	_		Return of Organization Exempt Fron	n Income Tax	OMB No. 1545-0047
Forr	<b>_ Q</b>	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code		<b>2003</b>
1 011			Do not enter social security numbers on this form as it ma		
Depa Interr	rtment o al Reve	of the Treasury nue Service	Go to www.irs.gov/Form990 for instructions and the late		Open to Public Inspection
-			ar year, or tax year beginning OCT $1, 2023$ and ending	SEP 30, 2024	
Bc	heck if	C Name of	forganization	D Employer identific	ation number
а	pplicab	la.	AYN RAND INSTITUTE: THE CENTER FOR		
	Addre	ess THE	ADVANCEMENT OF OBJECTIVISM		
	6				
	Initial	Number	and street (or P.O. box if mail is not delivered to street address) Room/s	suite E Telephone number	
	Final		TTON CENTRE DRIVE #600	949-222-6	
	termir ated	City or t	own, state or province, country, and ZIP or foreign postal code	<b>G</b> Gross receipts \$	38,077,250.
	Amen return	DANT	A ANA, CA 92707	H(a) Is this a group ret	
	Applio tion pendi	F Name a	nd address of principal officer: TAL TSFANY	for subordinates?	
		SAME	AS C ABOVE	H(b) Are all subordinates inc	
		empt status:			ist. See instructions
	Vebsi		AYNRAND.ORG	H(c) Group exemption	
	orm o <sup>.</sup>	f organization: Summary	X Corporation Trust Association Other L	Year of formation: 1984 M	State of legal domicile: CA
10				NDINC OF AVN D	
e	1		e the organization's mission or most significant activities: UNDERSTAND TO FIND AND TRAIN THE NEW INTELLEC		
an	2	Check this bo			
Governance				1.1	8
ģ			lependent voting members of the governing body (Part VI, line 1a)		4
			of individuals employed in calendar year 2023 (Part V, line 2a)		47
ities	6		of volunteers (estimate if necessary)		4
Activities &			d business revenue from Part VIII, column (C), line 12		0.
Ă			business taxable income from Form 990-T, Part I, line 11		0.
				Prior Year	Current Year
¢)	8	Contributions	and grants (Part VIII, line 1h)	14,527,711.	31,003,704.
Revenue	9	Program servi	ce revenue (Part VIII, line 2g)	604,231.	868,987.
eve	10	Investment ind	come (Part VIII, column (A), lines 3, 4, and 7d)	111,913.	160,976.
£	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	237,323.	103,583.
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	15,481,178.	32,137,250.
			nilar amounts paid (Part IX, column (A), lines 1-3)	618,020.	473,981.
	14	Benefits paid	to or for members (Part IX, column (A), line 4)	0.	0.
ŝ		,	compensation, employee benefits (Part IX, column (A), lines 5-10)	5,227,422.	5,710,507.
use.	16a	Professional fi	undraising fees (Part IX, column (A), line 11e)	0.	0.
Expense			ing expenses (Part IX, column (D), line 25) 720, 372.		
ш			es (Part IX, column (A), lines 11a-11d, 11f-24e)	4,871,149.	4,379,199.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)	10,716,591.	10,563,687.
	19	Revenue less	expenses. Subtract line 18 from line 12	4,764,587.	21,573,563.
t Assets or d Balances				Beginning of Current Year	End of Year
sset	20	Total assets (F		31,368,502.	54,001,600.
Net As	21		(Part X, line 26)	4,373,998.	4,148,329.
			fund balances. Subtract line 21 from line 20	26,994,504.	49,853,271.
	nrt II			tomonto and to the bast of soul	mouladay and balled it '-
			I declare that I have examined this return, including accompanying schedules and sta		knowledge and Dellet, it is
<u></u> ,	COLLE	or, and complete.	Declaration of preparer (other than officer) is based on all information of which pre	Jaron nas any Khowieuye.	

Sign	Signature of officer			Date				
-	TAL TSFANY, PRESIDENT & C	EO						
	Type or print name and title							
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN				
Paid	TRITIA FOSTER			self-employed P02164134				
Preparer	Firm's name DAVIS FARR LLP			Firm's EIN 47-3535842				
Use Only	Use Only Firm's address 18201 VON KARMAN AVE, SUITE 1100							
	IRVINE, CA 92612 Phone no.949-474-2020							
May the IRS discuss this return with the preparer shown above? See instructions								
LHA For	Paperwork Reduction Act Notice, see the separation	rate instructions. 332001 12-21-23		Form <b>990</b> (2023)				
~								

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	Check if Schedule O contains a response or note to any line in this Part III
	PO FOSTER A GROWING AWARENESS, UNDERSTANDING AND ACCEPTANCE OF AYN         RAND'S REVOLUTIONARY PHILOSOPHY, OBJECTIVISM, IN ORDER TO CREATE A         CULTURE WHOSE GUIDING PRINCIPLES ARE REASON, RATIONAL SELF-INTEREST,         AND LAISSEZ-FAIRE CAPITALISM, A CULTURE IN WHICH INDIVIDUALS ARE FREE         Bid the organization undertake any significant program services during the year which were not listed on the         riot form 990 or 990-E2?       Yes         "Yes," describe these new services on Schedule O.         Bid the organization cease conducting, or make significant changes in how it conducts, any program services, as measured by expenses.         Beecribe these changes on Schedule O.         Beecribe these changes on Schedule O.         Beecribe these changes on Schedule O.         Beecribe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.         Beecribe the organization's program service reported.         Other Program service reported.         (bigeneses)       3,687,777.         Including grants of s       264,086.) (Revenue's       491,605.         DUTREACH PROGRAMS: WE POSTED SCORES OF NEW VIDEOS TO OUR YOUTUBE         HANNEL, WITH SIGNIFICANT GROWTH IN SUBSCRIBERS AND VIEWS. AMONG THE         IEW VIDEOS WERE LECTURES, INTERVIEWS, AND PODCASTS ON TOPICS RANGING         "ROM HISTORY AND PHILOSOPHY TO CULTURAL ISSUES AND FOREIGN AFFAIRS. OUR <t< td=""></t<>
	RAND'S REVOLUTIONARY PHILOSOPHY, OBJECTIVISM, IN ORDER TO CREATE A         CULTURE WHOSE GUIDING PRINCIPLES ARE REASON, RATIONAL SELF-INTEREST,         NND LAISSEZ-FAIRE CAPITALISM, A CULTURE IN WHICH INDIVIDUALS ARE FREE         Did the organization undertake any significant program services during the year which were not listed on the         infor form 990 or 990-E27         infor form 990 or 990-E27         infor form 990 or 990-E27         infor ease conducting, or make significant changes in how it conducts, any program services?         information in cease conducting, or make significant changes in how it conducts, any program services, as measured by expenses.         Sectiob these changes on Schedule 0.         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 evenue, if any, for each program service reported.         Code:       ) (Expenses 3, 687, 777.         Itemating grants of 264, 086.) (Revenues 491, 605.)         DUTREACH PROGRAMS: WE POSTED SCORES OF NEW VIDEOS TO OUR YOUTUBE         THANNEL, WITH SIGNLFICANT GROWTH IN SUBSCRIBERS AND VIEWS. AMONG THE         IEW VIDEOS WERE LECTURES, INTERVIEWS, AND PODCASTS ON TOPICS RANGING         FROM HISTORY AND PHILOSOPHY TO CULTURAL ISSUES AND FOREIGN AFFAIRS. OUR         "HANNEL SHOWCASED RARE AND LESSER-KNOWN AYN RAND AUDIO
	CULTURE WHOSE GUIDING PRINCIPLES ARE REASON, RATIONAL SELF-INTEREST,         AND LAISSEZ-FAIRE CAPITALISM, A CULTURE IN WHICH INDIVIDUALS ARE FREE         Not evenue, failed the organization undertake any significant program services during the year which were not listed on the rior Form 990 or 990-E2?
2 Plf D S re (OOONEIONEIONEIONEIONEIONEIONEIONEIONEION	AND LAISSEZ-FAIRE CAPITALISM, A CULTURE IN WHICH INDIVIDUALS ARE FREE bid the organization undertake any significant program services during the year which were not listed on the "rior Form 990 or 990-EZ? "Yes," (Source Content of the organization case conducting, or make significant changes in how it conducts, any program services? (Yes (Note: "Yes," describe these new services on Schedule O. Bid the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Beecribe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Beecribe the organization's program service reported. Beecribe the organizations are required to report the amount of grants and allocations to others, the total expenses, and evenue, if any, for each program service reported. Beecribe the SIGNET SCORES OF NEW VIDEOS TO OUR YOUTUBE CHANNEL, WITH SIGNIFICANT GROWTH IN SUBSCRIBERS AND VIEWS. AMONG THE NEW VIDEOS WERE LECTURES, INTERVIEWS, AND PODCASTS ON TOPICS RANGING FROM HISTORY AND PHILOSOPHY TO CULTURAL ISSUES AND FOREIGN AFFAIRS. OUR CHANNEL SHOWCASED RARE AND LESSER-KNOWN AYN RAND AUDIO-VIDEO MATERIALS.FOUR MAJOR CONFERENCES WERE HELD: ARCON-EUROPE, WHICH WAS HELD IN MARCH 2024 IN AMSTERDAM, NETHERLANDS, ARCON USA HELD IN MARCH 2024 IN AUSTIN, TEXAS, ARCON LATINA AMERICA, WHICH WAS HELD IN APRIL 2024 IN AUSTIN, CALIFORNIA, WHICH BROUGHT HUNDREDS OF ATTENDEES COGETHER FROM ALL OVER THE WORLD. IN FY2024, ARI CONTINUED ITS GLOBAL OUTREACH EXPANSION IN EUROPE, LATIN Code:
	Did the organization undertake any significant program services during the year which were not listed on the       Yes X Not         "Yes," describe these new services on Schedule O.       Yes X Not         Did the organization cease conducting, or make significant changes in how it conducts, any program services?       Yes X Not         "Yes," describe these changes on Schedule O.       Yes X Not         Describe these changes on Schedule O.       Yes X Not         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         evenue, if any, for each program service reported.       264,086.) (Revenue \$ 491,605.         DUTREACH PROGRAMS: WE POSTED SCORES OF NEW VIDEOS TO OUR YOUTUBE         CHANNEL, WITH SIGNIFICANT GROWTH IN SUBSCRIBERS AND VIEWS. AMONG THE         VIDEOS WERE LECTURES, INTERVIEWS, AND PODCASTS ON TOPICS RANGING         FROM HISTORY AND PHILOSOPHY TO CULTURAL ISSUES AND FOREIGN AFFAIRS. OUR         CHANNEL SHOWCASED RARE AND LESSER-KNOWN AYN RAND AUDIO-VIDEO         MATERIALS.FOUR MAJOR CONFERENCES WERE HELD: ARCON-EUROPE, WHICH WAS         HELD IN MARCH 2024 IN AMSTERDAM, NETHERLANDS, ARCON USA HELD IN APRIL         2024 IN AUSTIN, TEXAS, ARCON LATIN AMERICA, WHICH WAS HELD IN APRIL         2024 IN ANAHEIM, CALIFORNIA, WHICH BROUGHT HUNDREDS OF ATTENDEES <tr< td=""></tr<>
p ff       p         3       D ff         3       If         4       S m         (0)       D ff         14       S m         4       A	rior Form 990 or 990-EZ? Yes X Not "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X Not "Yes," describe these changes on Schedule O. 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 evenue, if any, for each program service reported. Code:
- ff 口 S m (()〇〇八日日〇〇州日〇〇〇八日日〇) 3	**Yes," describe these new services on Schedule O.          Did the organization cease conducting, or make significant changes in how it conducts, any program services?       Yes X Not X and
3 D ff D S re(() O O N H O M H O N H O N H O M	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X Not "Yes," describe these changes on Schedule O. 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 evenue, if any, for each program service reported. Code:
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	2024 IN AUSTIN, TEXAS, ARCON LATIN AMERICA, WHICH WAS HELD IN APRIL 2024 IN BUENOS AIRES, ARGENTINA AND THE OBJECTIVIST CONFERENCE IN JUNE 2024 IN ANAHEIM, CALIFORNIA, WHICH BROUGHT HUNDREDS OF ATTENDEES COGETHER FROM ALL OVER THE WORLD. IN FY2024, ARI CONTINUED ITS GLOBAL OUTREACH EXPANSION IN EUROPE, LATIN Code:)(Expenses \$4,722,269. including grants of \$209,895.) (Revenue \$362,126.
	2024 IN BUENOS AIRES, ARGENTINA AND THE OBJECTIVIST CONFERENCE IN JUNE 2024 IN ANAHEIM, CALIFORNIA, WHICH BROUGHT HUNDREDS OF ATTENDEES POGETHER FROM ALL OVER THE WORLD. IN FY2024, ARI CONTINUED ITS GLOBAL OUTREACH EXPANSION IN EUROPE, LATIN Code:)(Expenses \$4,722,269. including grants of \$209,895.) (Revenue \$362,126.
[입[편]편] 4b 4b	2024 IN ANAHEIM, CALIFORNIA, WHICH BROUGHT HUNDREDS OF ATTENDEES         POGETHER FROM ALL OVER THE WORLD.         EN FY2024, ARI CONTINUED ITS GLOBAL OUTREACH EXPANSION IN EUROPE, LATIN         Code:      )(Expenses \$4,722,269.         including grants of \$209,895.       (Revenue \$362,126.
	COGETHER FROM ALL OVER THE WORLD.         IN FY2024, ARI CONTINUED ITS GLOBAL OUTREACH EXPANSION IN EUROPE, LATIN         Code:       ) (Expenses \$ 4,722,269. including grants of \$ 209,895.) (Revenue \$ 362,126.
	IN FY2024, ARI CONTINUED ITS GLOBAL OUTREACH EXPANSION IN EUROPE, LATIN         Code:       ) (Expenses \$
	Code:) (Expenses \$4,722,269. including grants of \$209,895. ) (Revenue \$362,126.
	LDUCATIONAL PROGRAMS:
	IN FY2024, WE FOCUSED ON GROWING OUR FREE BOOKS TO STUDENTS PROGRAM,
	ACHIEVING CONTINUED EXPONENTIAL GROWTH. THOUGH WE PAUSED OUTBOUND
	MARKETING FOR OUR BOOKS FOR TEACHERS PROGRAM, DEMAND STAYED HEALTHY,
	AND THOUSANDS OF TEACHERS CONTINUED TO COME TO US TO ORDER COPIES OF
	AND INCUSANDS OF INCHERS CONTINUED TO COME TO US TO ORDER COPIES OF
E W	WHILE STUDENTS HAD NEW OPPORTUNITIES TO PARTICIPATE IN LIVE ONLINE
V	
_	DISCUSSIONS WITH OUR EXPERT FACULTY. AS ALWAYS, IN-PERSON CONFERENCES VERE A CULMINATING EXPERIENCE FOR MANY OF THE STUDENTS WHO INTERACT
Té	
_	VITH OUR PROGRAMS.
_	ARU, OUR PROGRAM OF ONLINE COURSES FOCUSED ON OBJECTIVISM AND ITS
	PHILOSOPHICAL APPLICATIONS, CONTINUED TO SERVE A GROWING STUDENT
	Code:) (Expenses \$ 769,157. including grants of \$) (Revenue \$ 15,256.
	OTHER: THE AYN RAND ARCHIVES CONTINUED TO ENHANCE THE PROTECTION OF
	ARI'S PHYSICAL ARCHIVAL MATERIALS AND INVESTED FURTHER IN DIGITAL
_	PLATFORMS FOR MANAGING OUR COLLECTIONS. IN ADDITION TO PUBLISHING
	SSAYS AND HOSTING ONLINE EVENTS FEATURING ARCHIVAL MATERIALS, WE
	PRODUCED TWO EXHIBITS: AN ONLINE EXHIBIT, "AYN RAND: IN FILM AND ON
_	TAGE, " FEATURING ORIGINAL MATERIALS ALONG WITH COMMENTARY FROM OUR
_	ARCHIVES TEAM, AND A COMPANION PHYSICAL EXHIBIT AT OCON 2024.
_	THE ARI ESTORE (ESTORE.AYNRAND.ORG) CONTINUED TO SELL BOOKS AND
_	RECORDINGS ON OBJECTIVISM AND RELATED TOPICS. IN FY2024, THE ESTORE
_	SOLD HUNDREDS OF BOOKS, DIGITAL COURSES, AND LECTURES TO OUR CUSTOMERS.
_	ARI HAS RECEIVED THE HIGHEST 4-STAR RATING WITH CHARITY NAVIGATOR,
F	OSITIONING ARI AMONG THE MOST-TRUSTED NONPROFITS IN THE COUNTRY.
<b>4d</b> C	
(E	Other program services (Describe on Schedule O.)
<b>4e</b> T	Other program services (Describe on Schedule O.)         Expenses \$       including grants of \$       ) (Revenue \$       )
	Other program services (Describe on Schedule O.)         Expenses \$ including grants of \$ ) (Revenue \$ )         Total program service expenses
32002 1	Other program services (Describe on Schedule O.)         Expenses \$       including grants of \$       ) (Revenue \$       )

THE	AYN	RAND	INS	ттт	UTE:	THE	CENTER	FOR
THE	ADV <i>I</i>	ANCEME	ENT	OF	OBJECT	IVIS	SM	

	990 (2023) THE ADVANCEMENT OF OBJECTIVISM 22-2570	<u>926</u>	P	age <b>3</b>
Pa	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
_	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		v
•	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<b>_</b>		v
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		х	
•	Schedule D, Part III	8	Λ	
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?	9		х
10	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		
10		10		х
11	or in quasi-endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i> 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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	1		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	1		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	1		
	complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5.000 of grants or other assistance to any domestic organization or	1		

domestic government on Part IX, column (A	), line 1?	If "Yes,"	complete	Schedule I.	Parts	l and l
12-21-23						

Form 990 (2023)

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# THE AYN RAND INSTITUTE: THE CENTER FOR THE ADVANCEMENT OF OBJECTIVISM

Part IV Checklist of Required Schedules (continued)

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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		x	
04-	Schedule J	23	~	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	040		x
Ь	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		
		240		<u> </u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	0.5.4		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		
26	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
		26		x
27	controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		- 23
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		x
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a	Х	
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete Schedule N, Part II</i>	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			<u> </u>
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		37	
Pa	Note: All Form 990 filers are required to complete Schedule O           t V         Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
r al				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	V	
4-	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable1a58Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable1b0	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
C	(gambling) winnings to prize winners?	1c		
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## THE AYN RAND INSTITUTE: THE CENTER FOR THE ADVANCEMENT OF OBJECTIVISM

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)					
					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	47			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns? .		2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	Ο.		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	author	rity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accoui	nt)?	4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A		. ,			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			<u>5a</u>		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction tax it was or is a party to a prohibited tax shelter transaction tax it was or is a party to a prohibited tax shelter transaction tax it was or is a party to a prohibited tax shelter transaction tax it was or is a party to a prohibited tax shelter transaction tax it was or is a party to a prohibited tax shelter tax it was or is a party t			5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			<u>5c</u>		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th					x
	any contributions that were not tax deductible as charitable contributions?			<u>6a</u>		
D	If "Yes," did the organization include with every solicitation an express statement that such contributi were not tax deductible?		5	Ch		
7	Organizations that may receive deductible contributions under section 170(c).			6b		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices	provided to the payor?	7a		x
		-		7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
Ŭ	to file Form 8282?			7c		x
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 or	-		7e		
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?					
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?					
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?					
8	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?					
9	9 Sponsoring organizations maintaining donor advised funds.					
а						
b				9b		
10	Section 501(c)(7) organizations. Enter:	1	I			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		•		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		-		
11	Section 501(c)(12) organizations. Enter:	11a	I			
a b	Gross income from members or shareholders Gross income from other sources. (Do not net amounts due or paid to other sources against			-		
b	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			12a		
	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.		•			
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
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				
	Enter the amount of reserves on hand	13c				
				14a	<b> </b>	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b	<b> </b>	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					v
	excess parachute payment(s) during the year?			15		X
10	If "Yes," see the instructions and file Form 4720, Schedule N.					v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment If "Yea" complete Form 4720. Schedule O	t Incol	me?	16		X
17	If "Yes," complete Form 4720, Schedule O.	stivit:~	6			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activation that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		1
	If "Yes," complete Form 6069.					
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Form 990 (2023)

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#### THE AYN RAND INSTITUTE: THE CENTER FOR THE ADVANCEMENT OF OBJECTIVISM

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1a

Yes No

Form 990 (		ADVANCEMENT			22-2570926	Page <b>6</b>
Part VI	Governance, Manag	ement, and Disclo	sure.	For each "Yes" response to lines 2 to	hrough 7b below, and for a "No" res	ponse
to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.						
	Check if Schedule O conta	ins a response or note t	o any I	line in this Part VI		X

Check if Schedule O contains a response or note to any line in this Part VI	
Section A. Governing Body and Management	

1a Enter the number of voting members of the governing body at the end of the tax year

<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year 1a	-		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х	
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	on Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed CA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A, if applicable), 990, and 990 T (section 501(c)(3)	s only)	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.	.,		
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	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			
	TAL TSFANY - 949-222-6550			
	6 HUTTON CENTRE DRIVE, SUITE 600, SANTA ANA, CA 92707			
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THE AYN RAND INSTITUTE: THE CENTER FOR		
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Com	pensated	
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		
<ul> <li>1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with</li> <li>List all of the organization's current officers, directors, trustees (whether individuals or organizations), regard</li> <li>Enter -0- in columns (D), (E), and (F) if no compensation was paid.</li> </ul>	0	,
<ul> <li>List all of the organization's current key employees, if any. See the instructions for definition of "key employee"</li> <li>List the organization's five current highest compensated employees (other than an officer, director, trustee, o who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-</li> </ul>	r key employee)	

\$100,000 from the organization and any related organizations. • List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)			( <b>(</b> Pos	<b>C)</b> ition			(D)	(E)	(F)
Name and title	Average		not cł	heck	more	than o		Reportable	Reportable	Estimated
	hours per		, unles cer an					compensation from	compensation from related	amount of other
	week (list any	tor						the	organizations	compensation
	hours for	direc				Ð		organization	(W-2/1099-MISC/	from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	l trust	nal tru		oyee	ompe		1099-NEC)		and related
	below line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) TAL TSFANY	45.00		=	0	×	Ξœ	ш			
PRESIDENT & CEO, BOARD MEMBER	2.00	х		х				484,480.	0.	13,291.
(2) CARLA SILK	45.00									
CHIEF OPERATING OFFICER				Х				234,809.	0.	10,257.
(3) ONKAR GHATE	45.00									
CHIEF PHIL. OFFICER		Х		Х				219,709.	0.	13,211.
(4) ELAN JOURNO	45.00									
VP OF CONTENT & SR. FELLOW					Х			177,348.	0.	10,753.
(5) KEITH LOCKITCH	45.00									
VP OF ED. & SR. FELLOW					Х			152,447.	0.	11,829.
(6) GERALDINE YUMPING	45.00									
CONTROLLER	2.00			Х				142,392.	0.	9,943.
(7) DONALD WATKINS	45.00									
VICE PRESIDENT OF MARKETING AND FUND						X		126,299.	0.	7,061.
(8) AARON FRIED	45.00									
SENIOR DIRECTOR OF GROWTH AND TEC						X		112,244.	0.	6,457.
(9) BENJAMIN BAYER	45.00									
DIRECTOR OF CONTENT						X		102,228.	0.	10,575.
(10) JEFFREY P SCIALABBA	45.00									
DIRECTOR OF ARU OPERATIONS	2.00					X		102,127.	0.	10,172.
(11) JOHN ALLISON	2.00									
MEMBER		Х						0.	0.	0.
(12) LARRY SALZMAN	2.00									
MEMBER		Х						0.	0.	0.
(13) ROBERT MAYHEW	2.00									
MEMBER		Х						0.	0.	0.
(14) TARA SMITH	2.00									_
MEMBER		Х						0.	0.	0.
(15) LOREN CORLE	2.00								•	<u>^</u>
MEMBER	<b>F</b> 00	X						0.	0.	0.
(16) YARON BROOK	5.00								•	<u>^</u>
CHAIRMAN OF THE BOARD	2.00	Х		Х				0.	0.	0.
										<b>Gauss 990</b> (2000)

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Form 990 (2023)

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2023.05070 THE AYN RAND INSTITUTE:

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	<u>990 (2023)</u> THE ADVAN	ICEMENT	OF	OI	BJE	CT:	IVI	ISM	22-25	570926	Page <b>8</b>
Part	t VII Section A. Officers, Directors, Trus	tees, Key Emp	oloye	es, a	and H	lighe	est C	compensated Employee	es (continued)		
	(A) Name and title	<b>(B)</b> Average hours per week	(do box,	F not che unless	(C) Positi eck mo s perso		n one oth an	(D) Reportable compensation from	(E) Reportable compensation from related	n am	(F) timated ount of other
		(list any hours for related organizations below line) 				Key employee Highest compensated	erripioyee Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS 1099-NEC)	C/ fro orga and	pensation form the anization I related nizations
						_					
						+					
						+					
						+					
с	Subtotal Total from continuation sheets to Part VI	I, Section A						1,854,083. 0. 1,854,083.		0. 103 0. 0. 103	<u>8,549.</u> 0.
2	Total (add lines 1b and 1c) Total number of individuals (including but n compensation from the organization								l ,000 of reportable	•	10
3	Did the organization list any <b>former</b> officer,	,				<b>,</b> ,			,		Yes No
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su and related organizations greater than \$150	m of reportabl	e co	mper	nsatio	on an	d otł	her compensation from t	he organization		X X
5	Did any person listed on line 1a receive or a rendered to the organization? <i>If "Yes." com</i>	iccrue compen	satio	on fro	om ar	ny un	relat	ed organization or indivi	dual for services	5	x
1	tion B. Independent Contractors Complete this table for your five highest co the organization. Report compensation for	-								ensation fro	m
	(A) Name and business		are	nuing	y with			(B) Description of s		(C Comper	
PO	BPG GRIFFIN TOWERS BOX 32354, LAS VEGAS, OK MEDIA AND CONSULTIN		9					BUILDING LEA SPEAKER AND		446	5,313.
BRE	CALLE PALMERAS, SAN JU /OC GRIFFIN LLC BOX 209259, AUSTIN, TX							ENGAGEMENTS BUILDING LEA	SE		5,341. 9,587.
IDE	ATION MARKETING GROUP 31 SAXON WAY, LAKE FOR	LLC			0			DIGITIZATION			3,136.
2	Total number of independent contractors (ii	ncluding but no	ot lin	nited	to th	ose li	sted	above) who received m	ore than		
	\$100,000 of compensation from the organiz	-				4				Form	<b>990</b> (2023)

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Form 990 (2023)

## THE AYN RAND INSTITUTE: THE CENTER FOR THE ADVANCEMENT OF OBJECTIVISM

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Pa	rt V	/111	Statement of Rev	/enu	ue					
			Check if Schedule O c	onta	ins a response	or note to any line	e in this Part VIII			
							<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
s s	1	а	Federated campaigns		1a					
ran			Membership dues							
ла С		с	Fundraising events		1c	145,961.				
ar <i>F</i>			Related organizations							
Contributions, Gifts, Grants and Other Similar Amounts		е	Government grants (contri	butic	ons) <b>1e</b>					
r Si		f	All other contributions, gifts, g	grants	s, and					
ibui			similar amounts not included	above	e 1f	30,857,743.				
ndr d O		g	Noncash contributions included in li	ines 1a	a-1f <b>1g</b> \$	5,756,481.				
<u> </u>		h	Total. Add lines 1a-1f				31,003,704.			
						Business Code				
e	2	а	CONFERENCE			611710	491,605.	· · · · · · · · · · · · · · · · · · ·		
ervi		b	TUITION INCOME			611710	361,626.	· · · · · ·		
n S /eni		c	BOOK			611710	15,256.	15,256.		
grar Bev		d	PROFESSIONAL OUTREAC	н		611710	500.	500.		
Program Service Revenue		e 4								
-			All other program service r Total. Add lines 2a-2f				868,987.			
	3		Investment income (includ							
	5						233,908.			233,908.
	4		Income from investment of							
	5		Royalties				22,635.			22,635.
	-				(i) Real	(ii) Personal	,			,
	6	а	Gross rents	6a	80,370.					
			Less: rental expenses	6b	0.					
			Rental income or (loss)	6c	80,370.					
		d	Net rental income or (loss)				80,370.			80,370.
	7	а	Gross amount from sales of		(i) Securities	(ii) Other				
			assets other than inventory	7a	5,764,753.					
		b	Less: cost or other basis							
ne				7b	5,837,685.					
Revenue				7c	-72,932.					
		d	Net gain or (loss)		·····		-72,932.	-72,932.		
Other	8	а	Gross income from fundraisin	ig eve	ents (not					
ō			including \$1							
			contributions reported on I							
		_	Part IV, line 18							
			Less: direct expenses			102,315.	-102,315.			-102,315.
			Net income or (loss) from f			·····	-102,315.			-102,315.
	9	а	Gross income from gaming							
		<b>h</b>	Part IV, line 19							
			Less: direct expenses Net income or (loss) from g							
			Gross sales of inventory, le							
	10	a	and allowances							
		h	Less: cost of goods sold							
			Net income or (loss) from s							
		-			or internety	Business Code				
snc	11	а	MISCELLANEOUS INCOME			611710	102,893.	102,893.		
nec		b					-			
ella		с								
Miscellaneous Revenue		d	All other revenue							
2			Total. Add lines 11a-11d				102,893.			
	12		Total revenue. See instruction				32,137,250.	898,948.	0.	234,598.
332009	9 12-	21-	23	_						Form <b>990</b> (2023)

#### THE AYN RAND INSTITUTE: THE CENTER FOR THE ADVANCEMENT OF OBJECTIVISM Part IX Statement of Functional Expenses

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Secti	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon			nplete column (A).	X
	not include amounts reported on lines 6b, 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				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	103,468.	103,468.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign		200 512		
	individuals. See Part IV, lines 15 and 16	370,513.	370,513.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,		240.004	41 000	100 000
	trustees, and key employees	577,383.	348,064.	41,230.	188,089.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and	CE0 11C	CAD C14	C 500	
	persons described in section 4958(c)(3)(B)	650,116.	643,614.	6,502.	250 160
7	Other salaries and wages	3,738,694.	3,401,538.	77,996.	259,160.
8	Pension plan accruals and contributions (include	67 000	E7 021	1 272	E 600
-	section 401(k) and 403(b) employer contributions)	67,902.	57,831.	4,372.	5,699.
9	Other employee benefits	339,235.	290,145.	20,763.	28,327.
10	Payroll taxes	337,177.	287,689.	19,361.	30,127.
11	Fees for services (nonemployees):				
	Management	151 060	14 770	104 000	10.000
b	Legal	151,860.	14,772.	124,282.	12,806.
	Accounting	210,894.	180,042.	12,084.	18,768.
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	1 540 210	1 260 507	1 1 .	01 111
	column (A), amount, list line 11g expenses on Sch 0.)	1,548,318.	1,360,597.	166,610.	21,111.
12	Advertising and promotion	135,647.	135,647.	10 060	22 22
13	Office expenses	386,955.	354,055.	10,062.	22,838.
14	Information technology	60,594.	50,961. 18,266.	8,765.	868.
15	Royalties	<u>18,266.</u> 58,317.	42,195.	12,670.	3,452.
16		376,707.	265,420.	75,919.	35,368.
17	Travel	570,707.	205,420.	75,919.	55,500.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	655,232.	645,705.	7,857.	1 670
19 00	Conferences, conventions, and meetings	000,202.	045,/05.	1,001.	1,670.
20	Interest				
21	Payments to affiliates Depreciation, depletion, and amortization	429,725.	368,287.	23,948.	37,490.
22		38,920.	33,230.	2,226.	3,464.
23	Insurance	50,920.	55,250.	2,220.	5,404.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A),				
~	amount, list line 24e expenses on Schedule 0.) BOOKS	116,749.	114,663.	4.	2,082.
a b	OUTREACH	107,448.	73,585.	14,996.	18,867.
	TAXES, LICENSES, FEES	53,303.	1,532.	22,578.	29,193.
c d	COMPUTER HARDWARE & EQU	22,389.	11,032.	11,357.	<u> </u>
		7,875.	6,352.	530.	993.
	All other expenses	10,563,687.	9,179,203.	664,112.	720,372.
<u>25</u> 26	Joint costs. Complete this line only if the organization	10,303,007.	5,11,2050		, 20, 512.
20					
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation. Check here				
	······································				Earm <b>990</b> (2022)

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Form 990 (2023)

Form 990 (2023)

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Form 990 (2023)

# THE AYN RAND INSTITUTE: THE CENTER FOR THE ADVANCEMENT OF OBJECTIVISM

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	n 990 (/ rt X	Balance Sheet		44-	25/0926 Page II
rdl					
		Check if Schedule O contains a response or note to any line in this Part X		<u></u>	
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	184,947.	1	35,946.
	2	Savings and temporary cash investments	6,766,911.	2	11,360,544.
	3	Pledges and grants receivable, net	275,330.	3	14,165,066.
	4	Accounts receivable, net	320,380.	4	13,877.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ŝ	7	Notes and loans receivable, net	5,000,000.	7	5,000,000.
Assets	8	Inventories for sale or use	281,552.	8	157,570.
Ÿ	9	Prepaid expenses and deferred charges	178,984.	9	123,739.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 2,237,567.			
	b	Less: accumulated depreciation 1, 517, 283.	1,252,734.	10c	720,284.
	11	Investments - publicly traded securities	70,906.	11	4,349.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	17,036,758.	15	22,420,225
	16	Total assets. Add lines 1 through 15 (must equal line 33)	31,368,502.	16	54,001,600
	17	Accounts payable and accrued expenses	1,044,861.	17	1,319,426.
	18	Grants payable		18	
	19	Deferred revenue	437,007.	19	303,711
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
Ě		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		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	2 002 120		0 F0F 100
		of Schedule D	2,892,130.	25	2,525,192.
	26	Total liabilities. Add lines 17 through 25	4,373,998.	26	4,148,329.
s		Organizations that follow FASB ASC 958, check here			
ЭС С		and complete lines 27, 28, 32, and 33.	26 072 460		26 556 252
alaı	27	Net assets without donor restrictions	<u>26,973,469.</u> 21,035.	27	26,556,353. 23,296,918.
а Р	28	Net assets with donor restrictions	21,035.	28	23,290,910.
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here			
P T	0	and complete lines 29 through 33.			
ŝ	29	Capital stock or trust principal, or current funds		29	
SS	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
et⊿	31	Retained earnings, endowment, accumulated income, or other funds	26,994,504.	31	49,853,271.
ž	32	Total net assets or fund balances	31,368,502.	32 33	54,001,600.
	33	Total liabilities and net assets/fund balances	51,500,502.	აა	Form <b>990</b> (2023

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Form 990 (2023)       THE ADVANCEMENT OF OBJECTIVISM       22-2570926       Page 12         Part XI       Reconciliation of Net Assets       X         Check if Schedule O contains a response or note to any line in this Part XI       X       X         1       Total revenue (must equal Part X, line 12)       1       32,137,250.         2       Total revenue (must equal Part X, line 25)       3       21,0,563,687.         3       Revenue less expenses. Subtract line 2 from line 1       3       21,573,563.         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       26,994,504.         5       1,182,889.       6		THE AYN RAND INSTITUTE: THE CENTER FOR				
Check if Schedule O contains a response or note to any line in this Part XI       X         1       Total revenue (must equal Part XI, column (A), line 12)       1       32, 137, 250.         2       Total expenses (must equal Part X, column (A), line 25)       3       21, 573, 563.         3       Revenue less expenses. Subtract line 2 from line 1       3       21, 573, 563.         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       26, 994, 504.         5       Dotated services and use of facilities       5       1, 182, 889.         6       7       Investment expenses       7         7       8       Prior period adjustments       6         9       Other changes in net assets or fund balances (explain on Schedule O)       9       102, 315.         10       Kassets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       49, 853, 271.         Part XII       Financial Statements and Reporting       X         7       7       7         9       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other         1       Accounting method asis, or both:       2a       X       X         1       Accounting method used to prepare the form 990:<	Form	990 (2023) THE ADVANCEMENT OF OBJECTIVISM	22-2	570926	Pag	<sub>ge</sub> 12
1       Total revenue (must equal Part VIII, column (A), line 12)       1       32,137,250.         2       Total expenses (must equal Part IX, column (A), line 25)       2       10,563,687.         3       21,573,563.       2       10,563,687.         4       26,994,504.       2       1,182,889.         6       6       7       1,182,889.         6       6       7       7         7       8       Prior period adjustments       6         9       Other changes in net assets or fund balances (explain on Schedule O)       9       102,315.         10       49,853,271.       7       8         9       Other changes in net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       10       49,853,271.         9       Other changes in net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       10       49,853,271.         9       Incerk if Schedule 0 contains a response or note to any line in this Part XII       X       X         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other         11       H eorganization's financial statements compiled or reviewed by an independent accountant?       Yes       No	Pa	rt XI Reconciliation of Net Assets				
2       Total expenses (must equal Part IX, column (A), line 25)       2       10, 563, 687.         3       Revenue less expenses. Subtract line 2 from line 1       3       21, 573, 563.         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       26, 994, 504.         5       Net unrealized gains (losses) on investments       6		Check if Schedule O contains a response or note to any line in this Part XI				X
2       Total expenses (must equal Part IX, column (A), line 25)       2       10, 563, 687.         3       Revenue less expenses. Subtract line 2 from line 1       3       21, 573, 563.         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       26, 994, 504.         5       Net unrealized gains (losses) on investments       6						
3       Revenue less expenses. Subtract line 2 from line 1       3       21,573,563.         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       26,994,504.         5       Net unrealized gains (losses) on investments       5       1,182,889.         6       0       7         7       8       7         8       9       0ther changes in net assets or fund balances (explain on Schedule 0)       9       102,315.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)       49,853,271.         Yes         Yes         Other changes in net assets on fund balances (explain on Schedule 0)         9       0ther changes in net assets and Reporting       X         Check if Schedule O contains a response or note to any line in this Part XII         Yes         Yes         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other       2a       X         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:       2a       X       2a       X       X         If "Yes	1	Total revenue (must equal Part VIII, column (A), line 12)	1	32,137	7,2	<u>50.</u>
4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       26,994,504.         5       Net unrealized gains (losses) on investments       5       1,182,889.         6       0       5       1,182,889.         7       8       6       6         7       8       7       8         9       Other changes in net assets or fund balances (explain on Schedule O)       9       102,315.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       49,853,271.         Yes         Prior period adjustments         add colspan="2">Account (B)         Part XII       Financial Statements and Reporting         Check if Schedule O contains a response or note to any line in this Part XII       X         Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other	2	Total expenses (must equal Part IX, column (A), line 25)	2			
5 Net unrealized gains (losses) on investments   6   7   6   7   8   9   9   10   10   10   10   10   10   10   10   10   10   10   11   12   12   13   14   15   15   16   16   17   18   19    10   10   10   10   10   10   11   12   12   12   13   14   14   15   15   16   16   17   18   19   10   10   10   10   10   11   12   12    13   14   14   15   15   16   16   17   17   18   19   10   10   10   10   11   12   12   13   14   14   15   15   15   16    16   17 <t< th=""><th>3</th><th>Revenue less expenses. Subtract line 2 from line 1</th><th>3</th><th></th><th></th><th></th></t<>	3	Revenue less expenses. Subtract line 2 from line 1	3			
6       Donated services and use of facilities       6         7       Investment expenses       7         8       Prior period adjustments       9         9       Other changes in net assets or fund balances (explain on Schedule O)       9       102,315.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       10       49,853,271.         Part XII       Financial Statements and Reporting       X       X         Check if Schedule O contains a response or note to any line in this Part XII       X       Yes         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other       2a       X         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       2b       X         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:       2b       X       2b       X         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:       2b       X       2b       X         If "Yes," check a box below to	4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			
7 Investment expenses 7   8 Prior period adjustments 9   9 Other changes in net assets or fund balances (explain on Schedule O) 9   10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10   Part XII Financial Statements and Reporting   Check if Schedule O contains a response or note to any line in this Part XII X   1 Accounting method used to prepare the Form 990: Cash   1 Accounting method used to prepare the Form 990: Cash   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   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 compiled or reviewed on a separate basis, consolidated basis, or both:   Separate basis Consolidated 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   b Were the organization financial statements and selection of an independent accountant?   If "Yes," theck a box below to indicate whether the financial statements for	5	Net unrealized gains (losses) on investments	5	1,182	2,8	89.
7 Investment expenses 7   8 Prior period adjustments 9   9 Other changes in net assets or fund balances (explain on Schedule O) 9   10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10   Part XII Financial Statements and Reporting   Check if Schedule O contains a response or note to any line in this Part XII X   1 Accounting method used to prepare the Form 990: Cash   1 Accounting method used to prepare the Form 990: Cash   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   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 compiled or reviewed on a separate basis, consolidated basis, or both:   Separate basis Consolidated 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   b Were the organization financial statements and selection of an independent accountant?   If "Yes," theck a box below to indicate whether the financial statements for	6	Donated services and use of facilities	6			
9 Other changes in net assets or fund balances (explain on Schedule O)   9 102,315.   10 49,853,271.   Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII The organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 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 Consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Consolidated basis Both consolidated and separate basis Consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Consolidated basis Consolidated basis Consolidated basis Both consolidated and separate basis Consolidated basis Consolidated basis Consolidated basis Both consolidated and separate basis Consolidated basis Consolidated basis Consolidated basis Social and basis Consolidated basis <	7		7			
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       10       49,853,271.         Part XII       Financial Statements and Reporting       X         Check if Schedule O contains a response or note to any line in this Part XII       X         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other         If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.       2a       X         1       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:       2b       X         1       Both consolidated and separate basis       Consolidated basis       Both consolidated and separate basis       2b       X         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:       2b       X       I         If "Yes," check a box below to indicate basis       Both consolidated and separate basis       2b       X       I         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:       2b       X       I         If "Yes," to kine 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	8	Prior period adjustments	8			
column (B)       10       49,853,271.         Part XII       Financial Statements and Reporting       X         Check if Schedule O contains a response or note to any line in this Part XII       X         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other         If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.       2a       X         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:       2a       X         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:       2b       X         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:       2b       X         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:       2b       X         If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?       2c       X         If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.       3a       <	9	Other changes in net assets or fund balances (explain on Schedule O)	9	102	2,3	15.
Part XII       Financial Statements and Reporting       X         Check if Schedule O contains a response or note to any line in this Part XII       X         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       Yes       No         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       2a       X         If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.       2a       X         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:       2b       X         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:       2b       X         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:       2b       X       Image: Separate basis       2c       X       Image: Separate basis       2c       X       <	10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
Check if Schedule O contains a response or note to any line in this Part XII   X   1   Accounting method used to prepare the Form 990:   Cash   X   Accrual   Other   If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.   2a   X   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   D   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, consolidated basis, or both:   Separate basis   X   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   Separate basis   Consolidated basis   Both consolidated and separate basis   consolidated basis, or both:   Separate basis   Separate basis   Consolidated basis   Both consolidated and separate basis   consolidated basis, or both:   Separate basis   Consolidated basis			10	49,853	3,2	<u>71.</u>
1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other         If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.       2a       X         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:       2a       X         Separate basis       Consolidated basis       Both consolidated and separate basis       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were addited on a separate basis       2b       X         Were the organization's financial statements audited by an independent accountant?       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were addited on a separate basis, consolidated basis, or both:       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were addited on a separate basis, consolidated basis, or both:       2b       X         Separate basis       X       Consolidated basis       Both consolidated and separate basis       2b       X         If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?       2c       X         If	Pa	rt XII Financial Statements and Reporting				
1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       Image: Cash       Image: Cash       X       Accrual       Other       Image: Cash       X       Image: Cash		Check if Schedule O contains a response or note to any line in this Part XII				
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.   2a   Were the organization's financial statements compiled or reviewed by an independent accountant?   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   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   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   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 on 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					Yes	No
2a       Were the organization's financial statements compiled or reviewed by an independent accountant?       2a       X         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:       2b       X         Separate basis       Consolidated basis       Both consolidated and separate basis       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis       2b       X         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:       2b       X         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:       2b       X         Separate basis       X       Consolidated basis       Both consolidated and separate basis       2b       X         If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?       2c       X         If the organization changed either its oversight process or selection process during the tax year, explain on 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       X	1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
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:       Image: Consolidated basis		If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Э.			
<ul> <li>separate basis, consolidated basis, or both:</li> <li>Separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Were the organization's financial statements audited by an independent accountant?</li> <li>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:</li> <li>Separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis, consolidated basis, or both:</li> <li>Separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Conso</li></ul>	2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
<ul> <li>Separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Were the organization's financial statements audited by an independent accountant?</li> <li>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:</li> <li>Separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Consolidated basis&lt;</li></ul>		If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
b       Were the organization's financial statements audited by an independent accountant?       2b       X         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:       2b       X         Separate basis       X       Image: Separate basis						
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:       Image: Consolidated basis, or both:         Image: Consolidated basis, or both:       Image: Consolidated basis, or both:       Image: Consolidated basis, or both:         Image: Consolidated basis, or both:       Image: Consolidated basis, or both:       Image: Consolidated basis, or both:         Image: Consolidated basis, or both:       Image: Consolidated basis, or both:       Image: Consolidated basis, or both:         Image: Consolidated basis, or both:       Image: Consolidated basis, or both:       Image: Consolidated basis, or both:         Image: Consolidated basis, or both:       Image: Consolidated basis, or both:       Image: Consolidated basis, or both:         Image: Consolidated basis, or both:       Image: Consolidated basis, or both:       Image: Consolidated basis, or both:         Image: Consolidated basis, or consolidated basis, or consolidated basis, or compilation of its financial statements and selection of an independent accountant?       Image: Consolidated basis, or consolidated basis, or consolidated basis, or consolidated basis, or complete basis, or						
consolidated basis, or both:       Separate basis       X       Consolidated basis       Both consolidated and separate basis         c       If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?       2c       X         If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.       Image: Comparize the organization required to undergo an audit or audits as set forth in the       Image: Comparize the organization changed either its oversight process or selection process during the tax year, explain on 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       Image: Comparize the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	b			2b	Х	<u> </u>
<ul> <li>Separate basis X Consolidated basis Both consolidated and separate basis</li> <li>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?</li> <li>If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.</li> <li>3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the</li> </ul>		If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
<ul> <li>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?</li> <li>If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.</li> <li>3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the</li> </ul>						
review, or compilation of its financial statements and selection of an independent accountant? <u>2c X</u> If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. <b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. <b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	С					
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the		review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<u> </u>
			dule O.			
	3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
		Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	b					
or audits, explain why on Schedule O and describe any steps taken to undergo such audits		or audits, explain why on Schedule O and describe any steps taken to undergo such audits				L

Form **990** (2023)

(Form 99)	of the Treasury		Public Cha omplete if the organ 494 At	OMB No. 1545-0047							
Internal Reve			Go to www.irs.gov/	1	Inspection						
Name of	the organizati			NSTITUTE: TH		ITER E	'OR		identification number		
Dort I	Baaaan			T OF OBJECTIV		·			2-2570926		
Part I				(All organizations must c			ee instruction	IS.			
1 2 3 4 5	A church, con A school des A hospital or A medical res city, and stat	nvention of chi cribed in <b>sect</b> i a cooperative search organiza e:	urches, or associatio ion 170(b)(1)(A)(ii). ( hospital service orga ation operated in cor	For lines 1 through 12, cl on of churches described Attach Schedule E (Form anization described in se njunction with a hospital llege or university owned	in sectio 990).) ection 170 described	n 170(b)(1 (b)(1)(A)(ii in sectio	i). n 170(b)(1)(A				
<b>u</b>	•	•			or operation	bu by u go	von montar a				
6 7 X 8 9	section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)										
10 🗌	university: 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.										
11 12 a b c d e	<ul> <li>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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.</li> <li>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.</li> <li>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.</li> <li>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.</li> <li>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.</li> </ul>										
f Ente	er the number			nally integrated supportir							
		<u> </u>	about the supporte	d organization(s).							
	(i) Name of supp		(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi		(v) Amount o	-	(vi) Amount of other		
	organizatior	1		above (see instructions))	Yes	No	support (see ir	istructions)	support (see instructions)		
Total									1		

#### THE AYN RAND INSTITUTE: THE CENTER FOR THE ADVANCEMENT OF OBJECTIVISM

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	(			-	OBJECTIVISM	22-2570926
Part II	Support Schedule for	r Orga	anizations Describ	ed ir	n Sections 170(b)(1)(A)(i	v) 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 fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support			-							
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grants.")	8821512.	16652850.	17283939.	<u>14527711.</u>	31003704.	88289716.				
2	Tax revenues levied for the organ-										
	ization'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			1 = 0 0 0 0 0 0							
	Total. Add lines 1 through 3	8821512.	16652850.	17283939.	14527711.	31003704.	88289716.				
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)						22769604.				
	Public support. Subtract line 5 from line 4.						65520112.				
		(-) 0010	(1-) 0000	(-) 0001	(.1) 0000	(-) 0000	(0) Tabal				
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021 17283939.	(d) 2022	(e) 2023	(f) Total				
	Amounts from line 4	0021312.	10052050.	17203535.	1452//1110	510057040	00205710.				
0	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties,	12,402.	3,217.	18/ 523	124,436.	336 913	661,491.				
0	and income from similar sources Net income from unrelated business	12,402.	5,217.	101,525.	124,450.	330,913.	001,491.				
9											
	activities, whether or not the business is regularly carried on										
10	Other income. Do not include gain										
10	or loss from the sale of capital										
	assets (Explain in Part VI.)	4,906.	311.939.	476,427.	98.273.	102.893.	994,438.				
11	<b>Total support.</b> Add lines 7 through 10						89945645.				
	Gross receipts from related activities,	etc. (see instructio	ons)				,761,610.				
	First 5 years. If the Form 990 is for th										
	organization, check this box and stop	-									
Sec	ction C. Computation of Publi	c Support Per	centage								
	Public support percentage for 2023 (I			column (f))		14	72.84 %				
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	67.69 %				
16a	33 1/3% support test - 2023. If the o	organization did no	t check the box o	n line 13, and line <sup>-</sup>	14 is 33 1/3% or m	ore, check this bo					
	stop here. The organization qualifies	as a publicly supp	orted organization				X				
b	b 33 1/3% support test - 2022. 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 qual										
17a	17a 10% -facts-and-circumstances test - 2023. 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 <b>stop here.</b> Explain in Part VI how the organization										
	meets the facts-and-circumstances te	-		• • • •							
b	10% -facts-and-circumstances test	0					10% or				
	more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> 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	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a						
						Schedule A	(Form 990) 2023				

332022 12-21-23

## THE AYN RAND INSTITUTE: THE CENTER FOR

le A	(Form 990	) 2023

# Schedule A (Form 990) 2023 THE ADVANCEMENT OF OBJECTIVISM Part III Support Schedule for Organizations Described in Section 509(a)(2)

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qualify under the tests listed below, please complete Part II.)	
(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	on fails to

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>1</b> Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization'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>b</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						
<b>c</b> 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)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses	;					
acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
11 Net income from unrelated business activities not included on 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.)						
<b>13</b> Total support. (Add lines 9, 10c, 11, and 12.)						
<b>14 First 5 years.</b> If the Form 990 is for	•			•		
check this box and stop here		-				
Section C. Computation of Pub					<del> </del>	
<b>15</b> Public support percentage for 2023	(line 8, column (f), d	livided by line 13,	column (f))		15	%
16 Public support percentage from 202 Section D. Computation of Inve					16	%
17 Investment income percentage for 2	2023 (line 10c, colu	mn (f), divided by I	ine 13, column (f))		17	%
18 Investment income percentage from					18	%
19a 33 1/3% support tests - 2023. If th					33 1/3%, and li	ne 17 is not
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2022. If th						3%, and
line 18 is not more than 33 1/3%, ch	-					
20 Private foundation. If the organizat						
332023 12-21-23					Sched	lule A (Form 990) 2023
		15	5			

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# THE AYN RAND INSTITUTE: THE CENTER FOR

THE ADVANCEMENT OF OBJECTIVISM

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1

Yes No

## Part IV Supporting Organizations

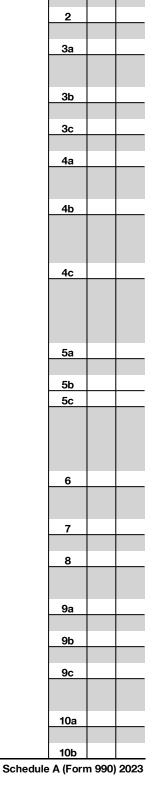
Schedule A (Form 990) 2023

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

### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **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)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *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.*
- **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)? *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.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).
- **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? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If* "Yes." *complete Part I of Schedule L (Form 990).*
- **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))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **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)? *If* "Yes," *answer line 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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#### THE AYN RAND INSTITUTE: THE CENTER FOR

#### ADVANCEMENT OF OBJECTIVISM THE Schedule A (Form 990) 2023 Part IV Supporting Organizations (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? 11 a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a b A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide <u>detail in </u>Part VI 11c Section B. Type I Supporting Organizations Yes No Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or 1 more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? 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 officers, directors, or trustees were allocated among the 1 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 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? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, upervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 1 or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed 1 the supported organization(s) Section D. All Type III Supporting Organizations Yes No

			163	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?	1		
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? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, 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? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

## 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	ee instructions).
--	-------------------

The organization satisfied the Activities Test. Complete line 2 below. а

b		The organization	is the parent o	f each of its sup	oported organizations	6. Complete line 3 below.
---	--	------------------	-----------------	-------------------	-----------------------	---------------------------

с	The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instructions).	

- 2 Activities Test. Answer lines 2a and 2b 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? 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.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? 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.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b 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? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard. 332025 12-21-23

3b Schedule A (Form 990) 2023

2a

2b

3a

No

Yes

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Sche	edule A (Form 990) 2023 THE ADVANCEMENT OF OBJE			22-2570926 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportir	ng Orgar	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyir	ng trust on	Nov. 20, 1970 ( explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	t complete	Sections A through E.	
Sect	ion 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		
Sect	ion 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):			
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		
е	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 0.015 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 0.035.	6		
_7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 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		
_				

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7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2023

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### THE AYN RAND INSTITUTE: THE CENTER FOR THE ADVANCEMENT OF OBJECTIVISM

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Sche	Schedule A (Form 990) 2023 THE ADVANCEMENT OF OBJECTIVISM 22-2570926 Page 7					
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Sect	on D - Distributions				Current Year	
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported				
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
6	Other distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	e organization is responsive				
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2023 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2023	าร	(iii) Distributable Amount for 2023	
1	Distributable amount for 2023 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2023 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2023					
а	From 2018					
b	From 2019					
C	From 2020					
d	From 2021					
e	From 2022					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
h	Applied to 2023 distributable amount					
i	Carryover from 2018 not applied (see instructions)					
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2023 from Section D,					
	line 7: \$					
a	Applied to underdistributions of prior years					
b	Applied to 2023 distributable amount					
C	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2023, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2023. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2024. Add lines 3j and 4c.					
8	Breakdown of line 7:					
	Excess from 2019					
	Excess from 2020					
	Excess from 2021					
	Excess from 2022					
	Excess from 2023					
				-	L	

Schedule A (Form 990) 2023

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THE AYN RAND INSTITUTE: THE CENTER FOR         Schedule A (Form 990) 2023       THE ADVANCEMENT OF OBJECTIVISM       22-2570926       Page 8         Part VI       Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;         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.)
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:
EMPLOYEE RETENTION CREDIT
2019 AMOUNT: \$ 4,906.
2020 AMOUNT: \$ 311,939.
2021 AMOUNT: \$ 476,427.
2022 AMOUNT: \$ 98,273.
2023 AMOUNT: \$ 15,083.
REFUNDS/REIMBURSMENTS
2023 AMOUNT: \$ 87,810.
332028       12-21-23       Schedule A (Form 990) 2023         20       20         0)90428       149072       709260       2023.05070       THE AYN RAND INSTITUTE: 70926

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	SCHEDULE D Form 990) Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990,				
(Forr	n 990)	2023			
	ment of the Treasury I Revenue Service	Open to Public Inspection			
	e of the organization	Employer identification number			
	<b>- - -</b>	THE ADVANCEMENT OF	OBJECTIVISM	22-2570926	
Pa	tl Organiza	ations Maintaining Donor Advise	d Funds or Other Similar Funds or A	Accounts. Complete if the	
	organizatio	n answered "Yes" on Form 990, Part IV, lin			
			(a) Donor advised funds	(b) Funds and other accounts	
1		nd of year			
2		f contributions to (during year)			
3		f grants from (during year)			
4		t end of year			
5	-		writing that the assets held in donor advised fu		
6			exclusive legal control? dvisors in writing that grant funds can be used		
0	•		r donor advisor, or for any other purpose confe		
	• •			ľ m	
Pa	tll Conserv	ation Easements. Complete if the ord	ganization answered "Yes" on Form 990, Part I		
1		servation easements held by the organization		,	
	Preservation	of land for public use (for example, recrea	tion or education) Preservation of a his	storically important land area	
	Protection o	f natural habitat	Preservation of a ce	rtified historic structure	
	Preservation	n of open space			
2	Complete lines 2a	through 2d if the organization held a qualif	ied conservation contribution in the form of a c		
	day of the tax year	·.		Held at the End of the Tax Year	
а	Total number of co	onservation easements		2a	
b	•				
С			ucture included on line 2a	2c	
d		vation easements included on line 2c acqu			
_					
3		vation easements modified, transferred, rel	eased, extinguished, or terminated by the orga	inization during the tax	
4	year		amont is located		
4 5		where property subject to conservation eas tion have a written policy regarding the per			
5	0	orcement of the conservation easements it	<b>U</b>	Yes No	
6	,		holds? handling of violations, and enforcing conservat		
Ū		· · · · · · · · · · · · · · · · · · ·			
7	Amount of expens	es incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation e	easements during the year	
8	Does each conser	vation easement reported on line 2d above	satisfy the requirements of section 170(h)(4)(B	)(i)	
	and section 170(h)	(4)(B)(ii)?		Yes No	
9	In Part XIII, describ	be how the organization reports conservation	on easements in its revenue and expense state	ement and	
	balance sheet, and	d include, if applicable, the text of the footn	note to the organization's financial statements t	that describes the	
De		ounting for conservation easements.	Art Historical Tracquires or Other	Similar Acasta	
Pa		-	Art, Historical Treasures, or Other	Similar Assets.	
-		the organization answered "Yes" on Form			
18	-		8, not to report in its revenue statement and ba		
			plic exhibition, education, or research in further ncial statements that describes these items.		
h	· •		8, to report in its revenue statement and baland	ce sheet works of	
D D	-		exhibition, education, or research in furtherand		
		ng amounts relating to these items.			
	•	0		\$	
				<u>.</u>	
2			asures, or other similar assets for financial gain		
		unts required to be reported under FASB A			
а	-		-	\$	
LHA	For Paperwork Re	eduction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 2023	
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			21		

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		ANCEMENT O								Page <b>2</b>
Par	t III Organizations Maintaining C								contin	ued)
3	Using the organization's acquisition, accessi	on, and other record	s, check a	ny of the f	ollowing that	make sig	nificant u	ise of its		
	collection items (check all that apply).									
а	X Public exhibition	C			hange progra					
b	X Scholarly research	e		ther						
c	X Preservation for future generations									
4	Provide a description of the organization's co							se in Part	XIII.	
5	During the year, did the organization solicit o							_	7.2	<b>v</b> .
Dar	to be sold to raise funds rather than to be ma <b>LIV</b> Escrow and Custodial Arran								Yes	X No
T ai	reported an amount on Form 990, Pa		te if the or	ganization	answered "Y	es" on F	orm 990,	Part IV, II	ne 9, or	
10	Is the organization an agent, trustee, custodi		diany for co	ontribution	s or other ass	ote not ir				
Id			-						Yes	No
h	on Form 990, Part X?							∟	_ 165	
b		and complete the lo	nowing tat	JIE.					Amount	
•	Reginning balance						1c		, ano and	
	Beginning balance									
	Additions during the year									
e 4	Distributions during the year						1e 1f			
20	Ending balance Did the organization include an amount on F								Yes	No
	If "Yes," explain the arrangement in Part XIII.						yr	····· L	1 165	
Par								<u></u>		
		(a) Current year		or year	(c) Two years			ears hack	(e) Four	years back
10	Designing of year balance		(6)11	or year						yours buck
	Beginning of year balance									
	Contributions									
	Net investment earnings, gains, and losses									
	Grants or scholarships									
е	Other expenditures for facilities									
-	and programs									
	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr			column (a)	) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С		_%								
	The percentages on lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse	ession of the organiza	ation that a	are held ar	nd administere	ed for the	•		Г	
	organization by:									Yes No
	(i) Unrelated organizations?								3a(i)	
									3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza								3b	
4	Describe in Part XIII the intended uses of the		wment fur	nds.						
Par	t VI Land, Buildings, and Equipm					Deut V II	10			
	Complete if the organization answere				1					
	Description of property	(a) Cost or o			or other		cumulate	d	<b>(d)</b> Book	value
		basis (investr	nent)	Dasis	(other)	aep	reciation			
	Land									
	Buildings			4 -	1 5 6 5		0 0 1			404
	Leasehold improvements				<u>1,567.</u>		$\frac{06,14}{75,54}$			<u>,424.</u>
	Equipment				5,229.		75,52			,707.
	Other				0,771.		35,61			<u>,153.</u>
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	<u>X, line 10c</u>	, column	<u>(B))</u>					,284.
							;	Schedule	D (Form	990) 2023

# THE AYN RAND INSTITUTE: THE CENTER FOR

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
I) Financial derivatives			, ,
Closely held equity interests			
) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o	n 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 en	d-of-year market value
(1)			•
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))         Part IX       Other Assets			
Complete if the organization answered "Yes" o	n Form 990 Part IV line	11d See Form 990 Part X line 15	
	escription	······································	(b) Book value
(1) 457(B) PARTICIPANT INTERES		g	701,406
(2) BENEFICIAL INTEREST IN INS		5	51,243
(3) DEPOSITS AND OTHER ASSETS	Olumen		43,246
(4) ARI RESERVE FUND			16,834,440
			219,059
			111,895
	<u>ד</u> ח		1,183,794
			85,231
			2,981,471
			22,420,225
otal. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities	<u>(B))</u>		
Complete if the organization answered "Yes" o	n Form 000 Part IV lina	110 or 11f Soc Form 990 Part X line 26	
(a) Description of lightlity	onn 590, i ait iv, ille	The or the ocention and, Fait A, ille 20	(b) Book value
(1) Federal income taxes	m		701 406
(2) 457(B) PARTICIPANT INTERES	1		701,406
(3) GIFT ANNUITY OBLIGATION	C		1,328,419
(4) OPERATING LEASE LIABILITIE	5		495,367
(5)			
(5) (6)			
(6)			
(6) (7)			2,525,192

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

Schedule D (Form 990) 2023

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	edule D (Form 990) 2023 THE ADVANCEMENT OF OBJE			Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stat		e per Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	le 12a.	I	
1	· · · · ·			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1		
а	<b>5</b> ( <i>'</i> ,			
b				
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d			
3	Subtract line <b>2e</b> from line <b>1</b>			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.,	)		
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII Reconciliation of Expenses per Audited Financial Sta	atements With Expen	ses per Return	
	Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12,</i> <b>rt XII</b> Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line	tements With Expen	ses per Return	
	rt XII Reconciliation of Expenses per Audited Financial Sta	etements With Expen	ses per Return	
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 990, Part IV, lin	etements With Expen	ses per Return	
<b>Pa</b>	rt XII         Reconciliation of Expenses per Audited Financial Sta           Complete if the organization answered "Yes" on Form 990, Part IV, lin           Total expenses and losses per audited financial statements	e 12a.	ses per Return	
Pa 1 2	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities	atements With Expen	ses per Return	
Pa 1 2 a	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments	atements With Expen           12a.	ses per Return	
<b>Pa</b> 1 2 a b	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities	2a           2b           2c	ses per Return	
<b>Pa</b> 1 2 a b	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a           2b           2c           2d	ses per Return1	
Pa 1 2 b c d	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d	Itements With Expen           12a.           2a           2b           2c           2d	ses per Return	
Pa 1 2 b c d e	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	Itements With Expen           12a.           2a           2b           2c           2d	ses per Return	
Pa 1 2 b c d 3	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	Itements With Expen           12a.           2a           2b           2c           2d	ses per Return	
Pa 1 2 b c d e 3 4	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a           2b           2c           2d           2d	ses per Return	
Pa 1 2 b c d e 3 4	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a           2b           2c           2d	1       1       2e       3	
Pa 1 2 b c d e 3 4	rt XII       Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a         2b         2c         2d         4a         4b	ses per Return         1         2e         3         4c	

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.

### PART III, LINE 1A:

THE INSTITUTE HAS COLLECTIONS THAT ARE HOUSED IN THE AYN RAND ARCHIVES, A

SPECIAL COLLECTION OF THE AYN RAND INSTITUTE, WHICH INCLUDE AYN RAND

PAPERS AS WELL AS OTHER ARTIFACTS OF HISTORICAL SIGNIFICANCE AND WORKS OF

ARTS. IN ACCORDANCE WITH ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE

UNITED STATES OF AMERICA, THESE ITEMS ARE NOT CAPITALIZED ON THE FINANCIAL

STATEMENTS.

PART III, LINE 4:

THE AYN RAND ARCHIVES CONSIST OF TWO MAJOR HOLDINGS: THE AYN RAND PAPERS

AND THE SPECIAL COLLECTIONS.

THE AYN RAND PAPERS COMPRISES THE PERSONAL PAPERS AND EFFECTS LEFT BY AYN

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Schedule D (Form 990) 2023

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THE AYN RAND INSTITUTE: THE CENTER FOR         Schedule D (Form 990) 2023       THE ADVANCEMENT OF OBJECTIVISM       22-2570926 Page 5         Part XIII       Supplemental Information (continued)
RAND AT HER DEATH IN 1982. THIS COLLECTION INCLUDES MANUSCRIPTS, NOTES AND
OUTLINES, BUSINESS AND PERSONAL CORRESPONDENCE, PHILOSOPHIC JOURNALS,
RESEARCH FILES, MARGINALIA, CLIPPINGS, PHOTOGRAPHS, CALENDARS, ADDRESS
BOOKS, PHONOGRAPH RECORDS, MEMORABILIA, AND RECORDED INTERVIEWS AND
SPEECHES. ALSO INCLUDED IS MICROFILM OF THE AYN RAND PAPERS AT THE LIBRARY
OF CONGRESS. THESE PAPERS ARE DRAFTS, TYPESCRIPTS AND GALLEYS OF HER
NOVELLA, ANTHEM, AND HER THREE NOVELS, WE THE LIVING, THE FOUNTAINHEAD,
AND ATLAS SHRUGGED, PLUS SOME ADMINISTRATIVE MATERIAL. THE SPECIAL
COLLECTIONS IS AN ONGOING COLLECTION OF AYN RAND-RELATED MATERIAL ACQUIRED
SINCE HER DEATH. IT INCLUDES RECORDINGS OF AYN RAND'S RADIO PROGRAMS,
LECTURES AND INTERVIEWS, ORAL HISTORY INTERVIEWS, RUSSIAN ACADEMIC AND
LEGAL DOCUMENTS, TRANSLATIONS OF HER WORK, BIOGRAPHICAL AND PHILOSOPHICAL
ARTICLES ABOUT AYN RAND, REVIEWS AND PRESS MENTIONS, SCREENPLAYS,
CORRESPONDENCE, OBJECTIVIST PERIODICALS, AND MATERIALS FROM OBJECTIVIST
ORGANIZATIONS.
THE MISSION OF THE AYN RAND ARCHIVES IS TO ACQUIRE, PRESERVE AND MAKE
AVAILABLE AYN RAND'S REMAINING PAPERS AND RELATED DOCUMENTS TO SERIOUS
SCHOLARS AND GENERAL WRITERS. BY ACQUIRING HOLDINGS, CONDUCTING RESEARCH
AND PROVIDING ACCESS, THE ARCHIVES PRESERVES AND MAKES AVAILABLE THE
PHYSICAL EVIDENCE OF AYN RAND'S ACHIEVEMENT AND INFLUENCE.
PART X, LINE 2:
ARI IS A PUBLIC CHARITY THAT HAS OBTAINED AN EXEMPTION FROM FEDERAL INCOME

TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND UNDER

SIMILAR CODE SECTIONS FOR EACH STATE. ACCORDINGLY, NO PROVISION HAS BEEN

MADE FOR FEDERAL OR STATE INCOME TAXES. THE INSTITUTE IS SUBJECT, HOWEVER,

TO FEDERAL AND CALIFORNIA INCOME TAXES ON UNRELATED BUSINESS TAXABLE

INCOME AS STIPULATED IN INTERNAL REVENUE CODE SECTION 511 AND REGULATION
Schedule D (Form 990) 2023

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SECTION 1.511.

Schedule D (Form 990) 2023

Part XIII Supplemental Information (continued)

THE INSTITUTE ANNUALLY EVALUATES TAX POSITIONS AS PART OF THE PREPARATION OF ITS EXEMPT TAX RETURN. THIS PROCESS INCLUDES AN ANALYSIS OF WHETHER TAX POSITIONS THE INSTITUTE TAKES WITH REGARD TO A PARTICULAR ITEM OF INCOME OR DEDUCTION WOULD MEET THE DEFINITION OF AN UNCERTAIN TAX POSITION UNDER CURRENT ACCOUNTING GUIDANCE. THE INSTITUTE BELIEVES THAT ITS TAX POSITIONS ARE APPROPRIATE BASED ON CURRENT FACTS AND CIRCUMSTANCES. THE INSTITUTE'S POLICY IS TO RECOGNIZE INTEREST ACCRUED RELATED TO UNRECOGNIZED TAX BENEFITS IN INTEREST EXPENSE AND PENALTIES IN OPERATING EXPENSES. AT SEPTEMBER 30, 2024, THE INSTITUTE DID NOT HAVE ANY UNRECOGNIZED TAX BENEFITS. THE INSTITUTE IS NO LONGER SUBJECT TO US FEDERAL, STATE, OR LOCAL INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR FISCAL YEARS ENDED BEFORE 2020.

# THE AYN RAND INSTITUTE: THE CENTER FOR THE ADVANCEMENT OF OBJECTIVISM

Part XIII	Supplemental Information (continued)							
Part IX Other Assets. See Form 990, Part X, line 15.								
	(a) Description	(b) Book value						
DUE FRO	M/TO ARI RUST	140,030. 68,410.						
COHEN T	RUST	68,410.						
		,						

Schedule D (Form 990)

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SCHEDULE F							
(Form 990)	Complete if the	organization a	nswered "Yes" on Form 990, Part IV, I	ine 14b, 15, o	or 16.	2023	
Department of the Treasury Internal Revenue Service	Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.						
Name of the organization THE AYN RAND IN	STITUTE:	THE CEI	NTER FOR			lentification number	
THE ADVANCEMENT					22-257		
Part I General Info	rmation on A	ctivities Out	side the United States. Complete	e if the organ	ization answei	red "Yes" on	
Form 990, Part I							
-	-		ds to substantiate the amount of its gran the selection criteria used to award the g			Yes X No	
2 For grantmakers. Deso United States.	cribe in Part V the	e organization's	procedures for monitoring the use of its	grants and ot	her assistance	outside the	
3 Activities per Region. (T	he following Part	I, line 3 table ca	an be duplicated if additional space is ne	eded.)			
(a) Region	(b) Number of offices in the region	employees, agents, and independent contractors	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a pro describe	vity listed in (d gram service, specific type (s) in the regio	expenditures for and investments	
		in the region					
EAST ASIA AND THE PACIFIC - AUSTRALIA,							
BRUNEI, BURMA,			ECCAY COMMECT DETREC			1 450	
CAMBODIA, EUROPE (INCLUDING			ESSAY CONTEST PRIZES			1,450.	
ICELAND & GREENLAND)							
- ALBANIA, ANDORRA,							
AUSTRIA, BELGIUM			ESSAY CONTEST PRIZES			200.	
SUB-SAHARAN AFRICA -			EBSAT CONTEST TRIZES			200.	
ANGOLA, BENIN,							
BOTSWANA, BURKINA,							
FASO			ESSAY CONTEST PRIZES			2,850.	
RUSSIA AND							
NEIGHBORING STATES			ESSAY CONTEST PRIZES			100.	
SOUTH ASIA			ESSAY CONTEST PRIZES			300.	
3 a Subtotal	0	0				4,900.	
<b>b</b> Total from continuation	0	_				•	
sheets to Part I		0				0.	
c Totals (add lines 3a and 3b)	0	0				4,900.	
,,		•					

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2023

LHA 332071 11-29-23

22-2570926

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any

recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	<b>(h)</b> Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MIDDLE EAST AND	TO PROVIDE LOCAL					
		NORTH AFRICA -	OUTREACH THROUGH					
			SPEAKING EVENTS, FREE					
		DJIBOUTI, EGYPT,	BOOKS AND ESSAY	143,000.	WIRE	0.		
			TO PROVIDE LOCAL					
			OUTREACH THROUGH					
			SPEAKING EVENTS, FREE					
		SOUTH AMERICA	BOOKS AND ESSAY	110,000.	WIRE	0.		
			LOCAL OUTREACH					
			THROUGH SPEAKING			_		
		EUROPE	EVENTS AND MEETUPS	6,555.	WIRE	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax

exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023

THE AYN RAND INSTITUTE: THE CENTER FOR THE ADVANCEMENT OF OBJECTIVISM

22-2570926

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

Part III can be duplicated if	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash	(g) Description of noncash assistance	(h) Method of valuation
					assistance		(book, FMV, appraisal, other)
	NORTH AMERICA -						
	CANADA AND						
	MEXICO, BUT NOT						
SCHOLARSHIP	THE UNITED STATES	4	3,784.	WIRE	٥.		
	EUROPE (INCLUDING						
	ICELAND &						
	GREENLAND) -						
SCHOLARSHIP	ALBANIA, ANDORRA,	52	55,916.	WIRE	0.		
	SOUTH AMERICA -						
	ARGENTINA,						
	BOLIVIA, BRAZIL,						
SCHOLARSHIP	CHILE, COLUMBIA,	3	4,542.	WIRE	0.		
	MIDDLE EAST AND						
	NORTH AFRICA -						
	ALGERIA, BAHRAIN,						
SCHOLARSHIP	DJIBOUTI, EGYPT,	12	10,860.	WIRE	0.		
	RUSSIA AND						
	NEIGHBORING						
	STATES - ARMENIA,						
SCHOLARSHIP	AZERBIJAN,	6	4,249.	WIRE	0.		
	SUB-SAHARAN						
	AFRICA - ANGOLA,						
	BENIN, BOTSWANA,						
SCHOLARSHIP	BURKINA, FASO	2	951.	WIRE	0.		
	EUROPE (INCLUDING						
	ICELAND &						
	GREENLAND) -						
STUDY GRANT	ALBANIA, ANDORRA,	1	19,200.	WIRE	0.		
	EAST ASIA AND THE						
SCHOLARSHIP	PACIFIC	3	5,274.	WIRE	0.		
SCHOLARSHIP	WEST ASIA	1	1,331.	WIRE	0.		

Schedule F (Form 990) 2023

Page 3

THE	AYN	RAND	INS	ттт	UTE:	THE	CENTER	FOR
THE	ADVA	ANCEME	ENT (	OF	OBJECT	IVIS	SM	

Schedu	LIE F (Form 990) 2023 THE ADVANCEMENT OF OBJECTIVISM	22-2570926	Page 4
Part	IV Foreign Forms		9
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2023

THE	AYN	RAND	INSTI	TUTE:	THE	CENTER	FOR
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Schedule F (Form 990) 2023 THE ADVANCEMENT OF OBJECTIVISM	22-2570926 Page 5
Part V Supplemental Information	
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (	) (accounting method; amounts of
investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (account	
(estimated number of recipients), as applicable. Also complete this part to provide any addition	onal information. See instructions.
PART I, LINE 2:	
PROCEDURES VARY DEPENDING ON THE TYPE OF GRANT. SCHO	LARSHIP AND ESSAY
CONTEST PRIZES DO NOT REQUIRE MONITORING, AS THERE AR	E NO ONGOING
CONDITIONS AFTER THE SCHOLARSHIP/PRIZE IS AWARDED.	
PART II, COLUMN (D):	
(A) REGION:	
MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIB	OUTI, EGYPT,
(D) PURPOSE OF GRANT: TO PROVIDE LOCAL OUTREACH THROU	GH SPEAKING EVENTS,
FREE BOOKS AND ESSAY CONTESTS, STUDENT CLUBS	
REGION: SOUTH AMERICA	
(D) PURPOSE OF GRANT: TO PROVIDE LOCAL OUTREACH THROU	GH SPEAKING EVENTS,
FREE BOOKS AND ESSAY CONTESTS, STUDENT CLUBS	

332075 11-29-23

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctivities	OMB No. 1545-0047			
(Form 990)		e organization answered "Yes" on organization entered more than \$15	2023							
Department of the Treasury Internal Revenue Service		Attach to Form 990 o	or Forn	n 990 <sup>.</sup>	-EZ.		Open to Public Inspection			
Name of the organization		<u>o www.irs.gov/Form990 for instruc</u> RAND INSTITUTE:			ne latest information		identification number			
		ANCEMENT OF OBJECT				22-25				
Part I Fundrais required to	complete this part	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, li	ne 17. Form 990	)-EZ filers are not			
<ul> <li>a Mail solicitat</li> <li>b Internet and</li> <li>c Phone solicitat</li> <li>d In-person so</li> <li>2 a Did the organization</li> <li>key employees list</li> </ul>	1       Indicate whether the organization raised funds through any of the following activities. Check all that apply.         a       Mail solicitations       e       Solicitation of non-government grants         b       Internet and email solicitations       f       Solicitation of government grants         c       Phone solicitations       g       Special fundraising events									
compensated at le	•	, , ,		0						
(i) Name and addres or entity (func		(ii) Activity	(iii) fundr have ci or con contribu	ustody itrol of	(iv) Gross receipts from activity	(v) Amount pa to (or retained l fundraiser listed in col. (	by) to (or retained by)			
			Yes	No						
		n is registered or licensed to solicit c		utions	or has been notified	it is exempt from	n registration			
or licensing.					or has been notified	it is exempt nor				

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990) 2023

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Schedule G	990	12023	

# THE AYN RAND INSTITUTE: THE CENTER FOR THE ADVANCEMENT OF OBJECTIVISM

22-2570926 Page 2

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-FZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro	oss income on Form 990-	-EZ, lines 1 and 6b. List e	events with gross receipt	ts greater than \$5,000.		
			(a) Event #1 GALA	<b>(b)</b> Event #2	(c) Other events NONE	(d) Total events (add col. (a) through		
Ð			(event type)	(event type)	(total number)	- col. <b>(c)</b> )		
Revenue	1	Gross receipts	145,961.			145,961.		
	2	Less: Contributions	145,961.			145,961.		
	3	Gross income (line 1 minus line 2)						
	4	Cash prizes						
	5	Noncash prizes						
Expenses		Rent/facility costs						
Direct Ex	7	Food and beverages	51,620.			51,620.		
Δ	8	Entertainment	11,642.			11,642.		
		Other direct expenses				<u>11,642.</u> 39,053.		
		Direct expense summary. Add lines 4 through			<u>102,315.</u> -102,315.			
	11 Net income summary. Subtract line 10 from line 3, column (d)							
Pa	rt I		answered "Yes" on Form	1 990, Part IV, line 19, or i	reported more than			
Revenue		\$15,000 on Form 990-EZ, line 6a.	(a) Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))		
Reve	1	Gross revenue						
ses	2	Cash prizes						
Expenses	3	Noncash prizes						
Direct I		Rent/facility costs						
	5	Other direct expenses						
			Yes %	<b>Yes</b> %	<b>Yes</b> %			
	6	Volunteer labor	No	No	Νο			
	7							
	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?
b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?
b If "Yes," explain: \_\_\_\_\_\_

332082 09-13-23

Schedule G (Form 990) 2023

Yes

No

No

Coh	THE AYN RAND INSTITUTE: THE CENTER FOR	2570920	
		Yes	5 Page 3
11 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 No
13	Indicate the percentage of gaming activity conducted in:		
á	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	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🗌 Yes	No No
ł	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	c If "Yes," enter name and address of the third party:		
	Nama		
	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 No
ł	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
De	organization's own exempt activities during the tax year \$		
Fa	<b>art IV</b> Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	rt III, lines 9	96, 106,
3300	083 09-13-23 Sched	ule G (Forn	n 990) 2023
0020	35		, 2023

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Part IV	(Form 990) Supplemental Inform	mation	(contir	nued)			JM			Page 4
			1001101							
332084 04-01-2	23								Schedule G (F	orm 990)

332084 04-01-23

SCHEDULE I (Form 990)		Go	irants and Oth vernments, an ete if the organization	nd Individual	ls in the Ŭni	ted States			1545-0047 <b>23</b>		
Department of the Treasury		p-		Attach to Forn		,		Open to	o Public		
Internal Revenue Service				.gov/Form990 for	the latest inform	ation.		Inspe	ection		
Name of the organization		AND INSTI		CENTER FOR	ર			Employer identificati			
			OBJECTIVIS	M				22-25	70926		
	ation on Grants a			· · · · ·							
1 Does the organization			-			-					
2 Describe in Part IV the	ed to award the grants or assistance?										
Part II Grants and Oth	ner Assistance to	Domestic Organiz		Governments.	Complete if the org	anization answered "Y	es" on Form 990, Part	t IV, line 21, for any			
<b>1 (a)</b> Name and address or governn	•	(b) EIN	<b>(c)</b> IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of or assistant			

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

3 Enter total number of other organizations listed in the line 1 table ...

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

### THE AYN RAND INSTITUTE: THE CENTER FOR

Schedule I (Form 990) 2023

### 3 THE ADVANCEMENT OF OBJECTIVISM

22-2570926 Page 2

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 non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
TUDY GRANTS	1	5,000.	0.		
CHOLARSHIPS	49	54,343.	0.		
SSAY PRIZES	112	44,125.	0.		
			(I-)		
Part IV Supplemental Information. Provide the informat	ion required in Part I, line	e 2; Part III, column	(b); and any other ad	iditional information.	
PART I, LINE 2:					

PROCEDURES VARY DEPENDING ON THE TYPE OF GRANT. SCHOLARSHIPS AND ESSAY

CONTEST PRIZES DO NOT REQUIRE MONITORING, AS THERE ARE NO ONGOING

CONDITIONS AFTER THE SCHOLARSHIP/PRIZE IS AWARDED. LONG-TERM GRANTS SUCH AS

STUDY GRANTS ARE REVIEWED AT LEAST ANNUALLY, DEPENDING ON THE GRANT TERMS.

GRANTEES ARE REQUIRED TO SUBMIT REGULAR PROGRESS REPORTS, TYPICALLY ON A

QUARTERLY BASIS.

SC	HEDULE J	Compensation Information		OMB No. 1	545-004	47
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	ດງ	)
		Compensated Employees		20	Ľ٦	)
Depa	tment of the Treasury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe	ction	
Nan	e of the organization			identificatio		nber
		THE ADVANCEMENT OF OBJECTIVISM	22-2	257092	6	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a	Check the appropri	ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
	Part VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c	harter travel Housing allowance or residence for perso	nal use			
	Travel for com					
		ation and gross-up payments				
	Discretionary	spending account Personal services (such as maid, chauffer	ur, chef)			
_						
b	•	on line 1a are checked, did the organization follow a written policy regarding payment or				
-		provision of all of the expenses described above? If "No," complete Part III to explain		1b		
2	-	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
~	la d'acta e datata de la com					
3		ny, of the following the organization used to establish the compensation of the organization's				
		ector. Check all that apply. Do not check any boxes for methods used by a related organization of the CEO/Eventium Director, but eveloping a part III				
	X Compensation	ation of the CEO/Executive Director, but explain in Part III.				
		77				
	·		ommittoo			
		ther organizations <b>X</b> Approval by the board or compensation c	ommittee			
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 re					
а	-	e payment or change-of-control payment?		4a		x
b		eive payment from a supplemental nonqualified retirement plan?				X
С	-	eive payment from an equity-based compensation arrangement?				X
	-	hes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	,					
	Only section 501(c	)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the r					
а	-			5a		X
b	Any related organiz	ation?		5b		X
		or 5b, describe in Part III.				
6	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the r	et earnings of:				
а	The organization?			<u>6a</u>		X
		ation?				X
	If "Yes" on line 6a o	or 6b, describe in Part III.				
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
		nes 5 and 6? If "Yes," describe in Part III		7		X
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th	ne			
				8		X
9		id the organization also follow the rebuttable presumption procedure described in				
		1 53.4958-6(c)?				
For	Paperwork Reduct	on Act Notice, see the Instructions for Form 990.	Schee	dule J (Forn	n <b>990</b> )	2023

LHA 332111 11-06-23

Schedule J (Form 990) 2023

THE AYN RAND INSTITUTE: THE CENTER FOR THE ADVANCEMENT OF OBJECTIVISM

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Page 2

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) TAL TSFANY	(i)	384,480.	100,000.	0.	3,000.	10,291.	497,771.	0.
PRESIDENT & CEO, BOARD MEMBER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CARLA SILK	(i)	209,809.	25,000.	0.	3,000.	7,257.	245,066.	0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ONKAR GHATE	(i)	194,709.	25,000.	0.	3,000.	10,211.	232,920.	0.
CHIEF PHIL. OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ELAN JOURNO	(i)	157,348.	20,000.	0.	3,000.	7,753.	188,101.	0.
VP OF CONTENT & SR. FELLOW	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KEITH LOCKITCH	(i)	137,447.	15,000.	0.	3,000.	8,829.	164,276.	0.
VP OF ED. & SR. FELLOW	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) GERALDINE YUMPING	(i)	134,892.	7,500.	0.	3,000.	6,943.	152,335.	0.
CONTROLLER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2023

### 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.

Schedule J (Form 990) 2023

SCHEDULE L		Trar	nsaction	s V	Vith	Inte	erested	P	ersons			O	//B No. <sup>-</sup>	1545-00	)47
(Form 990)	Complete if the	-	nization answ 28b, or 28c; o					-	ine 25a, 25b, 26 40b	, 27, 2	8a,		2	02	23
Department of the Treasury							orm 990-EZ.					0	pen to	Pub	lic
Internal Revenue Service	Go t	o www	.irs.gov/Form	990 fo	or inst	ruction	ns and the lat	est	information.				spect		
Name of the organization			ND INST				IE CENTE	ER	FOR		-	ident		on nu	mber
Dout L Execce			EMENT O									709	26		
	Benefit Trans														
	f the organization						ne 25a or 25b	; or	Form 990-EZ, Pa	art V, I	ine 40	b.	()	0.0	
1 (a) Name of disquali	ified person		lationship betv person and or			inea	(0	<b>c)</b> De	escription of tran	sactio	'n			es	No
<u>(1)</u>													+		
(2)													-		
<u>(3)</u> (4)															
(5)															
(6)														-	
2 Enter the amount o	f tax incurred by	the ora:	anization man	aners	or disc	ualified	d nersons duri	ina t	he vear under				-		
		0		0			•	0	,		\$				
3 Enter the amount o															
						, a <b>_</b> a.					¥				
Part II Loans to	and/or From	n Inter	rested Pers	ons											
Complete if	f the organization	answe	red "Yes" on F	orm 9	90-EZ	Part \	/, line 38a, or l	Forn	n 990, Part IV, Iir	ne 26;	or if tł	ne orga	nizati	on	
reported ar	amount on Forn	n 990, F	Part X, line 5, 6	, or 22	2.							-			
(a) Name of	(b) Relation		(c) Purpose		an to or		) Original	(f	) Balance due		In	(h) Ap by bo			Vritten
interested person	with organiz	zation	tion organization? principal amount default? Co						comm		agree	ement?			
				То	From					Yes	No	Yes	No	Yes	No
(1)															
(2)															<u> </u>
(3)															
_(4)															
(5)															—
(6)															──
(7)															<u> </u>
(8)															—
_(9)															──
(10)															
Total Part III Grants o	or Assistance	Bono	fiting Intor		Dor	<u></u>	\$								
			-												
	f the organization								(al) T	- 4		1.	N D		
(a) Name of intere	sted person		) Relationship nterested pers the organiza	on an		(0	c) Amount of assistance		<b>(d)</b> Type assistan				) Purp assista		
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
(7)															
(8)															
(9)															
(10)															
For Paperwork Reducti	ion Act Notice, s	ee the	Instructions f	or Foi	rm 990	) or 99	0-EZ.				Sche	dule L	. (Forr	n 990	) 2023

# THE AYN RAND INSTITUTE: THE CENTER FOR THE ADVANCEMENT OF OBJECTIVISM

22-2570926 Page 2

Part IV Business Transactions Involv	ing Interested Persons				
Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a, 2	8b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz reven	
				Yes	No
(1)YARON BROOK	CHAIRMAN OF THE BOA	192,511.	CONSULTING		X
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
Part V Supplemental Information	-			<u> </u>	
Provide additional information for resp	onses to questions on Schedule L. See	instructions.			
SCH L, PART IV, BUSINESS T	RANSACTIONS INVOLVIN	IG INTERESTE	D PERSONS:		
(A) NAME OF PERSON: YARON	BROOK				
(B) RELATIONSHIP BETWEEN I	NTERESTED PERSON AND	) ORGANIZATI	ON:		

### CHAIRMAN OF THE BOARD

(D) DESCRIPTION OF TRANSACTION: CONSULTING AND SPEAKING SERVICES WITH

BROOK MEDIA

Schedule L (Form 990) 2023

Schedule L (Form 990) 2023

332132 11-30-23

### SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

(Fo	rm 990)					20	23	
		anizations		n Form 990, Part IV, lines 2	9 or 30.	LU		
	ment of the Treasury I Revenue Service Go to www.ir:	s.gov/Form	Attach to Form 9 990 for instruction	90. Is and the latest informatio	n.	Open to Inspe		2
Name	e of the organization THE AYN RAND			E CENTER FOR		identificatio	on num	ber
	THE ADVANCEM					2-2570		
Par								
		(a)	(b)	(c)		(d)		
		Check if	Number of contributions or	Noncash contribution amounts reported on		of determin	•	
		applicable		Form 990, Part VIII, line 1g	noncash cor	ntribution ar	nounts	
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	15	5,756,481.	FMV			
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 organiz	zation during	the tax year for co	ontributions	•			
	for which the organization completed Form 82	83, Part V, D	onee Acknowledge	ement 29				
	<b>°</b>		Ū				Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least 3 years from the date of		•••••					
	exempt purposes for the entire holding period?	?	·			30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	oolicy that re	quires the review o	of any nonstandard contribut	tions?	31		Х
32a	Does the organization hire or use third parties	or related or	ganizations to solic	it, process, or sell noncash				
	contributions?		•					х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) fo	a type of property	for which column (a) is cheo	cked,			
	describe in Part II.							
For F	Paperwork Reduction Act Notice, see the Inst	ructions for	Form 990.		Sched	ule M (Forn	n 990) :	2023

				RAND					CENT	ER FOI	
Schedule M	(Form 990) 2023						OBJE				22-2570926 Page 2
Fartin	is reporting in Part this part for any ac	t I. colun	nn (b). tr	ne numbe	e the in r of cor	forma ntribut	tion requir tions, the r	red by Pa number o	rt I, lines 3 f items rec	0b, 32b, a eived, or a	nd 33, and whether the organization combination of both. Also complete
	this part for any ac	Julional	morma	uon.							
332142 09-11-2	3										Schedule M (Form 990) 202
							45				

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



 Name of the organization
 THE AYN RAND INSTITUTE:
 THE CENTER FOR

 THE ADVANCEMENT OF OBJECTIVISM

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PHILOSOPHY OF OBJECTIVISM.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

TO PURSUE THEIR OWN HAPPINESS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

AMERICA, ASIA, THE MIDDLE EAST, AND AUSTRALIA. ARI ALSO SENT SPEAKERS

TO ADDRESS STUDENTS AND GENERAL AUDIENCES ALL OVER THE WORLD.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

COMMUNITY WHILE EXPANDING AND DIVERSIFYING ITS EDUCATIONAL OFFERINGS.

FINANCIAL ASSISTANCE REMAINED AVAILABLE TO ELIGIBLE PARTICIPANTS,

OFFSETTING SOME OR ALL THEIR PROGRAM COST.

THE ARU GRADUATE CENTER, OUR ADVANCED TRAINING PROGRAM, CONTINUED TO

OFFER INSTRUCTION TO COMMITTED STUDENTS, AS WELL AS CAREER GUIDANCE,

MENTORING, AND FINANCIAL ASSISTANCE. THIS CENTER IS DEDICATED TO

HIGH-POTENTIAL INDIVIDUALS AIMING TOWARD AN INTELLECTUAL CAREER.

NEW IDEAL, WHICH IS ARI'S JOURNAL, PUBLISHED DOZENS OF ARTICLES AND

PODCASTS IN FY2024, APPLYING OBJECTIVISM TO EXPLAIN MAJOR ISSUES IN THE

CULTURE AND PROMOTING THE INSTITUTE'S OTHER WORK. THE WEEKLY PODCASTS

ON SOCIAL MEDIA FEATURE OUR INTELLECTUAL TEAM AND JUNIOR FELLOWS,

COMMENTING ON THE IDEAS OF AYN RAND AND THEIR APPLICATION TO IMPORTANT

ISSUES OF TODAY. ARI ALSO PUBLISHED FOUR BOOKS OF PHILOSOPHIC WRITINGS

BY OUR SCHOLARS.

 SEVERAL
 NEW
 COURSES
 WERE
 ADDED
 TO
 THE
 CATALOG
 OF
 ON-DEMAND
 CONTENT
 IN

 For Paperwork
 Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990) 2023

 LHA
 332211
 11-14-23
 A C

Name of the organization THE AYN RAND INSTITUTE: THE CENTER FOR THE ADVANCEMENT OF OBJECTIVISM	Employer identification number 22-2570926
FY2024. ARI'S RECORDED COURSE VIDEOS RECEIVED THOUSANDS OF	HOURS OF
VIEWS ACROSS ALL PLATFORMS: WEBSITE, ARU MOBILE APP, AND Y	OUTUBE.
FORM 990, PART VI, SECTION B, LINE 11B:	
AN ELECTRONIC COPY OF THE 990 IS PROVIDED TO EACH MEMBER O	
BEFORE IT IS FILED WITH THE INTERNAL REVENUE SERVICE. WE	
OF THE PRIOR YEAR RETURN FOR SIGNIFICANT CHANGES AND REVIE	W OUR FINANCIAL
STATEMENTS.	
FORM 990, PART VI, SECTION B, LINE 12C:	
EACH OFFICER & DIRECTOR ANNUALLY SIGNS AN ACKNOWLEDGMENT S	TATING THAT THEY
HAVE READ, UNDERSTAND, AND AGREE TO COMPLY WITH THE CONFLI	CT OF INTEREST
POLICY. GOVERNANCE COMMITTEE HAS A REVIEW PROCEDURE FOR BU	SINESS DEALINGS
AMONG BOARD MEMBERS AND OFFICERS.	
FORM 990, PART VI, SECTION B, LINE 15A:	
FOR THE EXECUTIVE DIRECTOR, THE BOARD DETERMINES THE SALAR	Y, CONSIDERING

FORM 990, PART VI, SECTION C, LINE 19:

FORM 990, GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS ARE

47

PROVIDED UPON REQUEST.

AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE ON THE

ORGANIZATION'S WEBSITE.

FORM 990, PART IX, LINE 11G, OTHER FEES:

OUTSIDE SERVICES:

PROGRAM SERVICE EXPENSES

332212 11-14-23

1,360,597.

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Name of the organization THE AYN RAND INSTITUTE: THE CENTER FOR THE ADVANCEMENT OF OBJECTIVISM	Employer identification number
MANAGEMENT AND GENERAL EXPENSES	166,610.
FUNDRAISING EXPENSES	21,111.
TOTAL EXPENSES	1,548,318.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,548,318.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
FUNDRAISING EXPENSES	102,315.
FORM 990, PART XII, LINE 2C	
PROCESS THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF TH	HE AUDIT, OF ITS
FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT AC	COUNTANT HAS NOT
CHANGED FROM THE PRIOR YEAR.	
332212 11-14-23	Schedule O (Form 990) 202

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service Name of the organization Part I Identification	on THE AYN RAND	Go to www.irs.gov/Form990 fo	res" on Form 990, Part IV, lin th to Form 990. <u>r instructions and the latest</u> TER FOR	ne 33, 34, 35b, 36, t information.	or 37.	Employer ide		3 ublic ion
Name, addr	(a) ress, and EIN (if applicable) disregarded entity	(b) Primary activity	(c) Legal domicile (state c foreign country)	(d)	me End-of-year a	ussets Dire	<b>(f)</b> ect controlling entity	g
	on of Related Tax-Exempt Organiz	ations. Complete if the organization	answered "Yes" on Form 990	), Part IV, line 34, b	ecause it had one o	r more related tax	exempt	
	(a) le, address, and EIN elated organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controllin entity	g cont	<b>g)</b> 512(b)(13) rolled tity? <b>No</b>
ANTHEM FOUNDATION SCHOLARSHIP - 91- DRIVE #600, SANTA	2145352, 6 HUTTON CENTRE	EDUCATION GRANTS	CALIFORNIA	501(C)(3)	LINE 12A, I N	/A	x	
AYN RAND MUSEUM A	ND ARCHIVES FOUNDATION	HOUSE ARCHIVAL COLLECTION OF AYN RAND	CALIFORNIA	501(C)(3)	LINE 12A, I N	/A	X	
		_						

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2023

# THE AYN RAND INSTITUTE: THE CENTER FOR

### Schedule R (Form 990) 2023 THE ADVANCEMENT OF OBJECTIVISM

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

organizationo troatoù ao a pa	······································	,										
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)		j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate itions?	Code V-UBI amount in box 20 of Schedule	Gene mana part	eral or aging ner?	Percentage ownership
		country)		sections 512-514)		455615	Yes	No	K-1 (Form 1065)	Yes	No	
	1											
	1											
										1		
	1											
	1											
	1											
	1		1									

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.

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(C) Legal domicile (state or foreign	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
		country)				400010		Yes	No
	1								
	1								

### THE AYN RAND INSTITUTE: THE CENTER FOR

THE ADVANCEMENT OF OBJECTIVISM

### Schedule R (Form 990) 2023

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					
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?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х	
	Gift, grant, or capital contribution to related organization(s)	1b		Х	
	Gift, grant, or capital contribution from related organization(s)	1c		Х	
	Loans or loan guarantees to or for related organization(s)	1d	X		
	Loans or loan guarantees by related organization(s)	1e		Х	
f	Dividends from related organization(s)	1f		Х	
g	Sale of assets to related organization(s)	1g		Х	
	Purchase of assets from related organization(s)	1h		Х	
i	Exchange of assets with related organization(s)	1i		Х	
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х	
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		Х	
	Performance of services or membership or fundraising solicitations for related organization(s)	11	X		
	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х	
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X		
	Sharing of paid employees with related organization(s)	10	X		
р	Reimbursement paid to related organization(s) for expenses	1p		Х	
q	Reimbursement paid by related organization(s) for expenses	1q	X		
r	Other transfer of cash or property to related organization(s)	1r	X		
S	Other transfer of cash or property from related organization(s)	1s		X	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.				

(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
ANTHEM FOUNDATION FOR OBJECTIVIST (1) SCHOLARSHIP	R	370.	FMV
(2) AYN RAND MUSEUM AND ARCHIVES FOUNDATION	D	5,000,000.	AGREEMENT
(3)			
<u>(4)</u>			
(5)			
_(6)			

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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.

(-)	(1-)	(-)	(-1)	1		(6)	()	0		(:)	(1)		(1.)
(a)	(b)	(c)	(d)	(€ Are	<b>a</b> ll	(f)	(g)	(ľ	1)	(i)	(j)		(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income	partnei 501(i org	rs sec.	Share of	Share of	Dispr tior allocat	opor- iate	Code V-UBI	Genera	al or P iina	Percentage
of entity		(state or foreign	excluded from tax under	org		total			ions?	of Schedule K-1	partne	er?	ownership
		country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Yes	No	income	assets	Yes	No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Yes I	NO	
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												+	

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## Part VII Supplemental Information

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

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