FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL						
OMB Number:	3235- 0104					
Estimated average burden						
hours per response:	0.5					

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Stagno Christopher		Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 05/17/2022 3. Issuer Name and Ticker or Trading Symbol Aspen Technology, Inc. [AZPN]							
(Last) C/O ASPEN	(First) I TECHNOL	(Middle)			4. Relationship of Reporting Issuer (Check all applicable)	, ,,		5. If Amendment, Date of Original Filed (Month/Day/Year)		
20 CROSBY DRIVE			Director Officer (give title below)	10% Owner Other (specify below)		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting				
(Street) BEDFORD	MA	01730	,		SVP, Chief Accour	nting Officer		Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)								
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)			Į i	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Owner Form: I (D) or In (I) (Insti	Direct Ownership (Instr. 5)				
Common Stock										
	ock				238	Ι)			
	ock				238 • Securities Beneficiants, options, converti	lly Own	ed			
1. Title of Deri		(e.g.		s, warrai	Securities Beneficia nts, options, converti	Ily Own	ed		6. Nature of Indirect Beneficial Ownership (Instr. 5)	

Explanation of Responses:

Remarks:

/s/ F.G. Hammond, attorney-in-fact

05/17/2022

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).