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Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2011

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. December 31 20 11 January 1 2011, and ending For the 2011 calendar year, or tax year beginning D Employer identification number C Name of organization The ASCAP Foundation Check if applicable: 51-0181769 Doing Business As Address change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Name change 7th Floor 212-621-6219 One Lincoln Plaza Initial return City or town, state or country, and ZIP + 4 Terminated 2,228,830 New York, NY 10023 G Gross receipts \$ Amended return H(a) is this a group return for affiliates? Yes No F Name and address of principal officer Application pending H(b) Are all affiliates included? $\ \square$ Yes $\ \square$ No If "No," attach a list. (see instructions) **✓** 501(c)(3) 501(c) () ◀ (insert no.) 🔲 4947(a)(1) or 🔲 527 Tax-exempt status: ascapfoundation.org H(c) Group exemption number > Website: ▶ Form of organization:

Corporation

Trust Association

Other ▶ L Year of formation: 1975 M State of legal domicile: Part I Briefly describe the organization's mission or most significant activities: The ASCAP Foundation is dedicated to supporting American music creators and encouraging their development through music education & talent development programs. Included ctivities & Governance in these are songwriting workshops, scholarships, awards, recognition & community outreach programs, public service projects for senior composers and grants to 501 (c)(3) organizations for music education. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 24 Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 0 5 3.5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 0 Total number of volunteers (estimate if necessary) 6 0 Total unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T, line 34 0 Current Year 1,210,313 1,463,194 Contributions and grants (Part VIII, line 1h) . 8 9 Program service revenue (Part VIII, line 2q) 10 826,450 546,911 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 239,095 218,725 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 2,275,858 2,228,830 12 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 829,293 825,265 14 Benefits paid to or for members (Part IX, column (A), line 4) O 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 276,762 353,490 15 Professional fundraising tees (Part IX, column (A), line 11e) O 0 16a Total fundraising expenses (Part Of column (0), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 351,151 353,527 Total expenses Add lines 1,3 17 (must equal Part IX, column (A), line 25) 1,457,206 1,532,282 18 Revenue less expenses. Subtract line 18 from line 12 19 818.652 696,548 End of Year Beginning of Current Year Total assets (Part(X) (line)6)-20 8,172,825 8,081,675 35,164 21 Total liabilities (Part X, line 26 34,222 22 Net assets or fund balances. Subtract line 21 from line 20 8,137,661 8,047,453 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. ڪهوسط Sign Signature of office Date Here **1878**0 Type or print name and title Date Print/Type preparer's name Preparer's signature Check [] if **Paid** self-employed **Preparer** Firm's EIN ▶ Firm's name **Use Only** Firm's address ▶ Phone no.

May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions.

SCANNED JUN 2



☐ Yes ☐ No Form **990** (2011)

Cat No 11282Y



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Part		
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		iues
2	Did the organization undertake any significant program services during the year which were not listed on the	
		No
	If "Yes," describe these new services on Schedule O.	
3		
		No
Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission: The ASCAP Foundation is dedicated to nurturing the music talent of tomorrow, preserving the legacy of the past and sustaining the creative incentive for today's music creators through a variety of educational, professional and humanitarian programs and activity that serve the entire music community. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.		
4a	(Code:) (Expenses \$ 346,374 including grants of \$ 318,630) (Revenue \$)	
	SCHOLARSHIPS, FELLOWSHIPS, AWARD AND COMPOSER PROGRAMS:	
	The ASCAP Foundation scholarship programs seek to ensure that opportunities for the study of music and instruments,	
	songwriting, music composition, the business of music and related areas are available to students at all levels by providing	

	awards range from \$200 - \$10,000. Of these 102 awards, 100 awards are \$5,000 or less and 2 awards are for \$10,000 each.	
4b	(Code:) (Expenses \$ 320,183 including grants of \$ 311,923) (Revenue \$)	

		ms
	^^^^***********************************	
	programs dat have received 40,000 or 1035 and 10 programs dat received more daily 40,000.	
4c	(Code:) (Expenses \$ 205,689 including grants of \$ 172,291) (Revenue \$)	
	TAL CAT DEVEL ADMENT.	

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4d		
40		
	1	

Part	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	▎╻┊	1	
•	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	1 2	1	
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.		<u> </u>	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		l	ł
a	complete Schedule D, Part VI	11a	1	
Ь	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	1	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	 	1
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		1
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 United States? If "Yes," complete Schedule F, Parts II and IV.	15		1
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 United States? If "Yes," complete Schedule F, Parts III and IV			1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	16		
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
	If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	<u> </u>	

Part	Checklist of Required Schedules (Continued)			
	70 March 1980 1980 1980 1980 1980 1980 1980 1980		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
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? If "Yes," complete Schedule I, Parts I and III	22	/	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	1	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		1
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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? If "Yes," complete Schedule L, Part I	24d 25a		1
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
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? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	31		/
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
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? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	1	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
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	1	

Part				_
	Check if Schedule O contains a response to any question in this Part V	• •	Yes	No
4.	Fatantha annih annah dia Ban 2 of Farm 1006 Fatan 0 if not applicable 10 06			140
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 95			
Ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	_ 1		
	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gress income of \$1,000 or more during the year?	3a		✓
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	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)?	4a		✓
ь	If "Yes," enter the name of the foreign country: ▶			
	See instructions for 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?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		i –
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?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	-		Ť
_	qifts were not tax deductible?	6b		l
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	'		İ
_	and services provided to the payor?	7a		
.	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		┡
b C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	15		
•	required to file Form 8282?	7c		1
a	If "Yes," indicate the number of Forms 8282 filed during the year			
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
_	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
f	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		1
_	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	/ '''		-
8				l
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
Δ	organization, have excess business holdings at any time during the year?	8		1
9	Did the organization make any taxable distributions under section 4966?	00		
ä	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		/
10	Section 501(c)(7) organizations. Enter:	- 00		-
10	Initiation fees and capital contributions included on Part VIII, line 12			}
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			İ
_ b				
11_	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a b	Gross income from other sources (Do not net amounts due or paid to other sources			
10-	against amounts due or received from them.)	120		i
12a		12a		-
_ b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			i
ь	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	100			
C	Enter the amount of reserves on hand			Ļ
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S.			
	Check if Schedule O contains a response to any question in this Part VI	<u></u>	نــــــــ	
Secti	on A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		163	
b 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		1
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? .	3		1
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	4 5 6		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a b 9	The governing body?	8a 8b		1
Secti	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9 ue C	ode.	✓
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		1
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	<u> </u>	/
c	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b		
13	Did the organization have a written whistleblower policy?	12c	1	\vdash
14	Did the organization have a written document retention and destruction policy?	14	7	<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	1	
b	Other officers or key employees of the organization	15b	1	
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	40		
b		16a	-	-
Secti	ion C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed California, Florida, Illinois, New You Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.			
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	f inter	rest p	olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: Robert F. Candela, Comptroller, One Lincoln Plaza, New York, NY 10023 (212) 621-6523	of the	;	

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization	nor any relate	d org	aniz			ompe	nsa	ted any currer	nt officer, director	r, or trustee.
				•	C)			1		
(A)	(B)	(don	ot ct		ition more	e than o	one	(D)	Œ	(F)
Name and Title	Average hours per	box,	unles	s pe	rson	is both	an	Reportable compensation	Reportable compensation from	Estimated amount of
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Marilyn Bergman		_								
Director	.25	1	Ļ	<u> </u>	_	ļ	<u> </u>	0	27,356	0
(2) Charles Bernstein			1				1			
Director	.25	1	L					0	0	0
(3) Bruce Broughton			1				ļ			
Director	.25	1						0	17,200	
(4) Tita Cahn			Í					1		
Director	.25	1	L	<u>.</u>	<u> </u>	ļ	<u>L</u>	0	0	C
(5) Alf Clausen		l	Í						ļ	
Director	.25	✓			<u> </u>			0	0	0
(6) Hal David							Ì			
Director	.25	✓				L		0	32,256	0
(7) Dan Foliart			ŀ							
Director	.25	✓		<u> </u>	L		L	0	18,650	O
(8) Arthur Hamilton								1		
Director	.25	1						0	12,005	C
(9) Wayland Holyfield				•						•
Director	.25	1						0	12,005	O
(10) James M. Kendrick										
Director	.25	1						0	18,900	0
(11) Robert Kimball										
Director	.25	1						0	0	0
(12) Ed London										
Director	.25	1			L	L		0	0	C
(13) Johnny Mandel										
Director	.25	1					L	0	12,005	0
(14) James McBride										
Director	.25	1						0	0	Q

Part	Section A. Omcers, Directors, Trus	tees, key E	mpio	yee:	_		iigne	ST C	ompensated E	mployees (co	ontir	iued)		
		ļ			_	C)			1					
	(A)	(B)	(do n	nt ct		ition	e than o	Y 00	(D)	Œ			(F)	
	Name and title	Average					is bott		Reportable	Reportable	,		Stimated	
		hours per week		_	_	irect	or/trust	tee)	compensation	compensation f related	ЮШ	а	mount of other	i
		(describe	Individual trustee or director	3	Officer	3	多품	F	the	organization	s	coı	mpensatio	on
		hours for	P N	를	er er	Key employee	5 5	T T	organization	(W-2/1099-MIS	SC)		from the	
		related organizations	ğè	3	1	흥	88		(W-2/1099-MISC)				ganization nd related	
		in Schedule	3	3		ě	퓛	1					ganızatıor	
		O)	8	Institutional trustee			Highest compensated employee							
(15) la	y R. Morgenstern			_	_		8	_						
	rector	.25	1						0	12,0	205			0
	ary Rodgers	1	H	Н				-		,				
	rector	.25	 ✓						o		0			0
(17) St	ephen Schwartz													
	rector	.25	1	L		_		L	0		0			0
3	lerie Simpson		١,	İ			!	İ						
	rector arries Strouse	.25	/	ऻ—	┝	-	<u> </u>	├	0	5,0	500			. 0
3	rector	.25	1		l						0			0
	oug Wood		<u> </u>	\vdash				\vdash			ď			
	rector	.25	1		Į				0	38,4	487			0
(21) Pa	ul Williams									-				
	esident	.50	1		_	L_			0		0			0
<u> </u>	vin Z. Robinson				į				_					
	ce-President	.50	/					⊢	0	24,8	320			0
3	easurer	.50	1						0	29,0	200			0
	nny Mancini	1.00	- `							20,0				<u>_</u>
	ecretary	.50	1						0		0			0
(25) Co	illeen McDonough					—							-	
Dir	ector - The ASCAP Foundation	35				L	1		123,396		0		3	36,695
1b	Sub-total			•	-				123,396	235,4	175		3	36,695
C	Total from continuation sheets to Part	•		-	-		•	>	0		0			0
d		· · · ·			•	<u> </u>		<u>•</u>	123,396	235,4		<u></u>	3	86,695
2	Total number of individuals (including but reportable compensation from the organi		to th	ose	list	ed a	above	e) W	no received m	ore than \$100),00	O of		
				•									Yes	No
3	Did the organization list any former of	ficer, direc	tor, c	or tr	uste	æ,	key e	mp	oloyee, or high	est compens	sate	ed		
_	employee on line 1a? If "Yes," complete									· · · · ·	•	3		✓
4	For any individual listed on line 1a, is the organization and related organizations	sum of rep	portal	DIE (CON	nper	nsatio	na ~*	nd other comp	ensation from	n th	ie		
	individual	greater un	auri opi	150,	UUU		76	5,	complete Sch	eaule J lor	Suc			
5	Did any person listed on line 1a receive of	r accrue co	 ombei	nsat	- tion	fror	n anv	· ·	related organiz	ation or indiv	idu:	al 4	· •	
	for services rendered to the organization											5	.	1
Section	n B. Independent Contractors													
1	Complete this table for your five highest of	compensate	ed inc	qet	end	ent	contr	acto	ors that receive	d more than	\$10	000,00	of	
	compensation from the organization. Rep	ort compe	nsatio	on fo	or th	e c	alend	ar y	ear ending wit	n or within th	e or	ganiza	tion's t	ax
	year.									<u>-</u>				
	(A) Name and business add	ress							(B) Description of s	ervices			C) ensation	
-														
		•							-					
2	Total number of independent contractor							th	ose listed abo	ve) who				
	received more than \$100,000 of compens	sation from	the o	rgar	izat	tion	<u> </u>							

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
후후	1a	Federated campaigns	1a 0				
P 2	ь	Membership dues	1b 0				
Q E	С	Fundraising events .	1c 0				
£ 7	d	Related organizations	1d 185,000				
O 를	e	Government grants (contributions)	1e 40,000				
통 ㅎ	f	All other contributions, gifts, grants,	10 40,000				
Ħ Þ	·	and similar amounts not included above	1f 1,238,194				
문장	_	Noncash contributions included in lines 1a-1		1			
Contributions, Gifts, Grants and Other Similar Amounts	9			1 452 104			
	h	Total. Add lines 1a-1f	Business Code	1,463,194			
ž	_		Business Coue				
8	2a						
Œ	ь						
2	С					· · · · · · · · · · · · · · · · · · ·	
Se	d						
am	е						
Program Service Revenue	f	All other program service revenue					
<u>~</u>	g	Total. Add lines 2a-2f	🕨	0			
	3	Investment income (including of	dividends, interest,				
		· ·	•	546,911			
	4	Income from investment of tax-exem	pt bond proceeds ►	0			
	5	Royalties	.	218,725			
		(i) Real	(ii) Personal	1			
	6a	Gross rents					
	b	Less: rental expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)	<u>.</u> >	0			
	7a	Gross amount from sales of (1) Securities	s (ii) Other				
		assets other than inventory				ļ	
	b	Less: cost or other basis and sales expenses .					
		Gain or (loss)					:
	d			o		İ	
	ď	Net gain or (loss)	·				
er Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c See Part IV, line 18					
Othe	Ь	Less: direct expenses					
J		Net income or (loss) from fundrai		o		-	
		Gross income from gaming activiti	ies.	-			
	_	See Part IV, line 19					
		Less: direct expenses		_		1	
	1	Net income or (loss) from gaming		0			
	10a	Gross sales of inventory, le returns and allowances					
	b	Less: cost of goods sold	b				
	C	Net income or (loss) from sales o		0			
		Miscellaneous Revenue	Business Code	=			-
	11a						
	Ь				<u>-</u>		
	С						
	d	All other revenue				<u> </u>	
	e	Total. Add lines 11a-11d		0		ļ	
	12	Total revenue. See instructions.	▶	2,228,830			

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).

	Check if Schedule O contains a respon				
	t include amounts reported on lines 6b, 7b, , 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 United States. See Part IV, line 21	613,090	613,090		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	212,175	212,175		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	o	o		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0	0	0	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	o	0	o	0
7 8	Other salaries and wages	271,916 9,308	115,473 3,464	59,038 1,771	97,405 4,073
9	Other employee benefits	72,266	31,178	15,940	25,148
10	Payroll taxes	0	0	0	0
11	Fees for services (non-employees):				
а	Management	0	0	o	0
b	Legal	6,195	0	1,347	4,848
C	Accounting	8,500	0	8,500	0
d	Lobbying	0	0	0	0
е	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
9	Other	3,060	3,060	0	0
12	Advertising and promotion	0	0	0 2,405	2 520
13 14	Office expenses	11,424 1,866	5,480 622	622	3,539 622
15	Information technology	0	022	022	022
16	Occupancy	0		0	0
17	Travel	56,466	51,822	2,322	2,322
18	Payments of travel or entertainment expenses	33,133		-,	
	for any federal, state, or local public officials	o	0	o	0
19	Conferences, conventions, and meetings .	0	0	0	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	900	300	300	300
23	Insurance	0	0	0	0
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Archive programs	23,525	23,525	0	0
b	Honoraria / judges' fees	13,300	13,300	0	0
C	Annual Awards reception	69,454	59,036	0	10,418
d	Library of Congress Event	152,696	0	0	152,696
е	All other expenses Miscellaneous	6,141	2,424	178	3,539
25	Total functional expenses. Add lines 1 through 24e	1,532,282	1,134,949	92,423	304,910
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				

	rt X	Balance Sheet	(A)		(B)
			Beginning of year		End of year
	1	Cash—non-interest-bearing	0	1	0
	2	Savings and temporary cash investments	721,055	2	566,648
	3	Pledges and grants receivable, net	59,750	3	249,418
- 1	4	Accounts receivable, net	0	4	100,000
	5	Receivables from current and former officers, directors, trustees, key			
- 1		employees, and highest compensated employees. Complete Part II of			-
		Schedule L	0	5	
ł	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
\$		employees' beneficiary organizations (see instructions)	0	6	
Assets	7	Notes and loans receivable, net	0	7	
₹	8	Inventories for sale or use	0	8	C
	9	Prepaid expenses and deferred charges	523	9	541
1	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 1,877			
	b	Less: accumulated depreciation 10b 900	1,877	10c	977
1	11	Investments—publicly traded securities	7,389,620	11	7,164,091
1	12	Investments—other securities. See Part IV, line 11	0	12	C
1	13	Investments—program-related. See Part IV, line 11	0	13	
1	14	Intangible assets	0	14	C
1	15	Other assets. See Part IV, line 11	0	15	C
	16	Total assets. Add lines 1 through 15 (must equal line 34)	8,172,825	16	8,081,675
1	17	Accounts payable and accrued expenses	28,519	17	30,472
1	18	Grants payable	6,645	18	3,750
1	19	Deferred revenue	0	19	C
2	20	Tax-exempt bond liabilities	0	20	0
2	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	0	21	0
8 2	22	Payables to current and former officers, directors, trustees, key			
Liabilities		employees, highest compensated employees, and disqualified persons.			
윤		Complete Part II of Schedule L	0	22	
_ •	23	Secured mortgages and notes payable to unrelated third parties	0	23	
2	24	Unsecured notes and loans payable to unrelated third parties	0	24	
2	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	0		C
- 1.		of Schedule D		25	
_ 2	26	Total liabilities. Add lines 17 through 25	35,164	26	34,222
		Organizations that follow SFAS 117, check here ▶ ✓ and complete			
월		lines 27 through 29, and lines 33 and 34.	-		
힐	27	Unrestricted net assets	2,244,828	27	2,021,098
2 3	28	Temporarily restricted net assets	4,723,501	28	4,857,023
[[29	Permanently restricted net assets	1,169,332	29	1,169,332
2		Organizations that do not follow SFAS 117, check here ▶ □ and		1	
Net Assets or Fund Balances		complete lines 30 through 34.	-		
# 13	30	Capital stock or trust principal, or current funds	0	30	0
8	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
Ž 3	32	Retained earnings, endowment, accumulated income, or other funds	0	32	0
	33	Total net assets or fund balances	8,137,661	33	8,047,453
	34	Total liabilities and net assets/fund balances	8,172,825	34	8,081,675 Form 990 (2011

Page	1	2

Part						
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>				V
1	Total revenue (must equal Part VIII, column (A), line 12)	1	_		2,22	8,830
2	Total expenses (must equal Part IX, column (A), line 25)	2			1,53	2,282
3	Revenue less expenses. Subtract line 2 from line 1	3			69	5,548
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			8,13	7,661
5	Other changes in net assets or fund balances (explain in Schedule O)	5			(786	,756)
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,					
	column (B))	6			8,04	7,453
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		Г			
	If the organization changed its method of accounting from a prior year or checked "Other," ex	olain i	in	- 1		
	Schedule O.		- 1			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. :	2a	✓	
b	Were the organization's financial statements audited by an independent accountant?		. [2ь	✓	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov	ersigt	nt 🗀			
	of the audit, review, or compilation of its financial statements and selection of an independent accou	ntant?	? :	2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, ex	plain i	in 🗍		·	
	Schedule O.					
đ	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year	ar wer	e			
	issued on a separate basis, consolidated basis, or both:					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth i	in [
	the Single Audit Act and OMB Circular A-133?			3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under		ie			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a			3b		
				Form	990	(2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

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

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

The A	ASCA	P Foundation		<u>. </u>						51-018	B1769		
Pa				ity Status (All orga						nstructio	ns.		
The o	organ	zation is not	a private founda	tion because it is: (Fo	r lines 1 t	through 1	1, check	only one	box.)				
1		church, conv	ention of church	nes, or association of	churches	describe	ed in sec	tion 170(b)(1)(A)(ĭ).			
2		school descr	ribed in section	170(b)(1)(A)(ii). (Attac	h Schedu	ule E.)							
3		hospital or a	cooperative hos	spital service organiza	ition desc	cribed in s	section 1	70(b)(1)(A)(iii).				
4	h	ospital's nam	e, city, and state										
5			n operated for t (1)(A)(iv). (Comp	the benefit of a collect plete Part II.)	ge or uni	versity ov	vned or	operated	by a go	vernment	al unit d	escrib	ed in
6		federal, state	e, or local govern	ment or governmenta	al unit de:	scribed in	section	170(b)(1)(A)(v).				
7				receives a substantia (A)(vi). (Complete Par		its suppo	ort from a	governr	mental ur	nit or from	n the ge	neral p	oublic
8		community t	rust described in	n section 170(b)(1)(A)	(vi). (Cor	nplete Pa	rt II.)						
9		n organizatio	n that normally	receives: (1) more tha	an 331/3%	of its su	ipport fro	om contri	butions,	members	hip fees	, and	gross
				to its exempt functi									
				nt income and unrel						n 511 ta	x) from	busin	esses
			-	fter June 30, 1975. Se									
10				operated exclusively									
11		An organizatio	on organized an	d operated exclusive	ely for th	e benefit	of, to p	perform 1	the funct	ions of,	or to ca	rry ou	it the
	Ę	ourposes of o	ne or more pub	licly supported organ	nizations	described	d in sect	ion 509(a	a)(1) or so	ection 50	9(a)(2). S	iee se	ection
				describes the type of					ete imes i		_		
		Typel	b 🗆			III-Functi] Type I		
e				that the organization									
		orner man fou or section 509	_	ers and other than one	e or more	e publicly	Support	eu organ	izalions (rescribed	i iii Secu	JH 30	3(a)(1)
f				written determination	on from	the IRS 1	that it is	a Type	l Type	II or Tvo	سوااا م	oporti	na
•		_	check this box .					a type	i, iype	., O. 196	/e iii 3u		
ç	_	•		ne organization accep	nted anv	aft or co	ntributio	n from a	nv of the				
•		ollowing pers		ic organization dood	piou uily	giit oi ot			, o	•			
		• •		ndirectly controls, eitl	her alone	or toget	her with	persons	describe	d ın (ii) aı	nd	Yes	No
	•			ody of the supported							11g(i	,	
	(ii) A family m	ember of a person	on described in (i) abo	ove?						11g(ii	 	
	•	• •	•	a person described in							11g(ii	1	
ŀ				on about the support								-1	•
(0)	Name	of supported	(ii) EIN	(III) Type of organization	(iv) is the c	organization	(v) Did y	ou notify	(vi)	ls the	(vii)	Amount	of
	org	anization		(described on lines 1-9 above or IRC section		sted in your document?		nization in of your	organiza (i) organ	tion in col ized in the	S	upport	
				(see instructions))	go			port?		.S.?]		
					Yes	No	Yes	No	Yes	No			
(A)													
(B)										 			
					<u> </u>			<u> </u>	 	 			
(C)													
(D)													
(E)													
						1							

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2007 **(b)** 2008 (c) 2009(d) 2010 (e) 2011 (f) Total grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 673,033 1,380,993 1,475,439 1,210,303 1,463,194 6,202,962 levied revenues for organization's benefit and either paid to or expended on its behalf 0 0 0 0 0 The value of services or facilities 3 furnished by a governmental unit to the organization without charge 0 0 1,463,194 673.033 1,380,993 1,475,439 1,210,303 6,202,962 Total. Add lines 1 through 3 The portion of total contributions by than a each person (other publicly governmental unit or supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 2,639,230 3,563,732 Public support. Subtract line 5 from line 4. Section B. Total Support (e) 2011 (a) 2007 (d) 2010 Calendar year (or fiscal year beginning in) ▶ **(b)** 2008 (c) 2009 (f) Total 1,475,439 1,210,303 1,463,194 6,202,962 673,033 1,380,993 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 3,239,809 712,492 496,442 199,694 1,065,545 765,636 Net income from unrelated business activities, whether or not the business is regularly carried on 0 0 0 0 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 0 9,442,771 **Total support.** Add lines 7 through 10 11 12 O 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage 37.74 % Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2010 Schedule A. Part II, line 14 15 36.55 331/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this \square b 331/3% support test-2010. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2011. 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 b 10%-facts-and-circumstances test-2010. 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

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

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")				l		
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513		ļ				
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					1	
_	organization without charge						
6	Total. Add lines 1 through 5						
/a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	ļ	1		}		
	·				<u> </u>		
Þ	Amounts included on lines 2 and 3			1			
	received from other than disqualified persons that exceed the greater of \$5,000				1		
	or 1% of the amount on line 13 for the year	1					
_	Add lines 7a and 7b		<u> </u>				
8	Public support (Subtract line 7c from		 		1		
-	line 6.)						
Secti	on B. Total Support		<u> </u>		· · · · · · · · · · · · · · · · · · ·		
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,		1		1		
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses			ĺ			
	acquired after June 30, 1975						
C	Add lines 10a and 10b				<u> </u>		
11	Net income from unrelated business					Ì	
	activities not included in line 10b, whether				İ		
	or not the business is regularly carried on		-			 	
12	Other income. Do not include gain or				1		
	loss from the sale of capital assets				1	1	
12	(Explain in Part IV.)		 		ļ		
13	Total support. (Add lines 9, 10c, 11, and 12.)	[1	1	
14	First five years. If the Form 990 is for the	L organizatio	n's first secon	d third fourth	I	ear as a section	n 501(c)(3)
• •	organization, check this box and stop he	-			•		
Secti	on C. Computation of Public Support						
15	Public support percentage for 2011 (line			3, column (f))		15	%
16	Public support percentage from 2010 Sci		-			16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2011 (y line 13, colu	mn (f))	17	%
18	Investment income percentage from 2010	Schedule A,	Part III, line 17			18	%
19a	331/3% support tests - 2011. If the organ						
	17 is not more than 331/3%, check this box	and stop here	. The organizati	on qualifies as	a publicly supp	orted organizat	ion . 🕨 🔲
b	331/3% support tests - 2010. If the organiz						
	line 18 is not more than 331/2%, check this	•	-	•	•	• •	_
20	Private foundation If the organization di	id not check a	hox on line 14	19a or 19b a	check this hox	and see instru	ctions 🕨 🔲

chedule A		Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	
		•••••
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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Employer identification number

The A	CAP Foundation		31-0181709
Par		or Advised Funds or Other Similar Fu	nds or Accounts. Complete if the
	organization answered "Yes" to F	T	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year) .		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and		
	funds are the organization's property, subject		
6	Did the organization inform all grantees, do		
	only for charitable purposes and not for the		
Par		olete if the organization answered "Yes	" to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held		
	Preservation of land for public use (e.g.,	recreation or education) Preservation	of an historically important land area
	 Protection of natural habitat 	☐ Preservation	of a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organiza	ation held a qualified conservation contribu	tion in the form of a conservation
	easement on the last day of the tax year.		
			Heid at the End of the Tax Year
а	Total number of conservation easements	<i></i>	2a
b	Total acreage restricted by conservation eas	sements	2b
C	Number of conservation easements on a ce	rtified historic structure included in (a)	2c
đ	Number of conservation easements include	led in (c) acquired after 8/17/06, and no	tona
	historic structure listed in the National Regis		· · 2d
3	Number of conservation easements modifie	d, transferred, released, extinguished, or te	rminated by the organization during the
	tax year ▶		
4	Number of states where property subject to		
5	Does the organization have a written po		
	violations, and enforcement of the conserva		
6	Staff and volunteer hours devoted to monitor	oring, inspecting, and enforcing conservation	n easements during the year
	-		
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation ea	sements during the year
	▶ \$		
8	Does each conservation easement reported		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		· · · · · · ·
9	In Part XIV, describe how the organization re		
	balance sheet, and include, if applicable, the		inancial statements that describes the
	organization's accounting for conservation		-
Part		ections of Art, Historical Treasures, o	
		vered "Yes" to Form 990, Part IV, line 8	
1a	If the organization elected, as permitted un		
	works of art, historical treasures, or other	•	
	public service, provide, in Part XIV, the text		
b	If the organization elected, as permitted u		
	works of art, historical treasures, or other	•	education, or research in furtherance of
	public service, provide the following amoun	-	
	(i) Revenues included in Form 990, Part VIII(ii) Assets included in Form 990, Part X .	, lıne 1	> \$
2	If the organization received or held works		_ · · · · · · · · · · · · · · · · · · ·
	following amounts required to be reported u	· · · · · · · · · · · · · · · · · · ·	
а	Revenues included in Form 990, Part VIII, lir	ne 1	> \$
b	Assets included in Form 990, Part X	<u></u>	> \$

Da	_	_	2
га	u	ы.	•

Part								
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and oth	her records, che	ck any of the	following	that are a sig	ınificant u	se of its
а	☐ Public exhibition		d 🗌 Loar	or exchange	program	s		
b	☐ Scholarly research		e 🗌 Othe	er				
С	☐ Preservation for future generations							
4	Provide a description of the organizat	ion's collections a	and explain how	they further th	he organi	zation's exem	ot purpose	n Part
	XIV.							
5	During the year, did the organization							
	assets to be sold to raise funds rather	than to be mainta	ined as part of th	ie organizatio	n's collec	tion?	☐ Yes	☐ No
Part	IV Escrow and Custodial Arra	ngements. Cor	nplete if the org	ganization a	nswered	"Yes" to For	m 990, P	art IV,
	line 9, or reported an amoun							
1a	Is the organization an agent, trustee,	custodian or oth	er intermediary f	or contribution	ons or oth	her assets not		
	included on Form 990, Part X?	. .					☐ Yes	☐ No
b	If "Yes," explain the arrangement in Pa	art XIV and comple	ete the following	table:				
						Arr	ount	
С	Beginning balance				1c			
d	Additions during the year		<i></i> .		1d			·
е	Distributions during the year				1e			
f	Ending balance				1f		•	
2a	Did the organization include an amour						☐ Yes	☐ No
	If "Yes," explain the arrangement in Pa	·	•					
Par			ation answered	"Yes" to Fo	orm 990,	Part IV, line	10.	
		(a) Current year	(b) Prior year	(c) Two years		Three years back	(e) Four ye	ars back
1a	Beginning of year balance	1,169,332	1,169,332	1,16	9,332	1,169,332		
b	Contributions	0	0		0	0		· · · · ·
	Net investment earnings, gains, and							
	losses	o	c		o	0		
d	Grants or scholarships	0			0	0		
e	Other expenditures for facilities and		· · · · · · · · · · · · · · · · · · ·					
•	programs	اه	C	,	o	0		
f	Administrative expenses	0		1	0	0		
9	End of year balance	1,169,332		1	9,332	1,169,332		
2	Provide the estimated percentage of the					1,100,002		
a	Board designated or quasi-endowmer) %	g, colaiiii (<i>a</i>),	ricia ao.			
b	-	63 %	- 70					
c	Temporarily restricted endowment ▶							
•	The percentages in lines 2a, 2b, and 2		n%					
3a	Are there endowment funds not in the			nat are held a	nd admin	ustered for the		
	organization by:	, poosooo					_	es No
	(i) unrelated organizations						3a(i)	√
	(ii) related organizations					· · · · ·	3a(ii)	1
ь	If "Yes" to 3a(ii), are the related organi	zatione lieted ae m		tule R2			3b	- •
4	Describe in Part XIV the intended uses						_ 00 _	
Part					-			
	Description of property	(a) Cost or ot		or other basis	(c) Acc	umulated	(d) Book v	shie .
	occupation or property	(investme		other)	• •	ciation	,,,	
	Land	.	0	0				
b	Buildings		0	0		0		
c	Leasehold improvements		0	0		0	<u> </u>	
d	Equipment		0	1,877		900		977
e	Other		0	0		0		 0
	Add lines 1a through 1e. (Column (d) m	nust equal Form 9			(c).)	▶		977
				1-7,	<i>.,,</i>			

Part VII	Investments—Other Securities.	See Form 990, Part X,	line 12.	
(a	Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year n	
(1) Financial	derivatives			· · · · · · · · · · · · · · · · · · ·
	neld equity interests			
(3) Other				
(A)				
(B)				
(C)		·		
(D)				
(E) (F)				
(G)		······································		<u> </u>
(H)				 -
(I)				
Total (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments-Program Related	. See Form 990, Part X,	line 13.	
	(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year n	
(1)				
_(2)				
_(3)				
(4)				
<u>(5)</u>				
_(6)				
(7)	 			
(8)		***		
<u>(9)</u> (10)				
	(b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Pa	rt X, line 15.		
		a) Description		(b) Book value
(1)		· · · · · · · · · · · · · · · · · · ·		
(2)				
(3)				
(4)		·		
(5)		·		
(6)				
<u>(7)</u> (8)	· · · · · · · · · · · · · · · · · · ·			
(9)		******		
(10)				
	ımn (b) must equal Form 990, Part X, ce	ol. (B) line 15.)		
Part X	Other Liabilities. See Form 990,	Part X, line 25.		
1.	(a) Description of liability	(b) Book value		
	income taxes			
(2)				
(3)				
(4)				
(5)			-	
(6)			-	
(8)		·	-	
(9)			1	
(10)		·	{	
(11)		•	1	
	(b) must equal Form 990, Part X, col. (B) line 25.)		1	
	SC 740) Ecotrote In Part YIV provide	the tout of the feetness to	the examination's financial states	ments that reports the

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Page	4
raye	6

Part	XI Reconciliation of Change in Net Assets from Form 990 to A	udite	Financial Stateme	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	2,228,830
2	Total expenses (Form 990, Part IX, column (A), line 25)		-	2	1,532,282
3	Excess or (deficit) for the year. Subtract line 2 from line 1		-	3	696,548
4	Net unrealized gains (losses) on investments			4	(771,756)
5	Donated services and use of facilities			5	0
6	Investment expenses		F	6	0
7	Prior period adjustments		F	7	0
8	Other (Describe in Part XIV.)		 	8	(15,000)
9	Total adjustments (net). Add lines 4 through 8		}	9	(786,756)
10	Excess or (deficit) for the year per audited financial statements. Combine			10	(90,208)
Part	·				
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	(771,756)		
b	Donated services and use of facilities	2b	156,368	1	
c	Recoveries of prior year grants	2c	0	1	
ď	Other (Describe in Part XIV.)	2d	(15,000)	1	
e	Add lines 2a through 2d			26	(630,388)
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i i		Ť	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	2,228,830	1	
b	Other (Describe in Part XIV.)	4b	0	-	
c	Add lines 4a and 4b			40	2,228,830
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	
Part	XIII Reconciliation of Expenses per Audited Financial Statem			r R	
1				1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	156,368		
b	Prior year adjustments	2b	0	┥ .	
c	Other losses	2c	0	1	
ď	Other (Describe in Part XIV.)	2d	0	1	
e	Add lines 2a through 2d			26	156,368
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	ĺ		F	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	o		
b	Other (Describe in Part XIV.)		0	-	
c				40	. 0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	
Part					
	lete this part to provide the descriptions required for Part II, lines 3, 5, and	9: Pa	rt III. lines 1a and 4: P	art	IV. lines 1b and 2b:
	, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII,				
any a	ditional information.				
PART	XI, LINE 8 and PART XII, LINE 2d - \$15,000 remaining pledge recorded as incor	ne in 2	2006 was written off in	2011	1.

Schedule D (For	m 990) 2011	Page 5
Part XIV	_{m 990)} 2011 Supplemental Informati	n (continued)
	·	

SCHEDULE (Form 990)

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

201

OMB No. 1545-0047

Open to Public Inspection

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

Employer Identification number 51-0181769 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Pari II General Information on Grants and Assistance The ASCAP Foundation Department of the Treasury Internal Revenue Service Name of the organization

the selection criteria used to award the grants or assistance?

Enter total number of other organizations listed in the line 1 table 2 Enter total number of security of the line 1 ta 2 Enter total number of other organizations listed in the line 1 ta For Paperwork Reduction Act Notice, see the Instructions for Form 890.

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

Cat. No. 50055P

Schedule I (Form 990) (2011)

æ

SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Part I

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

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

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OMB No. 1545-0047

Employer Identification number

2 □

► Attach to Form 990.

N \ □ 51-0181769 Does the organization maintain records to substantlate 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? General Information on Grants and Assistance he ASCAP Foundation

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

	(h) Purpose of grant or assistance	Teaching mentors	Staged reading series	Native American compos	Music scholarships (3)	scholarships(7)/educat	music scholarships (6)	music scholarship (1)	music camp scholar (2)	songwriter camp (4)	music scholarships (6)	music therapy program		-	Schedule I (Form 990) (2011)
	(g) Description of non-cash assistance														
	(f) Method of valuation (book, FMV, appraisal, other)														Cat. No. 50055P
	(e) Amount of non- cash assistance													ine 1 table	Ö
	(d) Amount of cash grant	000'9 \$	10,000	00:9	16,000	22,500	16,680	12,000	6,100	10,000	12,500	10,000		tions listed in the	
space is needed	(c) IRC section If applicable	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)		vernment organizat	s for Form 990.
ted if additional	(b) EIN	20-1125609	14-1915493	13-3206277	13-5562308	04-2300472	95-1642394	59-0974083	84-1158773	95-3199223	62-0974083	13-6007082		501(c)(3) and gov	see the Instruction
Part II can be duplicated if additional space	1 (a) Name and address of organization or government	(1) Alarm Will Sound 51 Wooster St. New York NY	(2) Festival of New American Music 4 Lighthouse St. Marina del Rey, CA	(3) Grand Canyon Musical Theater PO Box 1332 Grand Canyon, AZ	(4) New York University (NYU) 113-A 2nd Ave. New York NY 10003	(5) Berklee College of Music 1140 Boylston St. Boston, MA 02215	(6) University of Southern California 700 Childs Way, LA, CA 90089	(7) Univ. of Miami - Frost School PO Box 248165 Coral Gables, FL	(8) Perry-Mansfleld Performing Arts 40755 Routt Co Rd 36 Steamboat CO	(9) Grammy Foundation 3402 Pico Blvd Santa Monica, CA	(10) Walden School, Ltd. 31A 29 St. San Francisco, CA 64110	(11) Music Conservatory Westchestr 218 Central Ave White Plains, NY	(12)	2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table	P. B.

igus is in its is in its is in its is in its	\$200 - \$10,000 \$200 - \$10,000 \$200 - \$10,000 \$233 - \$5,625 \$200 - \$2,300 \$3,750 - \$6,250 \$3,750 - \$6,250 \$1,000 - \$5,000 \$1,000 - \$5,000 \$1,000 - \$5,000 \$1,000 - \$1,000 \$1,000 - \$1,000 \$1,000 - \$1,000 \$1,000	on required in Part I,	### S200 - \$10,000 \$200 - \$10,000 \$200 - \$10,000 \$200 - \$2,300 \$3,750 - \$6,250 \$1,000 - \$5,000 \$1,000 - \$5,000 #################################	1 Individual awards for lyricist & composer pr 102 \$200 - \$10,000 19 methods in the field of music. All institutional grantees are required to submit a written programs in the field of music. All institutional grantees are required to submit a written programs in the field of music. All institutional grantees are required to submit a written programs in the field of music. All institutional grantees are required to submit a written programs in the field of music. All institutional grantees are required to submit a written proposal requesting grant to provide the interpretation. Complete to submit a written proposal requesting grant to grant period.
lidue Isho Isho	\$233 - \$5.6. \$233 - \$5.6. \$230 - \$2.3 \$3,750 - \$6.2. \$1,000 - \$5.0 \$1,000 - \$5.0 at to provide the informat under the laws of the state o	on required in Part I, Delaware in 1975, was es	line 2, and any other add	itional information.
isho miss	\$233 - \$5.6. \$200 - \$2.3 \$3,750 - \$6.2! \$1,000 - \$5.0! T to provide the informat under the laws of the state o	on required in Part I, Delaware in 1975, was es	line 2, and any other add	Itional information.
mis:	\$200 - \$2,3 \$3,750 - \$6,2 \$1,000 - \$5,00 t to provide the informat under the laws of the state o	on required in Part I, Delawere in 1975, was es	line 2, and any other add	itional information. pport charitable / educational
mis:	\$3,750 - \$6,2 \$1,000 - \$5,00 t to provide the informal under the laws of the state o	on required in Part I, Delaware in 1975, was es	line 2, and any other add	itional information.
lars ledy	\$150 - \$3 \$1,000 - \$5.00 t to provide the informal under the laws of the state o	on required in Part I, Delaware in 1975, was es	line 2, and any other add	Itional information. pport charitable / educational
Bars	\$1,000 - \$5,00 T to provide the informat under the laws of the state o	on required in Part I, Delaware in 1975, was es	line 2, and any other add	itional information. pport charitable / educational
· ·	t to provide the informat under the laws of the state o	on required in Part I, Delaware in 1975, was es	line 2, and any other add	ltional information. pport charitable / educational
Part IV Supplemental Information. Complete this part	under the laws of the state o	Delawere in 1975, was et el requesting grant funds	stablished to promote and si	pport charitable / educational
programs in the field of music. All institutional grantees are required to submit a written proposal requesting grant funds and to file a final report at the end of the grant perlod.				
Additionally, they are requested to provide copies of their IRS tax ex works and / or recommendations of noted authorities.	xpemption notification and a	W9. Individual awards fo	or 2011 were awarded based	pemption notification and a W9. Individual awards for 2011 were awarded based on a panel's review of submitted

SCHEDULE J (Form 990)

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

The ASCAP Foundation

Employer identification number

51-0181769

Part I Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use Payments for business use of personal residence ☐ Travel for companions ☐ Tax indemnification and gross-up payments Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b 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? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III. ☐ Compensation committee ☐ Written employment contract ☐ Compensation survey or study ☐ Independent compensation consultant Approval by the board or compensation committee Form 990 of other organizations 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: 4a **b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b 4c 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. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 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: 5a 5b If "Yes" to line 5a or 5b, describe in Part III. 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: 6a 6b If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 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 Regulations section 53.4958-4(a)(3)? If "Yes," describe 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Schedule J (Form 990) 2011

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

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) for each listed Individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(B) Breakdown of W-2 and/or 1099-MISC compensation		(B) Breakdown o	f W-2 and/or 1099-MIS	C compensation				
(A) Name		(l) Base compensation	(II) Bonus & incentive compensation	(III) Other reportable compensation	(C) Netrement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported as deferred in prior Form 990
Colleen McDonough	€ €	104,026	0	1,080	12,883	5,407	123,396	0
	E							
8	E	***************************************						
	€							
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Schedule J (Form 880) 2011

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

The ASCAP Foundation

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 38, or 37.

► See separate instructions. ► Attach to Form 990.

201	Open to Public	Inspection

OMB No. 1545-0047

Employer Identification number 51-0181769

(g) Section 512(b)(13) controlled entity? (1) Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (f)
Direct controlling
entity (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) (d) Total Income Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Exempt Code section (c) Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) (b) Primary activity (b) Primary activity (1) (a) Name, address, and EIN of disregarded entity (a) Name, address, and EIN of related organization Part I Part III Đ 9 ন ල 9

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

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Cat. No. 50135Y

Schedule R (Form 990) 2011

Yes No

Schedule R (Form 990) 2011

Part III dentilic because	identification of helated Organizations, taxable as a Partnership (Complete if the organization answered Test to Form 990, Fart IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)	ons i a ganiza	kable as a Far tions treated as	rnersnip (Con s a partnership	during the t	organization a ax year.)	Iswered	188 10	rorm 990,	ran iv, ine	94
(a) Name, address, and EIN of related organization	(b) Primary activity do do (st fo fo fo co	(a) Legal domlcile (state or foreign	(d) Direct controlling antity	(e) Predominant income (related, unrelated, excluded from tax under tax under	(1) Share of total Income	(g) total Share of end-c year assets	Share of end-of- Disproportionate year assets allocations?	tionale amo	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	Percentage ownership
(1)							•				
(2)								<u> </u>			
(3)											
(4)									ļ		
(9)											
(9)											
(2)											
line 34 b	line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	ated o	rganizations tre	ated as a corp	oration or tr	ust during the	tax year.)				
Name, addres	(a) Name, address, and EIN of related organization		(b) Primary activity		(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp. S corp, or trust)		Share of total	(g) Share of end-of-year assets	(h) Percentage ownership
(1) American Society of EIN: 13-0434220 One	(1) American Society of Composers, Authors & Publishers IN: 13-0434220 One Lincoln Plaza, New York, NY 10023	rs 23					unincoporated		membership		
(2)											
(e)											
(4)											
(6)											
(9)											
w											
				<u> </u>					Š	Schedule R (Form 990) 2011	m 990) 2011

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) Schedule R (Form 990) 2011

Part V Transactio

					200	وا
Note.	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					2
	During the tax year, and the organization engage in any of the following transactions with one of more related organizations listed in Farts II-177	organizations listed i		ļ.	+	1
	Hecelpt of (I) interest (II) annuities (III) royantes of (IV) rent from a controlled entity				\downarrow	ŀ
Δ.	Gift, grant, or capital contribution to related organization(s)			<u></u>	>	
v	Gift, grant, or capital contribution from related organization(s)			ر ع		١
ס	Loans or loan guarantees to or for related organization(s)		•	- 1d	_	
	Loans or loan guarantees by related organization(s)		•	9	,	
•		•	•		-	
•	Sale of assets to related organization(s)			=		
0	Purchase of assets from related organization(s)	•		10		
	Exchange of assets with related organization(s)			=	,	L
:	l pass of acilities acuitment or other assets to related organization(s)	•		=	,	
-				<u> </u> -	-	
_	Lease of facilities, equipment, or other assets from related organization(s)	•	•	=		
. <u>.</u>	Performance of services or membership or fundraising solicitations for related organization(s)			¥	>	
_	Performance of services or membership or fundraising solicitations by related organization(s)	•		=		I_
E	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1 E	_	1
<u></u>	Sharing of paid employees with related organization(s)			- 1		
					-	
0	Reimbursement paid to related organization(s) for expenses			10 .	_	
σ	Reimbursement paid by related organization(s) for expenses			1p	`	
•	Other transfer of cash or property to related organization(s)			1	-	
-	Other transfer of cash or property from related organization(s)			. 1r	•	
7	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	, including covered i	elationships and trans	saction thres	holds.	ا. ا
	(8) Name of other normalization	(b) Transaction	(c) Amount involved	(d) Method of determining	ermining	
		type (a-r)		amount involved	pevio	b
ASC (1) ASC	ASCAP - In 2011 48 members/heirs elected to donate/bequest a portion or all of their royalties from ASCAP to The ASCAP Foundation, Also, ASCAP made a contribution to The ASCAP Foundation in 2011 for program support.	э'е	\$485,866	Amount received	lved	
ASC (2)	ASCAP - ASCAP provides office space at no charge to The ASCAP Foundation, the estimated value of the space is,	E	19,500	Market value		
ASC (3) sala	ASCAP - ASCAP personnel assist in the administration of The ASCAP Foundation activities as needed. Estimated salaries & benefits based on their current salary rate & estimated time spent on The ASCAP Foundation.	c	136,868	Estimated value	alue	
ASC (4) supp	ASCAP - The ASCAP Foundation reimburses ASCAP for co-op payroll services, employee benefits, postage, (4) supplies, telephone and other office related services rendered.	0	376,995	376,995 actual reimburse	ırse	
9						1
9						
2			School	Schadule B (Form 990) 2011	1000	١Ę

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

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

(2) (3) (4) (6)	(state or foreign country)	income (related, unrelated, excluded from tax under section 512-514)	section 501(c)(3) organizations?	total income	end-of-year assets	allocations?	of Schedule K-1	managing partner?	ownership
			Yes No				(Form 1065)		
						Yes No		Yes No	
(5)									
(5) (6)									
(6)									
(9)									
(6)									
(6)									
(01)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)							-		

chedule R (Form 990) 2011	Page 5
art VII	Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).	
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- -		
••••		
		
		- -

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization
The ASCAP Foundation

Employer identification number 51-0181769

Part III - Statement of Service Accomplishments - response to line 2undertake significant program services during the year
The ASCAP Foundation accepts grant applications on an annual basis. Grants are reviewed and are selected for funding based on The
ASCAP Foundation's mission. In some cases new funding has become available to establish new programs. In 2011 The ASCAP
Foundation funded an additional 31 programs that had not been funded in 2010. These programs are reflected in Part III, lines 4 a - d.
Programs over \$5,000 are also reflected on Schedule I.
Part III - Statement of Service Accomplishments - response to line 3cease conducting or significant changes in programs Some
organizations may not have requested funding in 2011, some may have only been a one year commitment and in other cases the source of
funding is no longer available or the program is not as vital to the Foundation's mission. In total 17 programs were eliminated in 2011.
Part III - Statement of Service Accomplishments - response to line 4d - Other program services
Grants for senior services, (1) and other / humanitarian, (5). Other expenses include salaries, benefits and other allocated expenses related
to program activity.
Part VI, Section A, response to line 6 - Does the organization have members or stockholders?
The ASCAP Foundation membership is represented by ASCAP's Board of Directors.
Part VI, Section A, response to line 7 (a)persons who may elect one or more members of the governing body?
A meeting of the membership is held annually for the election of Directors of The ASCAP Foundation.
Part VI, Section B, Policies - response to line 11A provide a copy of this Form 990 to all members of its governing body before filing the
form. The Form 990 is reviewed by internal staff members. The Board of Director's of The ASCAP Foundation reviews the annual
independent audited financial statements as well as the 990 program service accomplishments and functional expenses.

ume of the organization	Pa Employer identification number
he ASCAP Foundation	51-0181769
art VI. Section D. Delicios, response to line 15 a.b., componention	
rt VI, Section B, Policies - response to line 15 a, b compensation	
e organization maintains a formal written compensation program. Annu	ual performance appraisal's are prepared by an employee's
pervisor or manager, it is reviewed and discussed with the employee. C	compensation and merit increases are based on a program that
linked to the current market.	
ert VI, Section C, Disclosure - response to line 19: The Federal form 990	and other information regarding The ASCAP Foundation are
railable on the website, ASCAPFoundation.org or by request to The ASC	AP Foundation.
······································	
ort XI, Other changes in net assets or fund balances:	
e other changes in net assets or fund balances reflect unrealized losses	s on investments of \$771,756 in 2011 and the write off of a
eviously recorded pledge of \$15,000 that is not anticipated to be collecte	ed.
onious, y constant prouge of the property of t	