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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)

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

OMB No 1545-0047

**2011**

Open to Public Inspection

**A For the 2011 calendar year, or tax year beginning JUL 1, 2011 and ending JUN 30, 2012**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C Name of organization</b> <b>ALVIN AILEY DANCE FOUNDATION, INC.</b> Doing Business As		<b>D Employer identification number</b> <b>13-2584273</b>
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>405 WEST 55TH STREET</b>		<b>E Telephone number</b> <b>212-405-9000</b>
	City or town, state or country, and ZIP + 4 <b>NEW YORK, NY 10019</b>		<b>G Gross receipts \$</b> <b>63,101,643.</b> <b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)
	<b>F Name and address of principal officer:</b> BENNETT RINK <b>SAME AS C ABOVE</b>		<b>H(c) Group exemption number</b> ▶
<b>I Tax-exempt status</b> <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J Website:</b> ▶ WWW.ALVINAILEY.ORG			
<b>K Form of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			<b>L Year of formation:</b> 1958 <b>M State of legal domicile:</b> NY

Part I Summary		Prior Year	Current Year
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	
	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 individuals employed in calendar year 2011 (Part V, line 2a)	5	762
	6 Total number of volunteers (estimate if necessary)	6	92
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	187,021.
	7b Net unrelated business taxable income from Form 990-T, line 84	7b	-4,965.
Revenue	8 Contributions and grants (Part VIII, line 1h)	11,957,843.	14,322,871.
	9 Program service revenue (Part VIII, line 2g)	21,659,350.	22,819,015.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,077,464.	2,381,028.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-345,021.	-430,673.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	35,349,636.	39,092,241.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,077,504.	1,501,633.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	16,894,636.	18,474,855.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,926,724.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	15,478,233.	14,575,615.
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	33,450,373.	34,552,103.
19 Revenue less expenses Subtract line 18 from line 12	1,899,263.	4,540,138.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 155,598,762.	End of Year 156,824,391.
	21 Total liabilities (Part X, line 26)	21,594,073.	20,684,853.
	22 Net assets or fund balances Subtract line 21 from line 20	134,004,689.	136,139,538.

<b>Part II Signature Block</b>			
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 <i>Pamela Robinson</i>	Date 8/25/2011	
	PAMELA ROBINSON, TREASURER & CFO Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name MARTIN GREIF	Preparer's signature <i>Martin Greif</i>	Date 2/24/11
	Firm's name MCGLADREY LLP	Firm's EIN 42-0714325	Check <input type="checkbox"/> if self-employed PTIN P00029738
	Firm's address 1185 AVENUE OF THE AMERICAS NEW YORK, NY 10036-2602	Phone no. 212-372-1000	

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

SCANNED MAR 11 2015

RECEIVED  
 MAR 02 2015  
 GARDEN, UT

67-25

**Part III Statement of Program Service Accomplishments**

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

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**

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No  
 If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No  
 If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ 14,767,029. including grants of \$ \_\_\_\_\_) (Revenue \$ 11,638,722.)  
**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-FOUR YEAR HISTORY, THE COMPANY HAS EARNED A REPUTATION AS ONE OF THE MOST ACCLAIMED INTERNATIONAL AMBASSADORS OF AMERICAN**

4b (Code \_\_\_\_\_) (Expenses \$ 1,939,196. including grants of \$ \_\_\_\_\_) (Revenue \$ 1,144,602.)  
**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. NOW UNDER THE ARTISTIC DIRECTION OF FORMER ALVIN AILEY AMERICAN DANCE THEATER DANCER TROY POWELL, THE COMPANY IS COMPRISED OF 12 OF THE AILEY SCHOOL'S MOST TALENTED STUDENTS. OVER THE PAST 38 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.**

4c (Code \_\_\_\_\_) (Expenses \$ 10,927,942. including grants of \$ 1,501,633.) (Revenue \$ 9,488,936.)  
**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.**

4d Other program services (Describe in Schedule O.)  
 (Expenses \$ 813,347. including grants of \$ \_\_\_\_\_) (Revenue \$ 688,808.)

4e Total program service expenses **28,447,514.**

**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>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
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>		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
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>		X
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>		X
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>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a 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>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
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>		X
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>	X	
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>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
<b>22</b> 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>	X	
<b>23</b> 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? <i>If "Yes," complete Schedule J</i>	X	
<b>24a</b> 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 lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	X	
<b>24b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
<b>24c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		X
<b>24d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> 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>		X
<b>25b</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>		X
<b>26</b> 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>		X
<b>27</b> 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? <i>If "Yes," complete Schedule L, Part III</i>		X
<b>28</b> 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)		
<b>28a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
<b>28b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
<b>28c</b> 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? <i>If "Yes," complete Schedule L, Part IV</i>		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
<b>32</b> 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>		X
<b>33</b> 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>		X
<b>34</b> 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>		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
<b>35b</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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
<b>37</b> 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>		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	X	

**Part V** Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2a</b>	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		
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
<b>3b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
<b>4a</b>	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)?		X
<b>4b</b>	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		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>5c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	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?		X
<b>6b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>7a</b>	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?	X	
<b>7b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
<b>7c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>7d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
<b>7e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>7f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>7g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>7h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>9a</b>	Did the organization make any taxable distributions under section 4966?		
<b>9b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter		
<b>10a</b>	Initiation fees and capital contributions included on Part VIII, line 12		
<b>10b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter.		
<b>11a</b>	Gross income from members or shareholders		
<b>11b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>12b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
<b>13a</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O		
<b>13b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
<b>13c</b>	Enter the amount of reserves on hand		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		X
<b>14b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

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

**Section 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.		
	35		
b	Enter the number of voting members included in line 1a, above, who are independent		
	33		
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?		X
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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
8a		X	
b	Each committee with authority to act on behalf of the governing body?	X	
8b		X	
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		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
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?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
11a		X	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12b		X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
12c		X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
14		X	
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?		
a	The organization's CEO, Executive Director, or top management official	X	
15a		X	
b	Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	X	
15b		X	
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?		X
16a			X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed **CA, MA, MD, NC, NJ, NY, PA, VA**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website  Another's website  Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **PAMELA ROBINSON - 212-405-9000**  
**405 WEST 55TH STREET, NEW YORK, NY 10019**

**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 employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JAMES G. ABRUZZO TRUSTEE	5.00	X					0.	0.	0.	
(2) GINA F. ADAMS TRUSTEE	5.00	X					0.	0.	0.	
(3) SIMIN N. ALLISON VICE CHAIR	5.00	X		X			0.	0.	0.	
(4) ELEANOR S. APPLEWHAITE, ESQ. TRUSTEE	5.00	X					0.	0.	0.	
(5) ROBERT BATTLE TRUSTEE/ARTISTIC DIRECTOR	50.00	X					189,894.	0.	16,215.	
(6) NICOLE A. BERNARD TRUSTEE	5.00	X					0.	0.	0.	
(7) ANTOINETTE COOPER BLAIR TRUSTEE	5.00	X					0.	0.	0.	
(8) JUDITH BYRD TRUSTEE	5.00	X					0.	0.	0.	
(9) ANTHONY M. CARVETTE TRUSTEE	5.00	X					0.	0.	0.	
(10) KATHRYN C. CHENAULT TRUSTEE	5.00	X					0.	0.	0.	
(11) DAVID S. DANIEL TRUSTEE	5.00	X					0.	0.	0.	
(12) CATHERINE DAVIS TRUSTEE	5.00	X					0.	0.	0.	
(13) DARIA FOSTER TRUSTEE	5.00	X					0.	0.	0.	
(14) GUIDO GOLDMAN VICE CHAIR	5.00	X		X			0.	0.	0.	
(15) ANITA-AGNES O. HASSELL TRUSTEE	5.00	X					0.	0.	0.	
(16) ROBERT KISSANE VICE CHAIR	5.00	X		X			0.	0.	0.	
(17) DEBRA L. LEE VICE CHAIR	5.00	X		X			0.	0.	0.	

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MICHELLE Y. LEE TRUSTEE	5.00	X						0.	0.	0.
(19) NATASHA LEIBEL LEVINE TRUSTEE	5.00	X						0.	0.	0.
(20) ANTHONY A. LEWIS TRUSTEE	5.00	X						0.	0.	0.
(21) LINDA M. LINDENBAUM VICE CHAIR	5.00	X		X				0.	0.	0.
(22) SHARON GERSTEN LUCKMAN EXECUTIVE DIRECTOR/SECRETARY	50.00	X		X				430,856.	0.	312,516.
(23) LESLIE L. MAHERAS TRUSTEE	5.00	X						0.	0.	0.
(24) ARTHUR J. MAHON TRUSTEE	5.00	X						0.	0.	0.
(25) HENRY MCGEE PRESIDENT	8.00	X		X				0.	0.	0.
(26) ARTHUR J. MIRANTE II VICE CHAIR	5.00	X		X				0.	0.	0.
<b>1b Sub-total</b>								620,750.	0.	328,731.
<b>c Total from continuation sheets to Part VII, Section A</b>								1,672,568.	0.	413,261.
<b>d Total (add lines 1b and 1c)</b>								2,293,318.	0.	741,992.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **20**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	X	
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? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

**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. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
OPUS 3 ARTISTS 470 PARK AVE. SO., NEW YORK, NY 10016	BOOKING AGENT	232,745.
DIVINE PHYSICAL THERAPY, 1 UNIVERSITY PLAZA, 6TH FLOOR, BROOKLYN, NY 11201	PHYSICAL THERAPY SERVICES	169,715.
OBERLANDER GROUP 143 REMSEN STREET, COHOES, NY 12047	GRAPHIC DESIGN & PRINTING	154,005.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **3**

SEE PART VII, SECTION A CONTINUATION SHEETS

**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	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	3,895,287.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	460,395.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	9,967,189.				
	g Noncash contributions included in lines 1a-1f \$		665,041.				
	<b>h Total. Add lines 1a-1f</b>		<b>14322871.</b>				
	Program Service Revenue	2 a <b>PERFORMANCE FEES</b>	Business Code 900099	12566501.	12566501.		
b <b>TUITION &amp; TEACHING FEE</b>		900099	9,193,194.	9,193,194.			
c <b>STUDIO INCOME</b>		531120	763,578.	576,557.	187,021.		
d <b>STUDENT FEES</b>		900099	160,417.	160,417.			
e <b>SCHOOL TICKET SALES</b>		900099	135,325.	135,325.			
f All other program service revenue							
<b>g Total. Add lines 2a-2f</b>			<b>22819015.</b>				
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)		1,844,324.			1,844,324.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		146,809.			146,809.	
	6 a Gross rents	(i) Real					
		(ii) Personal					
		b Less rental expenses					
		c Rental income or (loss)					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	23338727				
		(ii) Other					
		b Less. cost or other basis and sales expenses	22802023				
		c Gain or (loss)	536,704.				
	d Net gain or (loss)		536,704.			536,704.	
	8 a Gross income from fundraising events (not including \$ 3,895,287. of contributions reported on line 1c) See Part IV, line 18	a	266,833.				
		b Less direct expenses	1206461.				
c Net income or (loss) from fundraising events			-939,628.			-939,628.	
9 a Gross income from gaming activities See Part IV, line 19	a						
	b Less. direct expenses						
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a	113,169.					
	b Less: cost of goods sold	918.					
	c Net income or (loss) from sales of inventory		112,251.	112,251.			
Miscellaneous Revenue		Business Code					
11 a <b>EXPENSE REIMBURSEMENTS</b>	900099	216,823.	216,823.				
b <b>MISC. INCOME</b>	900099	33,072.			33,072.		
c							
d All other revenue							
e <b>Total. Add lines 11a-11d</b>		<b>249,895.</b>					
<b>12 Total revenue See instructions.</b>		<b>39092241.</b>	<b>22961068.</b>	<b>187,021.</b>	<b>1621281.</b>		

**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 response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	1,501,633.	1,501,633.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,343,615.	198,189.	1,145,426.	
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	13,876,487.	11,894,484.	1,032,362.	949,641.
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	516,235.	462,583.	25,437.	28,215.
9 Other employee benefits	1,746,644.	1,410,757.	219,288.	116,599.
10 Payroll taxes	991,874.	844,964.	78,525.	68,385.
11 Fees for services (non-employees)				
a Management				
b Legal	61,861.		61,861.	
c Accounting	111,105.		111,105.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	203,717.		203,717.	
g Other	1,805,065.	1,437,118.	299,412.	68,535.
12 Advertising and promotion	1,153,063.	1,153,063.		
13 Office expenses	405,738.	288,913.	35,640.	81,185.
14 Information technology	285,666.	234,513.	33,492.	17,661.
15 Royalties	191,922.	191,922.		
16 Occupancy	1,734,619.	1,573,365.	115,181.	46,073.
17 Travel	2,680,677.	2,611,333.	40,384.	28,960.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	1,041,083.	895,331.	104,109.	41,643.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,649,731.	1,419,053.	164,689.	65,989.
23 Insurance	165,210.	143,495.	19,962.	1,753.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>COMMISSIONS TO AGENTS</b>	939,498.	939,498.		
b <b>DEBT SRVC &amp; OTHER FEES</b>	459,802.	105,313.	327,501.	26,988.
c <b>EQUIPMENT RENTAL</b>	384,978.	367,026.	11,754.	6,198.
d <b>COSTUMES &amp; WARDROBE</b>	299,794.	299,794.		
e All other expenses	1,002,086.	475,167.	148,020.	378,899.
25 <b>Total functional expenses.</b> Add lines 1 through 24e	34,552,103.	28,447,514.	4,177,865.	1,926,724.
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	1	Cash - non-interest-bearing	12,300,455.	1	11,258,544.
	2	Savings and temporary cash investments	9,169,309.	2	9,970,684.
	3	Pledges and grants receivable, net	8,953,628.	3	7,139,909.
	4	Accounts receivable, net	539,945.	4	420,543.
	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)), 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)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	13,296.	8	15,815.
	9	Prepaid expenses and deferred charges	337,530.	9	193,958.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 52,351,877.		
	b	Less: accumulated depreciation	10b 11,406,318.	10c	40,945,559.
	11	Investments - publicly traded securities	66,309,871.	11	68,092,844.
	12	Investments - other securities See Part IV, line 11	13,459,228.	12	16,538,271.
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	2,271,146.	15	2,248,264.
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	155,598,762.	16	156,824,391.	
<b>Liabilities</b>	17	Accounts payable and accrued expenses	5,118,463.	17	5,160,255.
	18	Grants payable		18	
	19	Deferred revenue	2,054,064.	19	1,690,031.
	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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	14,421,546.	25	13,834,567.
	26	<b>Total liabilities.</b> Add lines 17 through 25	21,594,073.	26	20,684,853.
<b>Net Assets or Fund Balances</b>	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	69,603,631.	27	76,150,381.
	28	Temporarily restricted net assets	19,968,364.	28	15,368,678.
	29	Permanently restricted net assets	44,432,694.	29	44,620,479.
	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	<b>Total net assets or fund balances</b>	134,004,689.	33	136,139,538.	
34	<b>Total liabilities and net assets/fund balances</b>	155,598,762.	34	156,824,391.	

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	39,092,241.
2	Total expenses (must equal Part IX, column (A), line 25)	2	34,552,103.
3	Revenue less expenses. Subtract line 2 from line 1	3	4,540,138.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	134,004,689.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-2,405,289.
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	136,139,538.

**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 <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?		X
b	Were the organization's financial statements audited by an independent accountant?	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> 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 in the Single Audit Act and OMB Circular A-133?	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	X	

Form 990 (2011)

**SCHEDULE A**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

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

OMB No 1545-0047

**2011**

Open to Public  
Inspection

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 described in 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?
 

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

  - (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 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).

(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	
<b>Total</b>									

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization 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
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3						
<b>5</b> 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)						
<b>6 Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions)					12	
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14		%
<b>15</b> Public support percentage from 2010 Schedule A, Part II, line 14	15		%
<b>16a 33 1/3% support test - 2011.</b> 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 <input type="checkbox"/>			
<b>b 33 1/3% support test - 2010.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
<b>17a 10% -facts-and-circumstances test - 2011.</b> 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 <input type="checkbox"/>			
<b>b 10% -facts-and-circumstances test - 2010.</b> 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 <input type="checkbox"/>			
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>			

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	31110565.	9458190.	10564613.	11957843.	14322871.	77414082.
<b>2</b> 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	18688350.	19913846.	17932908.	21723406.	22848817.	101107327
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5	49798915.	29372036.	28497521.	33681249.	37171688.	178521409
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons	9056948.	10357289.	1460327.	2503799.	5953000.	29331363.
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
<b>c</b> Add lines 7a and 7b	9056948.	10357289.	1460327.	2503799.	5953000.	29331363.
<b>8 Public support</b> (Subtract line 7c from line 6)						149190046

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>9</b> Amounts from line 6	49798915.	29372036.	28497521.	33681249.	37171688.	178521409
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3121954.	2574371.	2310536.	1790658.	1991133.	11788652.
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b	3121954.	2574371.	2310536.	1790658.	1991133.	11788652.
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	42,778.	95,113.	111,113.	159,838.	187,021.	595,863.
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	174,315.	214,468.	135,553.	123,368.	145,323.	793,027.
<b>13 Total support</b> (Add lines 9, 10c, 11, and 12)	53137962.	32255988.	31054723.	35755113.	39495165.	191698951

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

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	77.83 %
<b>16</b> Public support percentage from 2010 Schedule A, Part III, line 15	16	73.48 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	6.15 %
<b>18</b> Investment income percentage from 2010 Schedule A, Part III, line 17	18	6.98 %

**19a 33 1/3% support tests - 2011.** 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 - 2010.** 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



**SCHEDULE D**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ 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.

OMB No 1545-0047

**2011**  
Open to Public Inspection

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

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

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

Protection of natural habitat  Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

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

6 Staff and volunteer hours devoted to monitoring, inspecting, 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 section 170(h)(4)(B)(ii)?  Yes  No

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 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

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

(i) 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 (ASC 958) 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 acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

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

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

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

	Amount
1c	
1d	
1e	
1f	

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	43,594,415.	37,287,514.	30,168,886.	33,849,566.	
b Contributions	6,782,071.	2,894,110.	2,897,362.	3,093,804.	
c Net investment earnings, gains, and losses	-1,183,022.	3,884,825.	5,070,489.	-5,990,017.	
d Grants or scholarships					
e Other expenditures for facilities and programs	643,145.	472,034.	849,223.	784,467.	
f Administrative expenses					
g End of year balance	48,550,319.	43,594,415.	37,287,514.	30,168,886.	

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment ▶ 7.00 %
- b Permanent endowment ▶ 93.00 %
- c Temporarily restricted endowment ▶ \_\_\_\_\_ %

The percentages in lines 2a, 2b, and 2c should equal 100%

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

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(i), are the related organizations listed as required on Schedule R?

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		9,334,293.		9,334,293.
b Buildings		33,199,885.	6,286,801.	26,913,084.
c Leasehold improvements		9,817,699.	5,119,517.	4,698,182.
d Equipment				
e Other				
<b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				40,945,559.

**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 valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) HEDGE FUNDS	16,538,271.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶	16,538,271.	

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

**Part X Other Liabilities.** See Form 990, Part X, line 25

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) BONDS PAYABLE	13,760,000.
(3) LIABILITIES FOR AMOUNTS HELD FOR	
(4) OTHERS	74,567.
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	13,834,567.

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).

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	39,092,241.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	34,552,103.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	4,540,138.
4	Net unrealized gains (losses) on investments	4	-2,405,289.
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 through 8	9	-2,405,289.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	2,134,849.

**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	35,710,284.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-2,405,289.
b	Donated services and use of facilities	2b	404,729.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	-1,177,680.
e	Add lines 2a through 2d	2e	-3,178,240.
3	Subtract line 2e from line 1	3	38,888,524.
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	203,717.
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	203,717.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	39,092,241.

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

1	Total expenses and losses per audited financial statements	1	33,575,435.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	404,729.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	404,729.
3	Subtract line 2e from line 1	3	33,170,706.
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	203,717.
b	Other (Describe in Part XIV)	4b	1,177,680.
c	Add lines 4a and 4b	4c	1,381,397.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	34,552,103.

**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, line 2, 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

**PART V, LINE 4: 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**

Part XIV Supplemental Information (continued)

WELL AS BOARD-DESIGNATED FUNDS.

PART X, LINE 2: MANAGEMENT HAS EVALUATED THE FOUNDATION'S TAX POSITIONS AND HAS CONCLUDED THAT THE FOUNDATION HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS. GENERALLY, THE FOUNDATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY U.S. FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2009, WHICH IS THE STANDARD STATUTE OF LIMITATIONS LOOK-BACK PERIOD.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

TUITION REMISSIONS -1,177,680.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

TUITION REMISSIONS 1,177,680.

**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

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

OMB No 1545-0047

**2011**

Open to Public  
Inspection

Name of the organization

Employer identification number

**ALVIN AILEY DANCE FOUNDATION, INC.**

**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 its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region** (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	DANCE PERFORMANCES	893,110.
RUSSIA & THE NEWLY INDEPENDENT STATES	0	0	PROGRAM SERVICES	DANCE PERFORMANCES	127,845.
<b>3 a Sub-total</b>	0	0			1,020,955.
<b>b Total from continuation sheets to Part I</b>	0	0			0.
<b>c Totals (add lines 3a and 3b)</b>	0	0			1,020,955.

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

Schedule F (Form 990) 2011





Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)  Yes  No
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)  Yes  No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)  Yes  No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)  Yes  No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)  Yes  No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)  Yes  No



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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col (c))	
		LONG DINNER (event type)	APOLLO DINNER (event type)	1 (total number)		
Revenue	1	Gross receipts	2,505,665.	977,509.	678,946.	4,162,120.
	2	Less. Charitable contributions	2,379,271.	929,989.	586,027.	3,895,287.
	3	Gross income (line 1 minus line 2)	126,394.	47,520.	92,919.	266,833.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs		53,359.		53,359.
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	528,591.	278,853.	345,658.	1,153,102.
	10	Direct expense summary Add lines 4 through 9 in column (d)				( 1,206,461 )
	11	Net income summary Combine line 3, column (d), and line 10				-939,628.

**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	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary Add lines 2 through 5 in column (d)				( _____ )
	8	Net gaming income summary Combine line 1, column d, and line 7				

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? .. .. .  Yes  No  
 b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? .. .. .  Yes  No  
 b If "Yes," explain: \_\_\_\_\_





**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. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
TUITION REMISSION	325	1,177,680.	0.		
LIVING STIPENDS	28	169,328.	0.		
TUITION ASSISTANCE	8	136,100.	0.		
PROFESSIONAL DEVELOPMENT	1	18,525.	0.		

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

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

**2011**

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.

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 Questions Regarding Compensation**

	Yes	No
<b>1a</b> 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 <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input checked="" type="checkbox"/> Tax indemnification and gross-up payments <input checked="" type="checkbox"/> Discretionary spending account <input checked="" type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<b>b</b> If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	<b>X</b>	
<b>2</b> 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?	<b>X</b>	
<b>3</b> 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. <input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
<b>4</b> 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 <b>a</b> Receive a severance payment or change-of-control payment? <b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan? <b>c</b> 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		
<b>4a</b>		<b>X</b>
<b>4b</b>	<b>X</b>	
<b>4c</b>		<b>X</b>
<b>Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.</b>		
<b>5</b> 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 <b>a</b> The organization? <b>b</b> Any related organization? If "Yes" to line 5a or 5b, describe in Part III.		
<b>5a</b>		<b>X</b>
<b>5b</b>		<b>X</b>
<b>6</b> 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 <b>a</b> The organization? <b>b</b> Any related organization? If "Yes" to line 6a or 6b, describe in Part III		
<b>6a</b>		<b>X</b>
<b>6b</b>		<b>X</b>
<b>7</b> 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	<b>X</b>	
<b>8</b> 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 in Part III		<b>X</b>
<b>9</b> If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

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

Schedule J (Form 990) 2011

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

For each individual whose compensation must be reported 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

(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 as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ROBERT BATTLE	(i)	189,894.	0.	3,984.	12,231.	206,109.	0.
	(ii)	0.	0.	0.	0.	0.	0.
2 SHARON GERSTEN LUCKMAN	(i)	430,856.	0.	298,850.	13,666.	743,372.	0.
	(ii)	0.	0.	0.	0.	0.	0.
3 PAMELA ROBINSON	(i)	210,066.	0.	6,750.	27,716.	244,532.	0.
	(ii)	0.	0.	0.	0.	0.	0.
4 BENNETT RINK	(i)	278,845.	0.	6,750.	27,784.	313,379.	0.
	(ii)	0.	0.	0.	0.	0.	0.
5 MASASUMI CHAYA	(i)	227,926.	0.	271,750.	12,133.	511,809.	0.
	(ii)	0.	0.	0.	0.	0.	0.
6 CALVIN HUNT	(i)	210,767.	0.	6,393.	9,601.	226,761.	0.
	(ii)	0.	0.	0.	0.	0.	0.
7 THOMAS COTT	(i)	188,217.	0.	5,760.	11,241.	205,218.	0.
	(ii)	0.	0.	0.	0.	0.	0.
8 CHRISTOPHER ZUNNER	(i)	163,382.	0.	4,950.	9,371.	177,703.	0.
	(ii)	0.	0.	0.	0.	0.	0.
9 JUDITH JAMISON	(i)	119,812.	0.	7,350.	5,712.	406,427.	0.
	(ii)	0.	0.	0.	0.	0.	0.
10	(i)						
	(ii)						
11	(i)						
	(ii)						
12	(i)						
	(ii)						
13	(i)						
	(ii)						
14	(i)						
	(ii)						
15	(i)						
	(ii)						
16	(i)						
	(ii)						

**Part III** Supplemental Information

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

PART I, LINE 1A: A DISCRETIONARY SPENDING ACCOUNT, HOUSING ALLOWANCE AND PAYMENTS TO OFFSET TAX CONSEQUENCES WERE PAID TO THE ARTISTIC DIRECTOR EMERITA. THESE AMOUNTS ARE INCLUDED IN "OTHER REPORTABLE COMPENSATION" AND REPORTED ON THE W2.

PART I, LINE 4B: THE EXECUTIVE DIRECTOR HAS AN EMPLOYMENT CONTRACT WITH THE FOUNDATION THAT COVERS THE PERIOD FROM JULY 1, 2009 TO JUNE 30, 2013. INCLUDED IN THE AGREEMENT IS THE PROVISION FOR A SPECIAL BONUS OF \$500,000 AND A SUPPLEMENTAL RETIREMENT PAYMENT OF \$600,000. THESE 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. THESE PAYMENTS 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 \$275,000, WHICH IS COMPRISED

**Part III Supplemental Information**

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

OF \$125,000 OF THE SPECIAL BONUS AND \$150,000 OF THE SUPPLEMENTAL RETIREMENT PAYMENT. EACH REPRESENTS 1/4 OF THE TOTAL AMOUNT LISTED ABOVE. THESE AMOUNTS HAVE NOT BEEN PAID AND HAVE ONLY BEEN INCLUDED RATABLY UNDER THE PERIOD THE SERVICES ARE TO BE PERFORMED UNDER THE CONTRACT, PER THE INSTRUCTIONS FOR SCHEDULE J.

THE ASSOCIATE ARTISTIC DIRECTOR HAS AN AGREEMENT WITH THE FOUNDATION TO BE PROVIDED A SUPPLEMENTAL RETIREMENT PENSION PAYMENT. THE AGREEMENT COVERS THE PERIOD FROM JULY 1, 2010 TO JUNE 30, 2014. THE PAYMENT OF \$1,060,000 WILL BE MADE TO HIM OR TO HIS DESIGNATED DEATH BENEFICIARY/IES, AS THE CASE MAY BE, ON OR AS SOON AS PRACTICABLE AFTER THE FIRST TO OCCUR OF: (I) HIS TERMINATION OF EMPLOYMENT ON ACCOUNT OF HIS DEATH OR DISABILITY PRIOR TO JUNE 30, 2014; (II) HIS INVOLUNTARY TERMINATION OF EMPLOYMENT BY AADF PRIOR TO JUNE 30, 2014 WITHOUT CAUSE; (III) JUNE 30, 2014 IF HE IS AN ACTIVE EMPLOYEE OF AADF ON JUNE 30, 2014; OR (IV) ANY TERMINATION OF EMPLOYMENT BY HIM OCCURRING AT A TIME AND UNDER CIRCUMSTANCES THAT WOULD GIVE HIM UNPAID LEAVE RIGHTS UNDER THE FAMILY AND MEDICAL LEAVE ACT OF 1993 IF HE HAD ELECTED TO TAKE A LEAVE OF ABSENCE RATHER THAN TO TERMINATE HIS EMPLOYMENT. INCLUDED ON SCHEDULE J, PART II, COLUMN C IS \$265,000, WHICH REPRESENTS 1/4

Part III Supplemental Information

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

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.

PART I, LINE 7: A NON FIXED PAYMENT IN THE FORM OF A DISCRETIONARY SPENDING ACCOUNT WAS PROVIDED TO THE ARTISTIC DIRECTOR DURING THE 2011 CALENDAR YEAR.

**SCHEDULE K  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

OMB No. 1545-0047

**2011**

Open to Public  
Inspection

Name of the organization

**ALVIN AILEY DANCE FOUNDATION, INC.**

Employer identification number  
**13-2584273**

**Part I Bond Issues** SEE PART VI FOR COLUMNS (A) AND (F) CONTINUATIONS

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Deceased (h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No
TRUST FOR CULTURAL RESOURCES OF THE CITY OF	91-1882413	649717MV4	11/06/03	20000000.	TO FINANCE PART A RESOURCES OF THE CITY OF THE CONSTRUCTI		X		X
B									
C									
D									

**Part II Proceeds**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired								
2 Amount of bonds legally defeased								
3 Total proceeds of issue		20,000,000.						
4 Gross proceeds in reserve funds								
5 Capitalized interest from proceeds		626,103.						
6 Proceeds in refunding escrows								
7 Issuance costs from proceeds		440,173.						
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds								
10 Capital expenditures from proceeds		18,762,525.						
11 Other spent proceeds		171,200.						
12 Other unspent proceeds								
13 Year of substantial completion		2007						
14 Were the bonds issued as part of a current refunding issue?			X					
15 Were the bonds issued as part of an advance refunding issue?			X					
16 Has the final allocation of proceeds been made?	X							
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

**Part III Private Business Use**

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

**Part III Private Business Use (Continued)**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?	X							
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?		X						
c Are there any research agreements that may result in private business use of bond-financed property?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		1.00		%			%	
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		1.00		%			%	
6 Total of lines 4 and 5		2.00		%			%	
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	
	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?								
3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
4a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5 Were any gross proceeds invested beyond an available temporary period?		X						
6 Did the bond issue qualify for an exception to rebate?		X						

**Part V Procedures To Undertake Corrective Action**

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K

**SEE PART VI SUPPLEMENTAL EXPLANATION SHEET**

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No 1545-0047

**2011**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

Name of the organization **ALVIN AILEY DANCE FOUNDATION, INC.** Employer identification number **13-2584273**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	9	315,533.	FMV WHEN DONATED
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ ( <u>EVENT SERVICE</u> )	X	24	283,299.	RETAIL VALUE
26	Other ▶ ( <u>AIRFARE</u> )	X	1	36,000.	RETAIL VALUE
27	Other ▶ ( <u>PROGRAM SERVI</u> )	X	3	22,709.	RETAIL VALUE
28	Other ▶ ( <u>EQUIPMENT</u> )	X	1	7,500.	RETAIL VALUE

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

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2011)

**Part II**

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

SCHEDULE M, PART I, COLUMN (B): THE NUMBER OF CONTRIBUTORS ABOVE

REPRESENTS A COMBINATION OF NUMBER OF DONORS AND NUMBER OF CONTRIBUTED

ITEMS.

Multiple horizontal lines for supplemental information.

**SCHEDULE O**  
(Form 990 or 990-EZ)

**Supplemental Information to Form 990 or 990-EZ**

OMB No 1545-0047

**2011**

Open to Public  
Inspection

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.

Name of the organization

ALVIN AILEY DANCE FOUNDATION, INC.

Employer identification number

13-2584273

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

ESTABLISHING AN EXTENDED CULTURAL COMMUNITY WHICH PROVIDES DANCE  
PERFORMANCES, TRAINING AND COMMUNITY PROGRAMS FOR ALL PEOPLE.

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

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.

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

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.

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

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

Name of the organization

ALVIN AILEY DANCE FOUNDATION, INC.

Employer identification number

13-2584273

THAN 45 CITIES ACROSS THE COUNTRY.

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

THE SCHOOL'S SCHOLARSHIP PROGRAM PROVIDES MORE THAN 300 SCHOLARSHIPS 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.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

ANCILLARY ON-SITE COMMUNITY PROGRAMS

EXPENSES \$ 813,347. INCLUDING GRANTS OF \$ 0. REVENUE \$ 688,808.

FORM 990, PART VI, SECTION B, LINE 11: THE DRAFT OF THE 990 IS THOROUGHLY EXAMINED AND REVIEWED BY THE TREASURER & 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

Name of the organization

ALVIN AILEY DANCE FOUNDATION, INC.

Employer identification number

13-2584273

THAT RESPONSIBILITY BY THE FULL BOARD) PRIOR TO FILING. ALSO PRIOR TO FILING, A FULL COPY IS SENT TO THE FULL BOARD OF DIRECTORS.

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.

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 ANALYSIS 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 OFFICERS AND 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 ALSO REVIEWED BY A MEMBER OF THE BOARD WHO IS A PROFESSIONAL IN EXECUTIVE RECRUITMENT.

FORM 990, PART VI, SECTION C, LINE 19: THE IRS FORM 990 IS AVAILABLE UPON

Name of the organization

ALVIN AILEY DANCE FOUNDATION, INC.

Employer identification number

13-2584273

REQUEST AND ALSO ON WEBSITES SUCH AS GUIDESTAR.ORG. GOVERNING DOCUMENTS,  
 SUCH AS THE CONFLICT OF INTEREST POLICY AND THE AUDITED FINANCIAL  
 STATEMENTS, ARE NOT AVAILABLE TO THE GENERAL PUBLIC.

## FORM 990, PART VII

THE ORGANIZATION, IN A FULL TRANSPARENCY POSTURE TO REPORTING, IS  
 REPORTING ALL BENEFITS IN FULL IN PART VII, COLUMN F, AND NOT APPLYING  
 THE \$10,000 PER ITEM EXCEPTION FOR CERTAIN BENEFITS.

## FORM 990, PART VII &amp; SCHEDULE J

ROBERT BATTLE, ARTISTIC DIRECTOR & TRUSTEE, IS COMPENSATED FOR HIS  
 SERVICE TO THE ORGANIZATION AS THE ARTISTIC DIRECTOR, NOT FOR HIS  
 SERVICE AS A TRUSTEE.

## FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED LOSSES ON INVESTMENTS: -2,405,289.

## AMENDED RETURN

FORM 990, PART I, LINE 4 & PART VI, LINE 1B - THE TOTAL NUMBER OF  
 INDEPENDENT VOTING MEMBERS OF THE GOVERNING BODY HAS BEEN CHANGED TO  
 33.

FORM 990, PART V, LINE 1A - THIS HAS BEEN CORRECTED TO REFLECT THE  
 NUMBER REPORTED IN BOX 3 OF THE 2011 FORM 1096.

FORM 990, PART I, LINE 5 & PART V, LINE 2A - THIS HAS BEEN CORRECTED TO  
 REFLECT THE NUMBER OF EMPLOYEES REPORTED ON THE 2011 FORM W-3.

Name of the organization

ALVIN AILEY DANCE FOUNDATION, INC.

Employer identification number

13-2584273

FORM 990, PART VII & SCHEDULE J - A SUPPLEMENTAL RETIREMENT PENSION AMOUNT FOR ONE OF THE LISTED HIGHEST COMPENSATED EMPLOYEES HAD BEEN INADVERTENTLY OMITTED AND IS NOW INCLUDED ON THE FORM 990. IN ADDITION, THE DESCRIPTION RELATED TO THE SUPPLEMENTAL RETIREMENT AGREEMENT IS NOW INCLUDED ON SCHEDULE J.

FORM 990, PART VII & SCHEDULE J - AN EXPLANATION HAS BEEN ADDED TO SCHEDULE O TO INDICATE THAT COMPENSATION IS PAID TO A TRUSTEE AND EMPLOYEE FOR SERVICES RENDERED IN HIS CAPACITY AS AN EMPLOYEE.





**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(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			
(27) DAVID E. MONN TRUSTEE	5.00	X						0.	0.	0.
(28) GABRIELLA E. MORRIS TRUSTEE	5.00	X						0.	0.	0.
(29) STANLEY PLESENT, ESQ. TRUSTEE	5.00	X						0.	0.	0.
(30) MARILYN L. PRINCE TRUSTEE	5.00	X						0.	0.	0.
(31) ROBIN ROYALS TRUSTEE	5.00	X						0.	0.	0.
(32) JOHN H. SCHAEFER VICE CHAIR	5.00	X		X				0.	0.	0.
(33) RICHARD SPECIALE TRUSTEE	5.00	X						0.	0.	0.
(34) LEMAR SWINNEY TRUSTEE	5.00	X						0.	0.	0.
(35) JOAN H. WEILL CHAIR	12.00	X		X				0.	0.	0.
(36) PAMELA ROBINSON TREASURER & CFO	40.00			X				210,066.	0.	34,466.
(37) BENNETT RINK SENIOR DIR OF EXTERNAL AFFAIRS	40.00				X			278,845.	0.	34,534.
(38) MASASUMI CHAYA ASSOCIATE ARTISTIC DIRECTOR	45.00				X			227,926.	0.	283,883.
(39) CALVIN HUNT SENIOR DIRECTOR OF PERF & PRODUCTION	40.00				X			210,767.	0.	15,994.
(40) THOMAS COTT DIRECTOR OF MARKETING	40.00				X			188,217.	0.	17,001.
(41) CHRISTOPHER ZUNNER DIRECTOR OF PR	40.00				X			163,382.	0.	14,321.
(42) JUDITH JAMISON ARTISTIC DIRECTOR EMERITA	40.00					X		393,365.	0.	13,062.
Total to Part VII, Section A, line 1c								1,672,568.		413,261.