'S ENTERPRISE-WIDE COMPENSATION REVIEWS. AARP HAS A COMPETITIVE POSITION IN THE MARKETPLACE THAT CONSIDERS RELEVANT FOR-PROFIT AND NOT-FOR-PROFIT DATA SINCE THIS IS THE LANDSCAPE IN WHICH AARP AND ITS AFFILIATES COMPETE FOR TALENT. ESTABLISHING THE APPROPRIATE COMPENSATION FOR POSITIONS AND JOBS CONSIDERS EXTERNAL MARKET PRICING (WHERE POSSIBLE) FROM AN INDEPENDENT, THIRD PARTY COMPENSATION CONSULTING FIRM, INTERNAL CRITERIA, AND AN INDIVIDUAL'S ACTUAL PERFORMANCE AND CONTRIBUTION. INTERNAL CRITERIA IS BASED ON A STANDARD APPROACH THAT MEASURES THE INTERNAL VALUE OF POSITIONS, INCLUDING: COMPLEXITY AND SCOPE OF RESPONSIBILITY, SKILL SET AND COMPETENCIES, EDUCATION AND EXPERIENCE, AND THE REPORTING RELATIONSHIP OF THE POSITION. AN INDIVIDUAL'S ACTUAL PERFORMANCE AND CONTRIBUTION IS MEASURED THROUGH AARP'S PERFORMANCE MANAGEMENT APPROACH AND THEN REWARDED THROUGH AARP'S ANNUAL BASE PAY MERIT AND INCENTIVE AWARD PROGRAMS. THIS PROCESS APPLIES TO ALL EMPLOYEES OF THE FOUNDATION INCLUDING THE PRESIDENT, CFO, AND KEY EMPLOYEES. BASED ON THE PROCESS DESCRIBED ABOVE, THE AARP FOUNDATION BOARD CHAIR APPROVES ADJUSTMENTS TO THE PRESIDENT'S COMPENSATION PACKAGE. COMPENSATION PACKAGES FOR OTHER OFFICERS AND KEY EMPLOYEES ARE DISCUSSED BY THE STRATEGY AND GOVERNANCE COMMITTEE.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 18	AARP FOUNDATION MAKES ITS FORM 990 AVAILABLE FOR PUBLIC INSPECTION ON ITS WEBSITE AND UPON REQUEST TO THE AARP FOUNDATION'S OFFICE OF THE CFO.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	AARP FOUNDATION MAKES ITS AUDITED FINANCIAL STATEMENTS AVAILABLE FOR PUBLIC INSPECTION ON ITS WEBSITE AND UPON REQUEST TO THE AARP FOUNDATION'S OFFICE OF THE CFO.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VII, SEC. A, OFFICERS, KEY EMPLOYEES AND HIGHEST COMPENSATED EMPLOYEES	AARP FOUNDATION HAS A STANDARD 40 HOUR WORK WEEK AND THE AVERAGE HOURS ARE DISCLOSED ON FORM 990. OFFICERS, KEY EMPLOYEES, AND HIGHEST COMPENSATED EMPLOYEES OFTEN WORK IN EXCESS OF THAT AMOUNT.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

**Open to Public
Inspection**

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

Department of the Treasury
Internal Revenue Service

Name of the organization
AARP FOUNDATION

Employer identification number

52-0794300

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
(1) AARP (CONSOLIDATED) 601 E STREET NW WASHINGTON, DC 20049 95-1985500	SOCIAL WELFARE ORGANIZATION DEDICATED TO PERSONS OVER AGE 50	DC	501(C)(4)	N/A	N/A		No
(2) LEGAL COUNSEL FOR THE ELDERLY 601 E STREET NW WASHINGTON, DC 20049 52-1194741	PUBLIC CHARITY PROVIDING LEGAL ASSISTANCE/EDUCATION TO DC ELDERLY RESIDENTS	DC	501(C)(3)	509(A)(1)	AARP		No
(3) AARP INSURANCE PLAN 601 E STREET NW WASHINGTON, DC 20049 52-6069387	GRANTOR TRUST HOLDING CERTAIN AARP GROUP HEALTH INSURANCE POLICIES	DC	501(C)(4)	N/A	AARP		No

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) AARP FINANCIAL SERVICES CORPORATION 601 E STREET NW WASHINGTON, DC 20049 52-1367607	REAL ESTATE HOLDING COMPANY	DE	AARP	C					No
(2) AARP SERVICES INC (CONSOLIDATED) 601 E STREET NW WASHINGTON, DC 20004 52-2141065	QUALITY CONTROL AND RESEARCH	DE	AARP	C					No
(3) THE H WAYNE AND ANNE D BARBETTI CHARITABLE REMAINDER UNITRUST 5011 HAVEN AVENUE OCEAN CITY, NJ 08226 20-6379297	CHARITABLE REMAINDER TRUST	NJ	N/A	T					No
(4) AARP FOUNDATION TRUST 400 HOWARD STREET SAN FRANCISCO, CA 94105 30-6645384	GRANTOR TRUST	CA	AARP FOUNDATION	T					No

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

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

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

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

See Additional Data Table

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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

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

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

Part VII **Supplemental Information**

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

Return Reference	Explanation
SCHEDULE R, PART V, LINE 2(A)(7)	AARP FOUNDATION AND AARP, ITS PARENT ORGANIZATION, SHARE MAILING LISTS. AARP DOES NOT RENT ITS MAILING LIST TO OTHER ORGANIZATIONS, SO A FAIR MARKET VALUE OF THE BENEFIT TO THE FOUNDATION HAS NOT BEEN ESTABLISHED. THE AARP LIST IS MUCH LARGER AND THUS PRESUMABLY MORE VALUABLE THAN THE FOUNDATION LIST. MOREOVER, THE VAST MAJORITY OF NAMES ON THE AARP FOUNDATION LIST ARE ALREADY ON THE AARP LIST, AS THEY ARE ALSO AARP MEMBERS.

Additional Data

Software ID:
Software Version:
EIN: 52-0794300
Name: AARP FOUNDATION

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
AARP INC - GRANT AWARDS FOR PERFORMANCE OF CHARITABLE ACTIVITIES	B	12,544,586	GRANT AGREEMENTS
AARP INC - CASH CONTRIBUTIONS AND ENDOWMENT	C	101,862,739	CASH PAID
AARP INC - BOND STANDBY AGREEMENT	E	25,000,000	IN THE EVENT OF DEFAULT
AARP INC - IN-KIND ADVERTISING	M	5,484,567	PUBLICATION SPACE MARKET VALUE
AARP INC - IN-KIND SHARED SERVICES	M	26,497,650	ALLOCABLE COST
AARP INC - IN-KIND RENT	N	907,360	ALLOCABLE COST
AARP INC - IN-KIND MAILING LISTS	N	0	SEE SUPPLEMENTAL INFORMATION
AARP INC - MAINTENANCE & TELEPHONE	P	860,226	COSTS INCURRED
AARP INC - SHARED EMPLOYEE SALARY	Q	254,367	ACTUAL SALARY FOR TIME REPORTED
AARP INC - 25K ANNUAL FEE LINE OF CREDIT	R	25,000	CASH PAID
ANDRUS INSURANCE FUND INC - WORKERS' COMP & OTHER INSURANCE	R	2,327,395	PREMIUMS PAID