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

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

2009

Open to Public Inspection

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

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010

- B** Check if applicable:
- Address change
 - Name change
 - Initial return
 - Terminated
 - Amended return
 - Application pending

C Name of organization
ALVIN AILEY DANCE FOUNDATION INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
405 WEST 55TH STREET

City or town, state or country, and ZIP + 4
NEW YORK, NY 10019

D Employer identification number
13-2584273

E Telephone number
(212) 405-9000

G Gross receipts \$ 105,285,609

F Name and address of principal officer
SHARON GERSTEN LUCKMAN
405 WEST 55TH STREET
NEW YORK, NY 10019

H(a) Is this a group return for affiliates? Yes No

H(b) Are all affiliates included? Yes No
If "No," attach a list (see instructions)

H(c) Group exemption number

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

J Website: WWW ALVINAILEY ORG

K Form of organization Corporation Trust Association Other

L Year of formation 1958 **M** State of legal domicile NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE MISSION OF ALVIN AILEY DANCE FOUNDATION IS TO FURTHER THE PIONEERING WORK OF ALVIN AILEY BY ESTABLISHING AN EXTENDED CULTURAL COMMUNITY WHICH PROVIDES DANCE PERFORMANCES, TRAINING AND COMMUNITY PROGRAMS FOR ALL PEOPLE		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	33
	5 Total number of employees (Part V, line 2a)	5	647
	6 Total number of volunteers (estimate if necessary)	6	122
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	111,113
b Net unrelated business taxable income from Form 990-T, line 34	7b	-3,432	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	9,458,190	10,564,613
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	19,791,499	17,894,979
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,375,529	8,292,281
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-84,291	-417,947
		31,540,927	36,333,926
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	841,316	878,382
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15,142,339	14,909,474
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) 1,663,601		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	14,714,562	12,659,888
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	30,698,217	28,447,744	
19 Revenue less expenses Subtract line 18 from line 12	842,710	7,886,182	
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	139,023,657	147,871,751
	21 Total liabilities (Part X, line 26)	19,816,538	19,721,866
22 Net assets or fund balances Subtract line 21 from line 20	119,207,119	128,149,885	

Part II Signature Block

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

Sign Here

Signature of officer: ***** Date: 2011-05-12

PAMELA ROBINSON TREASURER & CFO
Type or print name and title

Paid Preparer's Use Only

Preparer's signature: MARTIN GREIF Date: _____ Check if self-employed

Firm's name (or yours if self-employed), address, and ZIP + 4: RSM MCGLADREY INC, 1185 AVENUE OF THE AMERICAS, NEW YORK, NY 100362602

Preparer's identifying number (see instructions): _____ EIN: _____ Phone no: (212) 372-1000

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

Part III Statement of Program Service Accomplishments**1** Briefly describe the organization's mission

THE MISSION OF ALVIN AILEY DANCE FOUNDATION IS TO FURTHER THE PIONEERING WORK OF ALVIN AILEY BY ESTABLISHING AN EXTENDED CULTURAL COMMUNITY WHICH PROVIDES DANCE PERFORMANCES, TRAINING AND COMMUNITY PROGRAMS FOR ALL PEOPLE AS IMPORTANT AS ITS ARTISTIC AND EDUCATIONAL MISSION, THIS PERFORMING ARTS ORGANIZATION PLAYS A SOCIAL ROLE, USING THE BEAUTY AND HUMANITY OF THE AFRICAN-AMERICAN HERITAGE AND OTHER CULTURES TO UNITE PEOPLE OF ALL RACES, AGES AND BACKGROUNDS

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

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

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

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 11,083,814 including grants of \$) (Revenue \$ 8,623,864)

ALVIN AILEY AMERICAN DANCE THEATER - FOUNDED IN 1958, ALVIN AILEY AMERICAN DANCE THEATER (AAADT) IS ONE OF THE MOST BELOVED AND INFLUENTIAL DANCE COMPANIES IN THE WORLD SINCE ITS INCEPTION, THE COMPANY HAS PERFORMED IN 71 COUNTRIES ON 6 CONTINENTS FOR AN ESTIMATED 23 MILLION PEOPLE AROUND THE GLOBE THE MISSION OF THE AILEY ORGANIZATION IS TO FURTHER THE PIONEERING WORK OF ALVIN AILEY THROUGH DANCE PERFORMANCES, TRAINING, EDUCATIONAL AND COMMUNITY PROGRAMS FOR ALL PEOPLE THE ORGANIZATION PLAYS A VITAL SOCIAL ROLE, USING THE BEAUTY AND HUMANITY OF THE AFRICAN-AMERICAN HERITAGE AND OTHER CULTURES TO UNITE PEOPLE OF ALL RACES, AGES, AND BACKGROUNDS OVER ITS FIFTY-TWO YEAR HISTORY, THE COMPANY HAS EARNED A REPUTATION AS ONE OF THE MOST ACCLAIMED INTERNATIONAL AMBASSADORS OF AMERICAN CULTURE, PROMOTING THE UNIQUENESS OF THE AFRICAN-AMERICAN CULTURAL EXPERIENCE AND THE PRESERVATION AND ENRICHMENT OF AMERICAN MODERN DANCE AAADT REMAINS DEDICATED TO THE PRESENTATION OF IMPORTANT AMERICAN DANCE WORKS FROM THE PAST, AS WELL AS TO SUPPORTING THE CREATION AND PRESENTATION OF NEW WORKS BY BOTH ESTABLISHED AND EMERGING CHOREOGRAPHERS ALVIN AILEY AMERICAN DANCE THEATER'S 30 DANCERS ARE SOME OF THE MOST TALENTED AND VERSATILE IN THE WORLD A TYPICAL AAADT SEASON INCLUDES AN INTERNATIONAL TOUR, A U S TOUR TO OVER 20 CITIES, AND A FIVE-WEEK NEW YORK CITY HOME SEASON AT NEW YORK CITY CENTER, WHERE THE COMPANY HAS APPEARED ANNUALLY SINCE 1972

4b (Code) (Expenses \$ 1,408,841 including grants of \$) (Revenue \$ 715,326)

AILEY II - AILEY II WAS FOUNDED IN 1974 IN RESPONSE TO MR AILEY'S DUAL CONCERN FOR THE DEVELOPMENT OF YOUNG ARTISTS AND NEW DANCE AUDIENCES UNDER THE ARTISTIC DIRECTION OF FORMER ALVIN AILEY AMERICAN DANCE THEATER DANCER SYLVIA WATERS, THE COMPANY IS COMPRISED OF 12 OF THE AILEY SCHOOL'S MOST TALENTED FELLOWSHIP STUDENTS OVER THE PAST 36 YEARS, AILEY II HAS BECOME ONE OF THE MOST POPULAR DANCE COMPANIES IN THE COUNTRY TRAVELING TO CITIES LARGE AND SMALL TO EXPOSE DIVERSE AUDIENCES TO AN EXTENSIVE REPERTORY OF MODERN DANCE CLASSICS AND NEW WORKS THE COMPANY PRESENTS A POWERFUL DANCE AESTHETIC, ABLY COMBINING THE ENTHUSIASM AND TALENT OF THE NATION'S BEST YOUNG DANCERS WITH THE INNOVATION AND CREATIVITY OF TODAY'S MOST GIFTED EMERGING CHOREOGRAPHERS IN ADDITION TO ITS DYNAMIC PERFORMANCES, AILEY II PRESENTS EDUCATION AND OUTREACH PROGRAMS IN COMMUNITIES THAT MIGHT NOT OTHERWISE HAVE OPPORTUNITIES TO EXPERIENCE LIVE DANCE AILEY II ANNUALLY TOURS TO MORE THAN 45 CITIES ACROSS THE COUNTRY

4c (Code) (Expenses \$ 8,115,084 including grants of \$ 878,382) (Revenue \$ 6,481,089)

AILEY EDUCATION AND OUTREACH PROGRAMS - THROUGH THE AILEY SCHOOL AND ITS EXTENSIVE ARTS IN EDUCATION PROGRAMS, THE ORGANIZATION IS COMMITTED TO BRINGING DANCE INTO CLASSROOMS AND COMMUNITIES HERE IN NEW YORK CITY AND ACROSS THE COUNTRY FOUNDED IN 1969, THE AILEY SCHOOL IS AN ACCREDITED INSTITUTIONAL MEMBER OF THE NATIONAL ASSOCIATION OF SCHOOLS OF DANCE AND SERVES AS THE OFFICIAL SCHOOL OF THE ALVIN AILEY AMERICAN DANCE THEATER THE AILEY SCHOOL IS AMONG THE MOST DIVERSE DANCE PROGRAMS IN THE NATION, WITH STUDENTS FROM AROUND THE WORLD, REPRESENTING A BROAD SPECTRUM OF CULTURAL BACKGROUNDS RENOWNED FOR ITS EXCEPTIONAL TRAINING, THE SCHOOL OFFERS MORE THAN 300 CLASSES IN A WIDE RANGE OF DANCE TECHNIQUES EACH WEEK FOR STUDENTS OF ALL AGES THE SCHOOL'S FELLOWSHIP PROGRAM PROVIDES MORE THAN 300 FELLOWSHIPS ANNUALLY TO TALENTED STUDENTS WHO WOULD OTHERWISE BE UNABLE TO PURSUE PROFESSIONAL TRAINING SEVENTY PERCENT OF THIS FINANCIAL ASSISTANCE GOES TO MINORITY STUDENTS LONG BEFORE "ARTS-IN-EDUCATION" WAS A COMMONLY USED TERM, ALVIN AILEY SENT HIS DANCERS INTO SCHOOLS AND INVITED YOUNG PEOPLE TO PERFORMANCES MR AILEY BELIEVED THAT "DANCE IS FOR EVERYBODY," AND WAS ESPECIALLY COMMITTED TO USING THE POWER OF DANCE TO ENHANCE THE LIVES OF AT-RISK CHILDREN FOR MORE THAN 50 YEARS, THE AILEY ORGANIZATION HAS PIONEERED EDUCATIONAL ACTIVITIES THAT MAKE A LASTING, POSITIVE IMPACT ON YOUNG PEOPLE AT CRITICAL JUNCTURES IN THEIR DEVELOPMENT AILEY'S INNOVATIVE PROGRAMS FOR INNER-CITY YOUTH INCLUDE AILEYCAMP (A SUMMER PROGRAM FOR AT-RISK YOUTH), IN-SCHOOL AND AFTER SCHOOL DANCE EDUCATION PROGRAMS, AND LECTURE/DEMONSTRATIONS THAT REACH OVER 100,000 YOUNG PEOPLE EACH YEAR

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**

(Expenses \$ 2,106,977 including grants of \$) (Revenue \$ 2,186,459)

4e **Total program service expenses** \$ 22,714,716

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> <input checked="" type="checkbox"/>	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? <input checked="" type="checkbox"/>	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> <input checked="" type="checkbox"/>		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i> <input checked="" type="checkbox"/>		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> <input checked="" type="checkbox"/>		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> <input checked="" type="checkbox"/>		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> <input checked="" type="checkbox"/>	Yes	
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</i> <input checked="" type="checkbox"/>	Yes	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>		
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		
	• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part X.</i>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> <input checked="" type="checkbox"/>	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <input checked="" type="checkbox"/>	Yes	No
	<i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i> <input checked="" type="checkbox"/>		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i> <input checked="" type="checkbox"/>	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? <i>If "Yes," complete Schedule F, Part II</i> <input checked="" type="checkbox"/>		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S? <i>If "Yes," complete Schedule F, Part III</i> <input checked="" type="checkbox"/>		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		No

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable		
1a	148		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
1c			
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return		
2a	647		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	Yes	
2b			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	Yes	
3a			
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	Yes	
3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		No
4a			
b	If "Yes," enter the name of the foreign country: _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
5a			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5b			
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		No
6a			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
6b			
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	Yes	
7a			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7c			
d	If "Yes," indicate the number of Forms 8282 filed during the year		
7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7f			
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
7g			
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
7h			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
8			
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
9b			
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
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?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?		No
6	Does the organization have members or stockholders?		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		No
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

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

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		No
10b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	Yes	
13	Does the organization have a written whistleblower policy?	Yes	
14	Does the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed NY
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization P PAMELA ROBINSON 405 WEST 55TH STREET NEW YORK, NY 10019 (212) 405-9000

1b Total	3,053,719	0	228,568
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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **▶**13

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
OPUS 3 ARTISTS 470 PARK AVE SO NEW YORK, NY 10016	AGENT	332,198
SPECTRUM BUILDING SERVICES INC 300 EAST 42ND STREET NEW YORK, NY 10017	CLEANING	293,056
OBERLANDER GROUP 143 REMSEN STREET COHOES, NY 12047	CONSULTANT	220,097
STAGE CALL CORPORATION 5248 SOUTH DESERT VIEW DRIVE SUITE APACHE JUNCTION, AZ 85120	TRANSPORTATION	203,838
4 WALL ENTERTAINMENT - EAST 2 EMPIRE BLVD MOONACHIE, NJ 07074	EQUIPMENT RENTALS	189,644

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶**5

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a				
	b	Membership dues 1b				
	c	Fundraising events 1c	3,594,343			
	d	Related organizations 1d				
	e	Government grants (contributions) 1e	688,855			
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	6,281,415			
	g	Noncash contributions included in lines 1a-1f \$ <u>403,297</u>				
	h	Total. Add lines 1a-1f ▶		10,564,613		
Program Service Revenue	2a	PERFORMANCE FEES	900,099	9,223,597	9,223,597	
	b	TUITION & TEACHING FEE	900,099	7,802,512	7,802,512	
	c	STUDIO INCOME	531,120	597,431	486,318	111,113
	d	STUDENT FEES	900,099	152,229	152,229	
	e	SCHOOL TICKET SALES	900,099	119,210	119,210	
	f	All other program service revenue				
	g	Total. Add lines 2a-2f ▶		17,894,979		
	3	Investment income (including dividends, interest and other similar amounts) ▶		2,216,267		2,216,267
4	Income from investment of tax-exempt bond proceeds ▶					
5	Royalties ▶		94,269		94,269	
6a	(i) Real					
	(ii) Personal					
	b	Less rental expenses				
	c	Rental income or (loss)				
d	Net rental income or (loss) ▶					
7a	(i) Securities		73,946,953			
	(ii) Other		4,500			
	b	Less cost or other basis and sales expenses	67,870,406			
	c	Gain or (loss)	6,076,547			-533
d	Net gain or (loss) ▶		6,076,014		6,076,014	
8a	Gross income from fundraising events (not including \$ <u>3,594,343</u> of contributions reported on line 1c) See Part IV, line 18 a					
	b	Less direct expenses b	262,420			
	c	Net income or (loss) from fundraising events ▶		-796,811		-796,811
9a	Gross income from gaming activities See Part IV, line 19 a					
	b	Less direct expenses b				
	c	Net income or (loss) from gaming activities ▶				
10a	Gross sales of inventory, less returns and allowances a					
	b	Less cost of goods sold b	90,843			
	c	Net income or (loss) from sales of inventory ▶		73,830	73,830	
Miscellaneous Revenue		Business Code				
11a	EXPENSE REIMBURSEMENTS		900,099	149,042	149,042	
	b	MISC INCOME	900,099	61,723		61,723
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d ▶		210,765		
12	Total revenue. See Instructions ▶		36,333,926	18,006,738	111,113	7,651,462

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U S See Part IV, line 22	878,382	878,382		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,437,165		1,437,165	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	11,011,783	9,412,510	723,330	875,943
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	296,897	249,222	25,835	21,840
9	Other employee benefits	1,342,864	1,149,272	111,219	82,373
10	Payroll taxes	820,765	674,144	93,739	52,882
11	Fees for services (non-employees)				
a	Management				
b	Legal	44,752		44,752	
c	Accounting	94,500		94,500	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	206,192		206,192	
g	Other	1,363,458	1,086,837	233,274	43,347
12	Advertising and promotion	1,102,373	1,102,373		
13	Office expenses	378,333	258,199	32,231	87,903
14	Information technology	91,654	58,991	22,164	10,499
15	Royalties	590,187	590,187		
16	Occupancy	2,000,536	1,776,743	170,570	53,223
17	Travel	1,737,743	1,595,114	129,049	13,580
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	1,221,889	1,050,825	109,970	61,094
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,537,844	1,322,546	138,406	76,892
23	Insurance	150,064	129,055	13,506	7,503
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	PROGRAM & OTHER SVC EXP	481,372	324,989	6,198	150,185
b	DEBT SRVC & OTHER FEES	408,446	101,139	280,942	26,365
c	SUPPLIES & EQUIP RENTAL	376,474	376,474		
d	TRUCKING	238,884	238,884		
e	COSTUMES	234,024	234,024		
f	All other expenses	401,163	104,806	196,385	99,972
25	Total functional expenses. Add lines 1 through 24f	28,447,744	22,714,716	4,069,427	1,663,601
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	9,679,657	1	9,544,639
	2 Savings and temporary cash investments	13,077,542	2	43,456,743
	3 Pledges and grants receivable, net	12,143,494	3	10,182,038
	4 Accounts receivable, net	1,218,898	4	788,015
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	20,109	8	9,449
	9 Prepaid expenses and deferred charges	121,894	9	261,191
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	51,570,070		
	b Less accumulated depreciation	8,114,747	10c	43,455,323
	11 Investments—publicly traded securities	55,863,347	11	31,333,671
	12 Investments—other securities. See Part IV, line 11		12	6,550,000
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	2,311,917	15	2,290,682
16 Total assets. Add lines 1 through 15 (must equal line 34)	139,023,657	16	147,871,751	
Liabilities	17 Accounts payable and accrued expenses	3,187,318	17	3,558,004
	18 Grants payable		18	
	19 Deferred revenue	1,232,299	19	1,244,742
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		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. Complete Part X of Schedule D	15,396,921	25	14,919,120
	26 Total liabilities. Add lines 17 through 25	19,816,538	26	19,721,866
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	59,260,256	27	66,578,998
	28 Temporarily restricted net assets	17,173,699	28	18,320,580
	29 Permanently restricted net assets	42,773,164	29	43,250,307
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	119,207,119	33	128,149,885	
34 Total liabilities and net assets/fund balances	139,023,657	34	147,871,751	

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . . .		No
2b	Were the organization's financial statements audited by an independent accountant?	Yes	
2c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
2d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . .		

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

2009

Open to Public Inspection

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
ALVIN AILEY DANCE FOUNDATION INC

Employer identification number

13-2584273

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1 A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
 (ii) a family member of a person described in (i) above?
 (iii) a 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
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)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (See instructions) 12

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

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 14

15 Public Support Percentage for 2008 Schedule A, Part II, line 14 15

16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	13,346,891	6,266,076	31,110,565	9,458,190	10,564,613	70,746,335
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	13,319,516	15,775,954	18,688,350	19,913,846	17,932,908	85,630,574
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	26,666,407	22,042,030	49,798,915	29,372,036	28,497,521	156,376,909
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	5,833,096	3,234,063	12,358,136	11,300,842	2,525,259	35,251,396
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						0
c Add lines 7a and 7b	5,833,096	3,234,063	12,358,136	11,300,842	2,525,259	35,251,396
8 Public Support (Subtract line 7c from line 6)						121,125,513

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	26,666,407	22,042,030	49,798,915	29,372,036	28,497,521	156,376,909
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,068,852	2,551,193	3,121,954	2,574,371	2,310,536	12,626,906
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	2,068,852	2,551,193	3,121,954	2,574,371	2,310,536	12,626,906
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	74,699	55,763	42,778	95,113	111,113	379,466
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	441,262	93,495	174,315	214,468	135,553	1,059,093
13 Total support (Add lines 9, 10c, 11 and 12)	29,251,220	24,742,481	53,137,962	32,255,988	31,054,723	170,442,374
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	71.070 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	68.680 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	7.410 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	6.910 %

19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

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

Explanation

Schedule A, Part II, Line 12, Explanation of Other Income BOUTIQUE / MERCHANDISE SALES COMMISSIONS MISCELLANEOUS INCOME

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2009

Open to Public Inspection

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. Attach to Form 990. See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization ALVIN AILEY DANCE FOUNDATION INC

Employer identification number 13-2584273

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4: Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), Aggregate value at end of year.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

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

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

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

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

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

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

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

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

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

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

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

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

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

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

b Assets included in Form 990, Part X \$

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

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

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

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

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

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

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

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

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

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

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

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

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	30,168,886	33,849,566			
b Contributions	2,897,362	3,093,804			
c Investment earnings or losses	5,070,489	-5,990,017			
d Grants or scholarships					
e Other expenditures for facilities and programs	849,223	784,467			
f Administrative expenses					
g End of year balance	37,287,514	30,168,886			

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

- a** Board designated or quasi-endowment **1.960 %**
- b** Permanent endowment **98.040 %**
- c** Term endowment

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

	Yes	No
(i) unrelated organizations	3a(i)	No
(ii) related organizations	3a(ii)	No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		9,334,293		9,334,293
b Buildings		33,021,678	4,616,443	28,405,235
c Leasehold improvements				
d Equipment		9,214,099	3,498,304	5,715,795
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				43,455,323

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	36,333,926
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	28,447,744
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	7,886,182
4	Net unrealized gains (losses) on investments	4	1,056,584
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	1,056,584
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	8,942,766

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

1	Total revenue, gains, and other support per audited financial statements	1	36,425,992
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	1,056,584
b	Donated services and use of facilities	2b	25,000
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	-989,518
e	Add lines 2a through 2d	2e	92,066
3	Subtract line 2e from line 1	3	36,333,926
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5	36,333,926

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

1	Total expenses and losses per audited financial statements	1	27,483,226
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	25,000
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	25,000
3	Subtract line 2e from line 1	3	27,458,226
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	989,518
c	Add lines 4a and 4b	4c	989,518
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	28,447,744

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	THE FOUNDATION'S ENDOWMENT INCLUDES BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS THE FOUNDATION HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING TO PROGRAMS SUPPORTED BY ITS ENDOWMENT WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS ENDOWMENT ASSETS INCLUDE THOSE ASSETS OF DONOR-RESTRICTED FUNDS THAT THE ORGANIZATION MUST HOLD IN PERPETUITY OR FOR A DONOR-SPECIFIED PERIOD(S) AS WELL AS BOARD-DESIGNATED FUNDS
Part X	Description of Uncertain Tax Positions Under FIN 48	ON JULY 1, 2009, THE FOUNDATION ADOPTED THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS UNDER THIS GUIDANCE, THE FOUNDATION MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION THE TAX BENEFITS TO BE RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS MANAGEMENT EVALUATED THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE FOUNDATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE WITH NO EXCEPTIONS, THE FOUNDATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY U S FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2007, WHICH IS THE STANDARD STATUTE OF LIMITATIONS LOOK-BACK PERIOD
Part XII, Line 2d - Other Adjustments		TUITION REMISSIONS -783326 INVESTMENT MANAGEMENT FEES -206192
Part XIII, Line 4b - Other Adjustments		TUITION REMISSIONS 783326 INVESTMENT MANAGEMENT FEES 206192

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

2009

Open to Public Inspection

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990. See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization ALVIN AILEY DANCE FOUNDATION INC

Employer identification number 13-2584273

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

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance...
2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States
3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed)

Table with 6 columns: (a) Region, (b) Number of offices in the region, (c) Number of employees or agents in region, (d) Activities conducted in region, (e) If activity listed in (d) is a program service, (f) Total expenditures for region. Includes row for Europe (Including Iceland & Greenland) and a Totals row.

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

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		<u>GALA DINNER</u> (event type)	<u>GALA DINNER 2</u> (event type)	<u>1</u> (total number)	(Add col (a) through col (c))
Revenue	1 Gross receipts	2,620,611	663,082	573,070	3,856,763
	2 Less Charitable contributions	2,471,861	626,602	495,880	3,594,343
	3 Gross income (line 1 minus line 2)	148,750	36,480	77,190	262,420
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs		8,000		8,000
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	577,796	219,776	253,659	1,051,231
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				1,059,231
11 Net income summary Combine lines 3, column d, and line 10. ▶				-796,811	

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

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

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities _____		
a Is the organization licensed to operate gaming activities in each of these states?	9a	
b If "No," Explain _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b If "Yes," Explain _____		
11 Does the organization operate gaming activities with nonmembers?	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?	12	

		Yes	No
13 Indicate the percentage of gaming activity operated in			
a The organization's facility	13a		
b An outside facility	13b		
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records			
Name ▶ _____			
Address ▶ _____			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		15a	
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____			
c If "Yes," enter name and address			
Name ▶ _____			
Address ▶ _____			
16 Gaming manager information			
Name ▶ _____			
Gaming manager compensation ▶ \$ _____			
Description of services provided ▶ _____			
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> 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?		17a	
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____			

Schedule I (Form 990)

OMB No 1545-0047

Grants and Other Assistance to Organizations, Governments and Individuals in the United States
Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
Attach to Form 990

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization ALVIN AILEY DANCE FOUNDATION INC

Employer identification number 13-2584273

Part I General Information on Grants and Assistance

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

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

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC Code section if applicable, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of non-cash assistance, (h) Purpose of grant or assistance.

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

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) 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	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS	278	784,326			
STIPENDS	14	56,000			
FELLOWSHIPS	1	38,056			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 STUDENT AID IS GIVEN IN THE FORM OF TUITION REMISSION, WHICH IS APPLIED DIRECTLY TO THE STUDENT'S ACCOUNT OTHER AID IS GIVEN THROUGH CASH STIPENDS FOR LIVING EXPENSES THIS AID IS DISBURSED EACH SEMESTER WHEN THE STUDENT ARRIVES THE STUDENT MUST MAINTAIN SATISFACTORY ACADEMIC PROGRESS IN ALL OF THEIR CLASSES

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
ALVIN AILEY DANCE FOUNDATION INC

Employer identification number
13-2584273

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> First-class or charter travel</td> <td><input checked="" type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax idemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input checked="" type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</td> </tr> </table>	<input checked="" type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input checked="" type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)		
<input checked="" type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input checked="" type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)									
<p>b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain</p>	Yes									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?</p>	Yes									
<p>3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization</p>										
<p>a Receive a severance payment or change-of-control payment?</p>		No								
<p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>	Yes									
<p>c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</p>		No								
<p>Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.</p>										
<p>5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of</p>										
<p>a The organization?</p>		No								
<p>b Any related organization? If "Yes," to line 5a or 5b, describe in Part III</p>		No								
<p>6 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of</p>										
<p>a The organization?</p>		No								
<p>b Any related organization? If "Yes," to line 6a or 6b, describe in Part III</p>		No								
<p>7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>		No								
<p>8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III</p>		No								
<p>9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?</p>										

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
JUDITH JAMISON	(i)	340,322	0	157,889	3,973	6,834	509,018	0
	(ii)	0	0	0	0	0	0	0
SHARON GERSTEN LUCKMAN	(i)	373,920	384,385	600,000	153,716	6,834	1,518,855	0
	(ii)	0	0	0	0	0	0	0
PAMELA ROBINSON	(i)	207,148	0	0	3,186	6,834	217,168	0
	(ii)	0	0	0	0	0	0	0
BENNETT RINK	(i)	267,892	0	0	4,410	6,834	279,136	0
	(ii)	0	0	0	0	0	0	0
CALVIN HUNT	(i)	183,603	0	0	3,138	6,834	193,575	0
	(ii)	0	0	0	0	0	0	0
MASAZUMI CHAYA	(i)	205,732	0	0	2,977	6,834	215,543	0
	(ii)	0	0	0	0	0	0	0
CORY GREENBERG	(i)	153,702	0	0	2,496	6,834	163,032	0
	(ii)	0	0	0	0	0	0	0
THOMAS COTT	(i)	179,126	0	0	0	6,834	185,960	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	Part I, Line 1a	FIRST CLASS AIR TRAVEL IS PROVIDED TO THE ARTISTIC DIRECTOR WHEN THERE IS NO BUSINESS CLASS SECTION. THE AMOUNT SPENT ON FIRST CLASS TRAVEL WAS APPROXIMATELY \$13,000 IN FY '10. A DISCRETIONARY SPENDING ACCOUNT AND HOUSING ALLOWANCE ARE PROVIDED TO THE ARTISTIC DIRECTOR AS TAXABLE FRINGE BENEFITS AND ARE RECOGNIZED ON THE W-2.
	Part I, Line 4a	THE EXECUTIVE DIRECTOR RECEIVED A SUPPLEMENTAL RETIREMENT PAYMENT OF \$600,000, REFLECTING THE FIRST INSTALLMENT OF A SUPPLEMENTAL PAYMENT EARNED BY HER PRIOR TO JULY 1, 2009, FOR HER SERVICE PERFORMED BEFORE THAT DATE. THE PAYMENT IS SHOWN IN SCHEDULE J, PART II, LINE B(III).
Supplemental Information	Part III	THE ORGANIZATION'S EXECUTIVE DIRECTOR RECEIVED THE FOLLOWING PAYMENTS, WHICH ARE SHOWN IN SCHEDULE J, PART II, COLUMN B(II): SPECIAL BONUS FOR EMPLOYMENT CONTRACT COMPLETION - \$333,334; ON-TARGET BONUS FOR MEETING THE OBJECTIVES AND PERFORMANCE CRITERIA AGREED UPON - \$51,051. ALL OF THE ABOVE ARE PART OF THE EXECUTIVE DIRECTOR'S WRITTEN EMPLOYMENT CONTRACT WITH THE FOUNDATION.
Supplemental Information	Part III	THE FOUNDATION DEVELOPED A SUPPLEMENTAL RETIREMENT PLAN FOR ITS EXECUTIVE DIRECTOR. THE EMPLOYMENT PERIOD COVERED BY THIS AGREEMENT IS JULY 1, 2009 TO JUNE 30, 2013. A PAYMENT OF \$600,000 WILL BE PAID TO HER UPON EITHER (1) THE TERMINATION OF THE EMPLOYMENT PERIOD ON THE EXPIRATION DATE WITHOUT HER SEPARATION FROM SERVICE PRIOR TO SUCH EXPIRATION DATE, OR (2) A TERMINATION OF THE EMPLOYMENT PERIOD PRIOR TO THE EXPIRATION DATE DUE TO HER SEPARATION FROM SERVICE DUE TO AN INVOLUNTARY TERMINATION OF HER EMPLOYMENT BY THE FOUNDATION WITHOUT CAUSE OR THE CONSTRUCTIVE DISCHARGE BY THE FOUNDATION. THIS SUPPLEMENTAL RETIREMENT PAYMENT WILL BE PAID AS SOON AS PRACTICABLE FOLLOWING TERMINATION OF THE EMPLOYMENT PERIOD UNDER THIS PARAGRAPH, BUT NO LATER THAN 2 1/2 MONTHS FOLLOWING THE DATE ON WHICH THE TERMINATION OF THE EMPLOYMENT PERIOD OCCURS. INCLUDED ON SCHEDULE J, PART II, COLUMN C IS \$150,000, WHICH REPRESENTS 1/4 OF THE TOTAL AMOUNT LISTED ABOVE. THIS AMOUNT HAS NOT BEEN PAID AND HAS ONLY BEEN INCLUDED RATABLY UNDER THE PERIOD THE SERVICES ARE TO BE PERFORMED UNDER THE CONTRACT, PER THE INSTRUCTIONS FOR SCHEDULE J.

**Schedule K
(Form 990)**

OMB No 1545-0047

Supplemental Information on Tax Exempt Bonds

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990).**

▶ **Attach to Form 990. ▶ See separate instructions.**

2009

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization
ALVIN AILEY DANCE FOUNDATION INC

Employer identification number
13-2584273

Part I Bond Issues

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer	
						Yes	No	Yes	No
A TRUST FOR CULTURAL RESOURCES OF THE CITY OF NEW YORK	91-1882413	649717MV4	11-06-2003	20,000,000	TO FINANCE PART OF THE CONSTRUCTION COSTS OF THE ORGANIATION'S FACILITIES		X		X

Part II Proceeds

		A	B	C	D	E			
1	Total proceeds of issue	20,000,000							
2	Gross proceeds in reserve funds								
3	Proceeds in refunding or defeasance escrows								
4	Other unspent proceeds								
5	Issuance costs from proceeds	701,886							
6	Working capital expenditures from proceeds								
7	Capital expenditures from proceeds	19,298,114							
8	Year of substantial completion	2005							
		Yes	No	Yes	No	Yes	No	Yes	No
9	Were the bonds issued as part of a current refunding issue?		X						
10	Were the bonds issued as part of an advance refunding issue?		X						
11	Has the final allocation of proceeds been made?	X							
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

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

Part III Private Business Use (Continued)

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts with respect to the financed property which may result in private business use?	X									
3b Are there any research agreements with respect to the financed property which may result in private business use?		X								
3c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		X								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	1 000 %									
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	1 000 %									
6 Total of lines 4 and 5	2 000 %									
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X									

Part IV Arbitrage

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X								
2 Is the bond issue a variable rate issue?	X									
3a Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		X								
b Name of provider										
c Term of hedge										
4a Were gross proceeds invested in a GIC?		X								
b Name of provider										
c Term of GIC										
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5 Were any gross proceeds invested beyond an available temporary period?		X								
6 Did the bond issue qualify for an exception to rebate?		X								

SCHEDULE M (Form 990)

NonCash Contributions

OMB No 1545-0047

2009

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization ALVIN AILEY DANCE FOUNDATION INC

Employer identification number 13-2584273

Part I Types of Property

Table with 4 columns: (a) Check if applicable, (b) Number of Contributions, (c) Revenues reported on Form 990, Part VIII, line 1g, (d) Method of determining revenues. Rows include Art, Books, Securities, Real estate, etc.

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

29

Table with 3 columns: Question, Yes, No. Rows include 30a, 31, 32a, 33 regarding contribution reporting and policies.

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
Method for Determining Number of Contributors	Part I, Column (b)	THE NUMBER OF CONTRIBUTORS LISTED ABOVE REPRESENTS THE NUMBER OF DONORS OF NON-CASH CONTRIBUTIONS DURING THE FISCAL YEAR ENDED 6/30/10

Additional Data

Software ID:
Software Version:
EIN: 13-2584273
Name: ALVIN AILEY DANCE FOUNDATION INC

efile GRAPHIC print - DO NOT PROCESS | **As Filed Data -** | **DLN: 93493132026161**

SCHEDULE O (Form 990)	Supplemental Information to Form 990	OMB No 1545-0047
2009	Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. Attach to Form 990.	
Open to Public Inspection		

Name of the organization ALVIN AILEY DANCE FOUNDATION INC	Employer identification number 13-2584273
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Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		THE DRAFT OF THE 990 IS THOROUGHLY EXAMINED AND REVIEWED BY THE CFO AND BY THE CHAIR OF THE AUDIT COMMITTEE, AS WELL AS THE EXECUTIVE DIRECTOR AND BY OTHER KEY STAFF AS APPROPRIATE THE COMPLETED 990 IS THEN REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS (WHO WAS PREVIOUSLY DELEGATED THAT RESPONSIBILITY BY THE FULL BOARD) PRIOR TO FILING ALSO PRIOR TO FILING, A FULL COPY IS SENT TO THE FULL BOARD OF DIRECTORS

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		ON AN ANNUAL BASIS, THE CONFLICT OF INTEREST POLICY IS SENT TO EACH MEMBER OF THE BOARD, AS WELL AS THE ORGANIZATION'S OFFICERS AND KEY EMPLOYEES THE POLICY IS REVIEWED AND DISCUSSED AT ONE BOARD MEETING EACH YEAR INDIVIDUALS ARE REQUIRED TO COMPLETE AND RETURN A QUESTIONNAIRE WHICH WOULD NOTE ANY NECESSARY DISCLOSURES OR CONFLICTS THE CFO REVIEWS EACH COMPLETED QUESTIONNAIRE AND, IF A CONFLICT ARISES, THE CFO WILL BRING THE MATTER TO THE ATTENTION OF THE EXECUTIVE DIRECTOR

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		THE COMPENSATION COMMITTEE OF THE BOARD PERFORMS DUE DILIGENCE ON APPROPRIATE COMPENSATION FOR THE EXECUTIVE DIRECTOR AND MAKES A RECOMMENDATION TO THE EXECUTIVE COMMITTEE FOR APPROVAL THE COMPENSATION COMMITTEE SEEKS DIRECTION AND ADVICE FROM OUTSIDE COUNSEL, WHO SPECIALIZE IN EXECUTIVE COMPENSATION, AND FROM CONSULTANTS WHO PERFORM BENCHMARKING ANALYSES TO ASSIST IN DEVELOPING THE RECOMMENDATION THE EXECUTIVE COMMITTEE MEETS WITH THE COMPENSATION COMMITTEE AND COUNSEL TO REVIEW THE PROPOSED COMPENSATION AADF PERFORMS INTERNAL BENCHMARKING FOR OTHER KEY EMPLOYEES OF THE ORGANIZATION USING PUBLISHED SURVEYS AND OTHER RESOURCES SALARY RECOMMENDATIONS ARE PROPOSED BY THE EXECUTIVE DIRECTOR TO THE EXECUTIVE COMMITTEE OF THE BOARD FOR APPROVAL THESE RECOMMENDATIONS ARE REVIEWED BY A MEMBER OF THE BOARD WHO IS A PROFESSIONAL IN EXECUTIVE RECRUITMENT

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		THE FORM 990 IS MADE AVAILABLE UPON REQUEST OTHER GOVERNING DOCUMENTS AND POLICIES ARE NOT MADE AVAILABLE TO THE GENERAL PUBLIC

Identifier	Return Reference	Explanation
FORM 990, PART VII	EXPLANATION OF COMPENSATION	SEE SCHEDULE J, PART III, SUPPLEMENTAL INFORMATION, REGARDING AMOUNTS REPORTED FOR THE EXECUTIVE DIRECTOR ON PART VII, COLUMNS D & F

Additional Data

Software ID:

Software Version:

EIN: 13-2584273

Name: ALVIN AILEY DANCE FOUNDATION INC

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

4d. Other program services

(Code) (Expenses \$	2,106,977	including grants of \$) (Revenue \$	2,186,459)
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ANCILLARY ON-SITE COMMUNITY PROGRAMS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JAMES G ABRUZZO TRUSTEE	5 00	X						0	0	0
GINA F ADAMS TRUSTEE	5 00	X						0	0	0
SIMIN N ALLISON VICE CHAIRMAN	5 00	X		X				0	0	0
ELEANOR S APPLEWHAITE TRUSTEE	5 00	X						0	0	0
ANTOINETTE COOPER BLAIR TRUSTEE	5 00	X						0	0	0
DEBBY BALLARD TRUSTEE	5 00	X						0	0	0
JUDITH BYRD TRUSTEE	5 00	X						0	0	0
ANTHONY M CARVETTE TRUSTEE	5 00	X						0	0	0
MICHAEL J CAVANAGH TRUSTEE	5 00	X						0	0	0
KATHRYN C CHENAULT TRUSTEE	5 00	X						0	0	0
DAVID S DANIEL TRUSTEE	5 00	X						0	0	0
CATHERINE DAVIS TRUSTEE	5 00	X						0	0	0
GUIDO GOLDMAN VICE CHAIRMAN	5 00	X		X				0	0	0
BRUCE S GORDON TRUSTEE	5 00	X						0	0	0
ANITA-AGNES O HASSELL TRUSTEE	5 00	X						0	0	0
JUDITH JAMISON TRUSTEE & ARTISTIC DIRECTOR	40 00	X						498,211	0	10,807
RICHARD L KAUFFMAN TRUSTEE	5 00	X						0	0	0
PHILIP LASKAWY CHAIRMAN OF EXECUTIVE COMMITTEE	5 00	X		X				0	0	0
DEBRA L LEE VICE CHAIRMAN	5 00	X		X				0	0	0
MICHELLE Y LEE TRUSTEE	5 00	X						0	0	0
ANTHONY A LEWIS TRUSTEE	5 00	X						0	0	0
LINDA M LINDENBAUM VICE CHAIRMAN	5 00	X		X				0	0	0
SHARON GERSTEN LUCKMAN SECRETARY & EXECUTIVE DIRECTOR	40 00	X		X				1,358,305	0	160,550
LESLIE L MAHERAS TRUSTEE	5 00	X						0	0	0
ARTHUR J MAHON TRUSTEE	5 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
HENRY MCGEE PRESIDENT	5 00	X		X				0	0	0
ARTHUR J MIRANTE II VICE CHAIRMAN	5 00	X		X				0	0	0
GABRIELLA E MORRIS TRUSTEE	5 00	X						0	0	0
NICOLAS S ROHATYN TRUSTEE	5 00	X						0	0	0
JOHN H SCHAEFER VICE CHAIRMAN	5 00	X		X				0	0	0
RICHARD SPECIALE TRUSTEE	5 00	X						0	0	0
LEMAR SWINNEY TRUSTEE	5 00	X						0	0	0
JULIA A WALKER TRUSTEE	5 00	X						0	0	0
JOAN H WEILL CHAIRMAN	10 00	X		X				0	0	0
CHRISTOPHER J WILLIAMS VICE CHAIRMAN	5 00	X		X				0	0	0
PAMELA ROBINSON TREASURER & CHIEF FINANCIAL OFFICER	40 00			X				207,148	0	10,020
BENNETT RINK SENIOR DIR OF EXTERNAL AFFAIRS	40 00					X		267,892	0	11,244
CALVIN HUNT SENIOR DIRECTOR OF PERF & PROD	40 00					X		183,603	0	9,972
MASAZUMI CHAYA ASSOCIATE ARTISTIC DIRECTOR	40 00					X		205,732	0	9,811
CORY GREENBERG DIR OF OPERATIONS & SPEC PROJ	40 00					X		153,702	0	9,330
THOMAS COTT DIRECTOR OF MARKETING	40 00					X		179,126	0	6,834

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
PERFORMANCE FEES	900,099	9,223,597	9,223,597		
TUITION & TEACHING FEE	900,099	7,802,512	7,802,512		
STUDIO INCOME	531,120	597,431	486,318	111,113	
STUDENT FEES	900,099	152,229	152,229		
SCHOOL TICKET SALES	900,099	119,210	119,210		

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
PROGRAM & OTHER SVC EXP	481,372	324,989	6,198	150,185
DEBT SRVC & OTHER FEES	408,446	101,139	280,942	26,365
SUPPLIES & EQUIP RENTAL	376,474	376,474		
TRUCKING	238,884	238,884		
COSTUMES	234,024	234,024		