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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.

2012

OMB No 1545-0047

Open to Public Inspection

<u> </u>	For the 2	VIZ Cale	ndar year, or tax year beginning January 1 , 2012, and ending	Decem		, 20 12			
В	Check if ap	plicable	C Name of organization The ASCAP Foundation	'	D Employe	er identification number			
\sqcup	Address ch	ange	Doing Business As			51-0181769			
	Name char	nge	Number and street (or P O box if mail is not delivered to street address) Room/suite	Į,	E Telephor	ne number			
	Initial return	n	One Lincoln Plaza			(212) 621-6219			
	Terminated	s .	City, town or post office, state, and ZIP code						
	Amended r	eturn	New York, NY 10023	J.	G Gross receipts \$ 2,155,632				
	Application	pending	F Name and address of principal officer Paul Williams	H(a) Is this a	group return t	for affiliates? Yes V No			
	• •					cluded? Yes No			
	Tax-exemp	t status	✓ 501(c)(3)			list (see instructions)			
J	Website:			H(c) Group	exemption	number ▶			
ĸ			✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation	1975		of legal domicile DE			
Р		Summ			1				
			escribe the organization's mission or most significant activities: The ASCAI	P Foundat	ion is do	dicated to supporting			
	1		music creators and encouraging their development through music education 8						
9									
Activities & Governance			programs are songwriting workshops, scholarships, awards, recognition & com		iueach p	rograms, public service			
ě			or senior composers and grants to 501 (c)(3) organizations for music education		250/ of	ita nat acceta			
ĝ			is box \triangleright if the organization discontinued its operations or disposed of m	iore man	1 1				
∝ಶ	1		of voting members of the governing body (Part VI, line 1a)		3	24			
ies	1		of independent voting members of the governing body (Part VI, line 1b)		4	0			
₹	1		nber of individuals employed in calendar year 2012 (Part V, line 2a)		5	4			
Ā	1		nber of volunteers (estimate if necessary)		6	0			
-	7a T	otal unr	elated business revenue from Part VIII, column (C), line 12		7a	0			
	b N	et unre	ated business taxable income from Form 990-T, line 34	<u> </u>	7b	0			
		-	<u> </u>	Prior Yea	ır	Current Year			
<u>o</u>	8 C	ontribu	tions and grants (Part VIII, line 1h)	1,	463,194	1,244,194			
e E	9 P	rogram	service revenue (Part VIII, line 2g)		0	0			
Revenue	10 Ir	rvestme	nt income (Part VIII, column (A), lines 3, 4, and 7d)		546,911	727,589			
Œ	11 C	ther rev	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		218,725	183,849			
	12 T	otal reve	enue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	228,830	2,155,632				
	13 G	rants a	nd similar amounts paid (Part IX, column (A), lines 1-3)		825,265	736,221			
	1		paid to or for members (Part (X, column (A), line 4)		0	0			
G			other compensation, employee benefits (Part IX-column (A), lines 5-10)		353,490	507,368			
Expenses			and fundament for (Part IV as June 110)		0	0			
De.			draising expenses (Part IX, column (A), line 11e) (7).						
蓝	17 C	Whor ov	penses (Part IX, column (A); lines 11a-11d, 11f-24e) 0	_	252 527	412.410			
					353,527	412,410			
			penses. Add lines 13–17 (must-equal-Part-IX, column (A), line 25)		532,282	1,655,999			
		evenue	less expenses. Subtract line 18 from line 12	nning of Cur	696,548	499,633 End of Year			
Assets or Balances					-				
Sset	20 T		sets (Part X, line 16)	8,	081,675	8,829,094			
Net A	21 '		ilities (Part X, line 26)		34,222	50,054			
			ts or fund balances. Subtract line 21 from line 20	8,	047,453	8,779,040			
	art II		ture Block						
			iry, I declare that I have examined this return, including accompanying schedules and statement			ny knowledge and belief, it is			
	e, correct, a	and comp	lete Declaration of preparer (other than officer) is based on all information of which preparer has	any knowle	uye				
	i	<u> </u>	Robert Godele			<u> </u>			
Sign Here		Sign	ature of officer	Date	- I	_			
		\sim	RODERT F. CANDELA	2/	8/13	3			
		Туре	e or print name and title						
Pa	id	Print/Ty	pe preparer's name Preparer's signature Date		Check [if PTIN			
	eparer				self-emp	oloyed			
	se Only	Firm's r	iame ►	Firm'	s EIN ▶				
J	Omy		ddress ▶	Phor	ne no				
Ма	y the IRS		s this return with the preparer shown above? (see instructions)			Yes No			
_			ction Act Notice, see the separate instructions. Cat No 11	1282Y		Form 990 (2012)			

Form 99	0 (2012) Page 2
Part	<u> </u>
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	The ASCAP Foundation is dedicated to nurturing the music talent of tomorrow, preserving the legacy of the past and sustaining the
	creative incentive for today's music creators through a variety of educational, professional and humanitarian programs and activities
	that serve the entire music community.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	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 are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
	(0)
4a	(Code:) (Expenses \$ 435,671 including grants of \$ 228,879) (Revenue \$)
	MUSIC EDUCATION AND COMMUNITY OUTREACH - The ASCAP Foundation is dedicated to nurturing the music talent of tomorrow by developing and supporting educational programs
	that provide effective learning opportunities consistent with our mission to students of all ages. The ASCAP Foundation has
	provided funding to sponsor 35 Music Education and / or Music Development programs and one community outreach program
	throughout the year with the goal of enhancing and promoting music education and providing the community with access to music
	These 36 programs include 24 programs that received \$5,000 or less and 12 programs that received more than \$5,000.
	(0.1)
4b	(Code:) (Expenses \$ 329,001 including grants of \$ 293,500) (Revenue \$)
	SCHOLARSHIPS, FELLOWSHIPS, AWARDS AND COMPOSER PROGRAMS - The ASCAP Foundation scholarship programs seek to ensure that opportunities for the study of music and instruments,
	songwriting, music composition, the business of music and related areas are available to students at all levels by providing
	Scholarships and Fellowships to 57 recipients ranging from \$1,000 - \$10,000. The ASCAP Foundation provides awards to
	emerging composers and writers consisting of cash awards to 89 recipients of composer and / or lyricist programs. These
	awards range from \$200 - \$10,000. Of these 89 awards, 87 awards are \$5,000 or less and 2 awards are for \$10,000 each.
4c	(Code:) (Expenses \$ 226,128 including grants of \$ 184,692) (Revenue \$)
40	TALENT DEVELOPMENT AND COMMUNITY OUTREACH -
	The ASCAP Foundation Talent Development and Community Outreach programs provide aid and encouragement to music creators
	nationwide who are in various stages of their music careers including Workshops, (16); Commissioning and / or commissioning
	programs, (3) and sponsorship of Talent Development and Community Outreach programs, (25). By providing professional
	opportunities to emerging composers, lyricist and songwriters the ASCAP Foundation supports their careers and promotes their
	work.
4-1	Other program convece (Describe in Schedule C.)
4d	Other program services (Describe in Schedule O.) (Expenses \$ 368,034 including grants of \$ 29,150) (Revenue \$)
4e	Total program service expenses ► \$1,358,834
	· • · · · · · · · · · · · · · · · · · ·

Part	Checklist of Required Schedules		V I	N-
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	✓	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		✓
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V .	10	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	√ _	
b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		✓
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		√
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .	11e		✓
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	✓	
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		√
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	√
14 a b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		-
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
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? If "Yes," complete Schedule G, Part I (see instructions)	17		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a		20a	 	<u> </u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
_		Fon	m 990	(2012)

Part	Checklist of Required Schedules (continued)			r
04	Did the assessment was at more than \$5 000 of monte and other assistance to any appropriate or average state.		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	✓	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	✓.	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	√	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		√
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	1	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	
		Eco	aar) (2012

Part				רין
	Check if Schedule O contains a response to any question in this Part V	· ·	Yes	No
1a b c	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
2a	reportable gaming (gambling) winnings to prize winners?	1c	✓	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	2b		f
3a b	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b		✓
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		✓
b	If "Yes," enter the name of the foreign country: ► See instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		/
b C	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		<u></u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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?	7a		✓
b c	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b 7c		√
d	If "Yes," indicate the number of Forms 8282 filed during the year	****		
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e_ 7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		✓
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7h	نبد .	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		√
9	Sponsoring organizations maintaining donor advised funds.	0		
a b	Did the organization make any taxable distributions under section 4966?	9a 9b		-
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
_ b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b Section 501(c)(12) organizations. Enter:			
11 a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	į.		
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Note. See the instructions for additional information the organization must report on Schedule O. 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			
С	the organization is licensed to issue qualified health plans			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		
		For	n 990	(2012)

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	See ins	struct	ions
Secti	Check if Schedule O contains a response to any question in this Part VI	<u>···</u>	•	<u>. ⊻</u>
1 a	Enter the number of voting members of the governing body at the end of the tax year		Yes	No
b 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		√
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3	-	1
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	4 5 6	✓ ✓	1
b 8	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1
a b	the year by the following: The governing body?	8a 8b		✓ ✓
9 Secti	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	9 ue Co	ode.)	1
000.	The color of the color of requests information about pointing increasing the information and the color of the information about pointing in the color of th		Yes	No
10a b		10a 10b		1
11a		11a		1
b				
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b		✓
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13 14	Did the organization have a written whistleblower policy?	13	√ √	· · · · · · · · · · · · · · · · · · ·
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?	45-		
a b	, , ,	15a 15b	√	
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		✓
	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		
	ion C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed California, Florida, Illinois, New Yorl Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available.			
19	✓ Own website ✓ Another's website ✓ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o and financial statements available to the public during the tax year.			olicy
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: Robert F. Candela, Comptroller - One Lincoln Plaza, New York, NY 10023	of the	!	

Part VII	Compensation of	of Officers.	Directors.	Trustees.	Key Employ	vees. Highest	Compensated	Employees.	and
	Independent Co		,	,	,,	, ccc,gcc		,,	

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 boy if polither the expensivation per any related expensation compensated any current officer, director, or trustee

Check this box if neither the orga	anization nor any relate	d org	anız			ompe	nsa	ated any currer	t officer, director	, or trustee
		ŀ		-	C)					
(A)	(B)	Position (do not check more than one						(D)	(E)	(F)
Name and Title	Average hours per week (list any hours for	box, office	unles er and	s pe	rson Irect	ıs both or/trust	an	Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
	related organizations below dotted line)		Institutional trustee	icer	Key employee	Highest compensated employee	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Marilyn Bergman	.25	/							22.005	
Director		V	╁		├		-	0	23,005	
(2) Charles Bernstein Director	.25	1			_			0	0	
(3) Bruce Broughton	.25									
Director		✓	<u> </u>					0	19,300	
(4) Tita Cahn	.25	1								
Director		1		<u></u>	<u> </u>		_	0	0	
(5) Alf Clausen	.25	,	-							
Director		✓	ļ		<u> </u>	<u> </u>	_	0	0	
(6) Hal David	.25	,		ļ						
Director		1	┢		<u> </u>	_	 —	0	16,187	
(7) Dan Foliart	.25	1			1			0	25,050	
Director		+	 	_		 	 	<u> </u>	23,030	.,
(8) Arthur Hamilton Director	.25	1						0	16,105	
(9) Wayland Holyfield	.25		_				<u> </u>	<u> </u>	10,100	
Director		1						0	16,105	
(10) James M Kendrick	.25				\vdash	 				
Director	•••••	1							16,900	
(11) Robert Kımball	.25									
Director		✓						0	0	
(12) Ed London	.25									
Director		1	$oxed{oxed}$				<u> </u>		0	
(13) Johnny Mandel	.25							1		
Director		✓	_	_	<u> </u>	ļ	_		16,105	
(14) James McBride	.25									
Director		✓	<u></u>		<u>L</u>			O	0	Form 990 (201)

Part VII Section A. Office	ers, Directors, Trust	ees, Key E	mplo	yees		nd F C)	lighe	st C	ompensated E	mployees (co	<u>entinue</u>	<u>a)</u>
(A) Name and titl	e	(B) Average			Pos neck	rtion more	e than o		(D) Reportable	(E) Reportable		(F) Estimated
		hours per week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	a Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation f related organizations (W-2/1099-MIS	s	amount of other compensation from the organization and related organizations
(15) Jay R Morgenstern		.25	1							40.		
Director (16) Mary Rodgers Director		.25	▼						0	16,	0	0
(17) Stephen Schwartz Director		.25	1						0		0	0
(18) Valerie Simpson Director		.25	1						0	10,	600	0
(19) Charles Strouse Director		.25	1						o		0	0
(20)		.25	1						0	36,0		0
(21) Paul Williams President		50	1						0		0	0
(22) Irwin Z Robinson Vice President		.50	1						0	23,4	480	
(23) Dean Kay Treasurer		.50	1						0	33,	005	
(24) Ginny Mancini Secretary		.50	1						o		o	O
(25) Colleen McDonough Director - The ASCAP Fou	undation	35					1		137,426		0	42,156
c Total from continuat		VII, Sectio	n A					▶	137,426 0	268,	646 0	42,156
d Total (add lines 1b at 2 Total number of indivi	duals (including but	not limited						▶ e) w	137,426 tho received m			42,15 6 of
reportable compensat 3 Did the organization	list any former of	ficer, dırec						emp	oloyee, or high	nest compen	sated	Yes No
employee on line 1a? 4 For any individual listo organization and relaundividual	ed on line 1a, is the	sum of re	porta	ble (соп	пре	nsatio	on a s,"	 ind other comp complete Sch	oensation from nedule J for	m the such	3 ✓
5 Did any person listed for services rendered	on line 1a receive o									zation or indiv	vidual	5
Section B. Independent Co												
Complete this table for compensation from the year.	or your five highest on the organization. Rep	compensat ort compe	ed ind nsatio	depe	end or th	ent ne c	contralend	acto lar y	ors that receive ear ending wit	ed more than th or within th	\$100,0 ne orga	000 of Inization's tax
	(A) Name and business add	ress			_				(B) Description of s	services	C	(C) compensation
							· · · · ·					
2 Total number of inder received more than \$								o th	nose listed ab	ove) who		

Pari	VIII					_
		Check if Schedule O contains a response to any que		III (B)		<u> </u>
			(A) Total revenue	Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated campaigns 1a ()		•	ļ
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b	<u>,</u>		1	
ß, (С	Fundraising events 1c	<u>)</u>		1	1
Giff lar	d	Related organizations 1d 197,293	3		İ	
ıs,	е	Government grants (contributions) 1e 19,000	<u>)</u>			1
er S	f	All other contributions, gifts, grants,			1	
년 원		and similar amounts not included above 1f 1,027,901	_			1
a a	g	Noncash contributions included in lines 1a-1f \$			i	
<u>0 a</u>	h	Total. Add lines 1a–1f	1,244,194		-	
Program Service Revenue	20		0		 	+
ě	2a b		0			
9	C		0			
ΘŢ	ď		0			
S	e		0			-,
gra	f	All other program service revenue .	0			
<u>۾</u>	g	Total. Add lines 2a-2f	0			
	3	Investment income (including dividends, interest,		-		
		and other similar amounts)	727,589			
	4	Income from investment of tax-exempt bond proceeds ▶	0			
	5	Royalties	183,849			
		(i) Real (ii) Personal	-			
	6a	Gross rents	- !		ļ	
	b	Less: rental expenses	-		İ	
	ب 2	Rental income or (loss) Net rental income or (loss)	0			
	d 7a	Gross amount from sales of (i) Securities (ii) Other	- 0			
	'*	assets other than inventory	-			
	ь	Less: cost or other basis	7			
		and sales expenses .				
	c	Gain or (loss)	i i			
	d	Net gain or (loss)	0			<u> </u>
_						1
venue	8a	Gross income from fundraising	1			
		events (not including \$			•	
Other Re		of contributions reported on line 1c).			1	
Ę		See Part IV, line 18 a	4		1	
ಕ	1	Less: direct expenses b	- 1			
		Net income or (loss) from fundraising events . Gross income from gaming activities.	<u> </u>		L	
	Ja	See Part IV, line 19 a			:	
	ь	Less: direct expenses b	 		•	
	č	Net income or (loss) from gaming activities >	0			
		Gross sales of inventory, less			1	
		returns and allowances a				1
	Ь	Less: cost of goods sold b]		· · · · · · · · · · · · · · · · · · ·	
	<u> </u>	Net income or (loss) from sales of inventory ▶	0		<u> </u>	
		Miscellaneous Revenue Business Code			, 1	
	11a					
	b					
	C	All of				-
	d	All other revenue	0	,	1	
	12	Total revenue See instructions	2 155 632		1	- T

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must com	<u> </u>		s must complete colu	mn (A).
	Check if Schedule O contains a respons			<u> </u>	
Do no Bb, 9b	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	527,681	527,681		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	208,540	208,540		
3	Grants and other assistance to governments,				
_	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	o	o		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
	trustees, and key employees	o	0	0	0
6	Compensation not included above, to disqualified		-		
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	o	0	0	0
7	Other salaries and wages	387,303	194,683	64,051	128,569
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	9,580	3,565	1,822	4,193
9	Other employee benefits	110,485	56,787	18,034	35,664
10	Payroll taxes	0	0	0	0
11	Fees for services (non-employees):				
а	Management	0	0	0	0
b	Legal	4,412	0	0	4,412
С	Accounting	10,000	0	10,000	0
d	Lobbying	0	0	0 _	0
е	Professional fundraising services. See Part IV, line 17	0			- 0
f	Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	0	0	0	0
12	Advertising and promotion	0	0	0	0
13	Office expenses	14,447	8,216	2,306	3,925
14	Information technology	2,565	855 0	855 0	<u>855</u> 0
15	Royalties	0	0	0	0
16 17	Occupancy	69,226	62,044	3,591	3,591
18	Payments of travel or entertainment expenses	03,220	02,044	3,331	0,001
	for any federal, state, or local public officials	o	0	0	0
19	Conferences, conventions, and meetings	0	0	0	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	537	179	179	179
23	Insurance	0	0	0	0
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column	j			
	(A) amount, list line 24e expenses on Schedule O.)				
а	Library of Congress Program	203,014	203,014	0	
b	Annual Awards reception	74,972	63,726	0	11,246
C	Archives Program	12,342	12,342	0	0
d	Honoraria / judges' fees	13,200	13,200	0	0
е	All other expenses miscellaneous	7,695	4,002	42	3,651
25	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	1,655,999	1,358,834	100,880	196,285
26	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)				
	- · <u> </u>				

Form **990** (2012)

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 1 0 0 2 2 Savings and temporary cash investments 566,648 506,758 3 3 249,418 184,000 4 100,000 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 0 0 Loans and other 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 0 6 0 Assets 7 0 0 8 8 Inventories for sale or use 0 13,000 Prepaid expenses and deferred charges . 9 9 541 648 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2.175 10b 10c Less: accumulated depreciation 977 1.638 537 Investments—publicly traded securities 11 7,164,091 8,123,050 11 12 12 Investments—other securities. See Part IV, line 11 . . . 0 0 0 13 13 Investments—program-related. See Part IV, line 11 0 14 14 0 ol 15 Other assets. See Part IV, line 11 ol 15 0 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 8,081,675 16 8,829,094 17 17 30,472 46,958 18 18 3,750 3,096 19 0 19 0 20 20 0 0 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 0 0 Loans and other payables to current and former officers, directors. 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 0 0 23 23 Secured mortgages and notes payable to unrelated third parties 0 0 24 24 Unsecured notes and loans payable to unrelated third parties . . . 0 0 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 0 0 Total liabilities. Add lines 17 through 25 . 34,222 26 50,054 Organizations that follow SFAS 117 (ASC 958), check here ▶ 📝 and **Net Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. <u>2,021,</u>098 27 2,484,647 27 28 4,857,023 5,125,061 28 29 29 1,169,332 1,169,332 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 0 0 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 0 0 31 Retained earnings, endowment, accumulated income, or other funds . 0 32 32 0 8,047,453 33 33 8,779,040 34 34 Total liabilities and net assets/fund balances 8,081,675 8,829,094

orm 99	90 (2012)			Pa	age 12
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			55,632
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,65	55,999
3	Revenue less expenses. Subtract line 2 from line 1	3		49	99,633
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		8,04	47,453
5	Net unrealized gains (losses) on investments	5		23	31,954
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		8,77	79,040
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		<u></u>	<u></u>	<u>. </u>
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain in			
2a			2a	1	
	If "Yes," check a box below to indicate whether the financial statements for the year were complete the financial statements for the year were complete the financial statements.				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b			2b	1	
•	If "Yes," check a box below to indicate whether the financial statements for the year were audite				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	versiaht			
·	of the audit review or compilation of its financial statements and selection of an independent account	_	20	1	

If the organization changed either its oversight process or selection process during the tax year, explain in

За

Form **990** (2012)

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

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2012

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

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

Employer identification number

		P Foundation									<u>81769</u>		
_	rt I			rity Status (All orga						nstructio	ns.		
1 2 3 4		A church, conv A school desc A hospital or a A medical rese hospital's nam	vention of church ribed in section cooperative hos earch organization e, city, and state		churches h Schedu ition desc ction with	describe ule E.) cribed in s a hospit	ed in sec section 1 al descrit	tion 170(170(b)(1)(ped in se	(b)(1)(A)(i A)(iii). ction 17(D(b)(1)(A)			
5 6		section 170(b) A federal, state)(1)(A)(iv). (Comp e, or local goverr	nment or governmenta	al unit de:	scribed ir	section	170(b)(1)(A)(v).				
7	_	described in s e	ection 170(b)(1)	receives a substantia (A)(vi). (Complete Par	t İl.)			ı governr	nental ur	nit or from	n the	general	public
8				n section 170(b)(1)(A)									
9	!	receipts from support from	activities related gross investme	receives: (1) more that I to its exempt functi nt income and unrel fter June 30, 1975. Se	ons-sub	oject to d siness tax	ertain ex xable inc	ceptions ome (les	s, and (2) ss sectio	no more	than	331/3%	of its
10 11		An organization purposes of o 509(a)(3). Che a Type I By checking the	on organized an ne or more pub ck the box that or b Type nis box, I certify	operated exclusively d operated exclusive licly supported organ describes the type of state the organization and other than one	ely for the supportion of the	e benefit described ig organiz nally integ ntrolled d	t of, to post of the control of the	perform to to 509(a document to 509) document to 509 indirectly	the funct a)(1) or se te lines 1 Type III–N y by one	ions of, ection 509 1e throug Ion-funct or more 6	9(a)(2) gh 11h ionally disqua	. See son. / integral alified po	ection ated ersons
1		-		written determinatio	on from t	the IRS t	hat it is	a Type	I, Type I	ll, or Typ	e III : 	support	ing
9		Since August following person		ne organization accep	oted any	gift or co	ontributio	n from a	ny of the	•			_
				ndirectly controls, eithody of the supported o								Yes lg(i)	No
		(ii) A family m	ember of a perso	on described ın (ı) abo	ve?						11	g(ii)	<u> </u>
				a person described in							11	g(iii)	
	1	Provide the fol	llowing informati	on about the supporte	ed organi	zation(s).			·				
(ī		e of supported panization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col (i) lis	rganization sted in your document?	the organ	ou notify nization in of your port?	organizat (i) organi	s the tion in col zed in the S?	(vii) An	nount of m support	
					Yes	No	Yes	No	Yes	No	<u></u>		
(A)													
(B)													
(C)													
(D)													
(E)													
											İ		

(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) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 1,380,993 1,475,439 1,210,303 1,463,194 1,244,194 6,774,123 levied revenues for organization's benefit and either paid to or expended on its behalf 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge 0 4 Total. Add lines 1 through 3. . . . 1,380,993 1,475,439 1,210,303 1,463,194 1,244,194 6,774,123 5 The portion of total contributions by person each (other than governmental unit or publiciv supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 2,975,732 Public support. Subtract line 5 from line 4. 3,798,391 Section B. Total Support (e) 2012 Calendar year (or fiscal year beginning in) ▶ (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (f) Total 7 Amounts from line 4 1,380,993 1,475,439 1,210,303 1,463,194 1,244,194 6.774.123 8 Gross income from interest, dividends. payments received on securities loans. rents, royalties and income from similar 496,442 199,694 1,065,545 765,636 911,438 3,438,755 Net income from unrelated business activities, whether or not the business is regularly carried on 0 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 0 11 Total support. Add lines 7 through 10 10,212,878 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage from 2011 Schedule A, Part II, line 14 15 | 15 | 331/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this **√** 331/3% support test-2011. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test - 2012. 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 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

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

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.)

	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees					·	
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the		1				
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities	·				· —	
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
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						
_	Add lines 7a and 7b			Markette Lands		sters a se	
8	Public support (Subtract line 7c from						3
	line 6.)					第 2000年1	
	on B. Total Support	(-) cccc	(h) 6000	(=) 0010	(4) 2044	(-) 0010	/A Tatal
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6		-				
10a	Gross income from interest, dividends, payments received on securities loans, rents,						
	royalties and income from similar sources .						
L	•						
b	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
_	Add lines 10a and 10b			-			· · · · · · · · · · · · · · · · · · ·
С 11	Net income from unrelated business						
1.1	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
14	loss from the sale of capital assets						
	(Explain in Part IV.)			1			
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	ne organizatio	n's first, secon	d, third, fourth	, or fifth tax ye	ar as a se	ction 501(c)(3)
•	organization, check this box and stop he						
Secti	on C. Computation of Public Support	rt Percentag	je				
15	Public support percentage for 2012 (line	8, column (f) d	livided by line 1			15	%
16	Public support percentage from 2011 Sc	hedule A, Part	III, line 15 .			16	%
Secti	on D. Computation of Investment In						
17	Investment income percentage for 2012					17	%
18	Investment income percentage from 201	1 Schedule A,	Part III, line 17			18	<u>%</u>
19a	331/3% support tests-2012. If the organ	ization did no	t check the bo	x on line 14, a	nd line 15 is m	ore than 3	31/3%, and line
	17 is not more than 331/3%, check this box						
b	331/3% support tests-2011. If the organization	zation did not o	check a box on	line 14 or line	19a, and line 16	is more th	an 331/3%, and
	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization d	id not check a	box on line 14	, 19a, or 19b,	check this box	and see in	structions 🕨 🔲

chedule A (Form 990 or 990-EZ) 2012	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	
	·	
••••••		
•••••		
		··
		•••••

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Open to Public Inspection

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

Employer identification number Name of the organization The ASCAP Foundation 51-0181769 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year). 3 Aggregate grants from (during year) . . Aggregate value at end of year 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 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 Preservation of a certified historic structure Protection of natural habitat Preservation of open space 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 2a Total number of conservation easements . 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) In Part XIII, 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 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 XIII, the text of the footnote to its financial statements that describes these items. 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 \$_____ 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: Assets included in Form 990, Part X .

n	2
Page	_

Part										
3	Using the organization's acquisition, collection items (check all that apply):		er recor	ds, chec	k any of th	e follov	ving that are a si	gnificant u	se of	ıts
а	☐ Public exhibition				or exchang					
b	☐ Scholarly research		е [Other	• 					
C	☐ Preservation for future generations									
4	Provide a description of the organizat XIII.	tion's collections a	nd expla	ın how tl	hey further	the org	anization's exem	pt purpos	e in P	art
5	During the year, did the organization assets to be sold to raise funds rather									No.
Part									art I\	".
	line 9, or reported an amoun							•		•
1a	Is the organization an agent, trustee,				or contribut	ions or	other assets no	t		
	included on Form 990, Part X?							☐ Yes		do
b	If "Yes," explain the arrangement in Pa	art XIII and comple	te the fol	lowing ta	able:					
							Ar	nount		
C	Beginning balance					10	:			
d	Additions during the year					1d	1			
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amoun					•		☐ Yes	<u>י</u> ן	OV
b	If "Yes," explain the arrangement in P								<u> 니</u>	
Par	V Endowment Funds. Comple	ete if the organiza	ation an (b) Pric		(c) Two year		(d) Three years back		are ba	
4-	De sincia e of complete and							-		
1a	Beginning of year balance	1,169,332	1	,169,332	1,1	69,332	1,169,332		1,169,:	
b	Contributions	0		0		0		'		_0
С	Net investment earnings, gains, and losses					ا	,	.]		_
		0		0		0 0	0	 	_	0
d e	Grants or scholarships Other expenditures for facilities and	U	-					<u>'</u>		
C	programs	o		0		o	C			0
f	Administrative expenses	0		0		0				0
g	End of year balance	1,169,332	-	,169,332	11	69,332	1,169,332	 	1,169,	
2	Provide the estimated percentage of t							• •	.,.oo _f .	
a	Board designated or quasi-endowmer		0%	- (ζ	,,				
b	Permanent endowment ▶	63%	•							
c	Temporarily restricted endowment ▶	37%								
	The percentages in lines 2a, 2b, and 2		0%.							
3a	Are there endowment funds not in the	e possession of the	e organiz	zation tha	at are held	and ad	ministered for the	e		
	organization by:							Y	es N	lo
	(i) unrelated organizations							3a(i)		<u>/_</u>
	(ii) related organizations							3a(ii)		<u>/_</u>
b	If "Yes" to 3a(ii), are the related organ							3b		
4	Describe in Part XIII the intended uses							_		
Part	VI Land, Buildings, and Equip									
	Description of property	(a) Cost or oth			or other basis ther)		Accumulated epreciation	(d) Book	/alue	
1a	Land		0		0					_0
b	Buildings		0		0		0			0
C	Leasehold improvements		0		0		0			0
d	Equipment		0		2,175		537		1,	<u>638</u>
е	Other	<u>· </u>	0		0		0			_0
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 99	0, Part X	t, column	n (B), line 10)(C).)	<u> ▶ </u>			638
							Scha	dula D (Form	00A) 2	กาว

Part VII	Investments—Other Securities	See Form 990, Part X,	line 12.	
(4	a) Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year m	
(1) Financia	I derivatives			
(2) Closely-	held equity interests			
(3) Other		·····		
(A)				
(B)				
(C)				
(D)				
(E)		- 		
(F) (G)				
(G) (H)				
(I)			-	
	(b) must equal Form 990, Part X, col (B) line 12)		· · · · · · · · · · · · · · · · · · ·	
Part VIII	Investments—Program Related	I. See Form 990. Part X.	. line 13.	
	(a) Description of investment type	(b) Book value	(c) Method of val	uation
	(1)	(.,	Cost or end-of-year m	
(1)		- 		
(2)				
(3)				
(4)				
(5)				
(6)				
_(7)				
(8)				
(9)				
(10)	(b) must equal Form 990, Part X, col. (B) line 13)			-
-Part IX	Other Assets. See Form 990, Pa	nt X line 15	<u> </u>	
I dit ix		a) Description		(b) Book value
(1)		<u> </u>		
(2)				· · · · · · · · · · · · · · · · · · ·
_(3)				
(4)				
(5)				
(6)				
_(7)				
(8)				
(9)				
(10)	ımn (b) must equal Form 990, Part X, c	ol (R) line 15 \		
Part X	Other Liabilities. See Form 990,			· · · - · · · · · · · · · · · · · · · ·
1.	(a) Description of liability	(b) Book value	1	
	income taxes		1	
(2)	-		†	
(3)			7	
(4)				
(5)				
(6)]	
(7)			1	
(8)			4	
(9)			4	
(10)			-[
(11) Tabal (Caluma	A) must send Form 000 Part V and (D) has 051 h		-	
O EIN 49 /44	(b) must equal Form 990, Part X, col. (B) line 25.) ► SC 740) Footnote. In Part XIII, provide the	text of the feetnets to the are	anization's financial statements that	reports the organization's
	ncertain tax positions under FIN 48 (ASC 7			

Page 4

Part	XI Reconciliation of Revenue per Audited Financial Stateme	ents \	With Revenue per I	Retur	n
1	Total revenue, gains, and other support per audited financial statements			1	2,501,190
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a	231,954		
b	Donated services and use of facilities	2b	113,604		
С	Recoveries of pnor year grants	2c	0		
ď	Other (Describe in Part XIII.)	2d	0		
e	Add lines 2a through 2d	<u> </u>		2e	345,558
3	Subtract line 2e from line 1			3	2,155,632
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	0		
b	Other (Describe in Part XIII.)	4b	0		
c	Add lines 4a and 4b			4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	2,155,632
Part	XII Reconciliation of Expenses per Audited Financial Statem			r Ret	
1	Total expenses and losses per audited financial statements			1	1,769,603
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	113,604		
b	Prior year adjustments	2b	0		
c	Other losses	2c	0		
d	Other (Describe in Part XIII.)	2d	0		
	Add lines 2a through 2d			2e	113,604
3	Subtract line 2e from line 1			3	1,655,999
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	o		
b	Other (Describe in Part XIII.)	4b	0		
c	Add lines 4a and 4b			4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	1,655,999
	XIII Supplemental Information				
Comp Part V inform	lete this part to provide the descriptions required for Part II, lines 3, 5, and , line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b ation	9; Pa o. Also	rt III, lines 1a and 4; P complete this part to	art IV,	lines 1b and 2b; de any additional
		-			
				•	

Schedule D (For	orm 990) 2012	Page 5
	Supplemental Information (continued)	
		•
		
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••••		

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

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

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

► Attach to Form 990.

Open to Public Inspection

° □

Employer identification number

√ Yes 51-0181769 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. the selection criteria used to award the grants or assistance? The ASCAP Foundation

Part | General Information on Grants and Assistance

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

Part IV, line 21, for any recipient that received	/ recipient that i	eceived more the	ian \$5,000. Part	I can be duplic	more than \$5,000. Part II can be duplicated it additional space is needed.	space is needed.	
1 (a) Name and address of organization or government	(b) EIN	(c) fRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Manhattan School of Music	13-1656667	501 (c)(3)	000'8E\$				Summer Music Camp
(2) New Orleans Arts & Cultural Hos							
124 Roselyn Park PI, New Orleans LA	31-1696655	501 (c)(3)	18,500				Summer Jazz Camp
(3) Elaine Kaufman Cultural Center							
129 W 67th Street, NY NY 10023	13-1991118	501 (c)(3)	10,000				Special Music School
(4) JazzMobile, Inc.							
154154 W 127 St. NY NY 10027	13-2614483	501 (c)(3)	10,000				Saturday Jazz workshop
(5) Festival of New American Music							
8896 Carson St Culver City, CA 90232	14-1915493	501 (c)(3)	10,000				Staged reading series
(6) Sabron, Inc							
5535 Balboa Blvd, 222, Encino, CA	95-4085877		13,269				Film/TV music workshop
(7) Walden School, Ltd							
31A 29th St. San Francisco, CA 64110	35-2374612	501 (c)(3)	10,000				5 scholarships
(8) Grammy Foundation							
3030 Olympic Blvd. Santa Monica, CA	95-3199223	501 (c)(3)	10,000				5 camp scholarships
(9) I-Safe, Inc 6189 El Camino Real							
Suite 201, Carlsbad, CA 92009	33-0821845	501 (c)(3)	20,000				Copyright education
(10) Be An Artist							
PO Box 2454, Austin, TX 78768	26-1626709	501 (c)(3)	10,000				Songwriting w/ Soldier
(11) Music Conservatory of Westche							
216 Central Ave, White Plains, NY	13-6007082	501 (c)(3)	10,000				Music Therapy program
(12) American Theater Group, Inc							
57 Farms Rd Circle, E Bruswick NJ	27-1141524	501 (c)(3)	10,000				New American reading s
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	501(c)(3) and gov	ernment organiza	tions listed in the l	ne 1 table			-
3 Enter total number of other organizations listed in the line 1 table	ganizations listed	in the line 1 table					. • 12

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

Enter total number of other organizations listed in the line 1 table. For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 50055P

Schedule I (Form 990) (2012)

SCHEDULE I-1 (Form 990) Department of the Treasury Internal Revenue Service Vame of the organization

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

OMB No. 1545-0047

2012 Open to Publi Inspection

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

▶ Attach to Form 990.

Employer identification number

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, **%**□ Musical theatre educat Musical theatre projec (h) Purpose of grant or assistance Jazz music education က √Yes 51-0181769 Improv camp Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (e) Amount of non-cash assistance (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. . Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 07,77 (d) Amount of cash grant 000'9 000'9 9,011 Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the Instructions for Form 990. General Information on Grants and Assistance 501 (c)(3) 501 (c)(3) 501 (c)(3) 13-2891676 11-3179208 13-4069251 11-3526167 (p) EIN 55 Washington St, 509, Brooklyn NY Central Pkwy, Floral Park, NY 11005 1 (a) Name and address of organization 16 W 23rd St, 4th fir, NY NY 10010 (3) Spirit Improv - 27110 Grand (2) 1564 47th St, NY NY 10036 (1) Exploring the Arts The ASCAP Foundation (4) Palace Theatre (2) JazzReach Part II Part 9 9 6 8 Ε

Schedule I (Form 990) (2012)

Cat No 50055P

Schedule I (Form 990) (2012)

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
1 Awards for Ivricist & composer programs	68	\$200 - \$10,000			
2 Music scholarships & fellowships	57	\$1,000 - \$10,000			
3 Music education fees to facilitate programs	11	\$250 - \$5,300			
4 Kennedy Center showcase performer per diems	14	\$150 - \$500			
5 Workshop moderator & instructor honorarium	12	\$900 - \$2,400			
6 Workshop studio recording fees	1	\$210			
7 Commission fees & copying costs	m	\$2,500 - \$7,500			
Part IV Supplemental Information. Complete this information.	te this part to pro	ovide the information	n required in Part I,	line 2, Part III, column (b)	part to provide the information required in Part I, line 2, Part III, column (b), and any other additional

he ASCAP Foundation, a non-for-profit organization, incorporated under the laws of the state of Delaware in 1975, was established to promote and support charitable / educational	ograms in the field of music. All institutional grantees are required to submit a written proposal requesting grant funds and to file a final report at the end of the grant period.	dditionally, they are requested to provide copies of their IRS tax exemption notification and a W9. Individual awards for 2012 were awarded based on a panel's review of submitted	orks and / or recommendations of noted authorities.
he ASCAP Foundation, a	rograms in the field of m	dditionally, they are requ	orks and / or recommend

Schedule I (Form 990) (2012)

SCHEDULE J (Form 990)

Compensation Information

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

2012

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

Inspection Employer identification number

The ASCAP Foundation 51-0181769 Part I **Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Travel for companions ☐ Health or social club dues or initiation fees ☐ Tax indemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? . . . 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☐ Compensation committee ☐ Written employment contract Independent compensation consultant ☐ Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: 4a Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a 6b **b** Any related organization? If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe 8

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Regulations section 53.4958-6(c)?

Page 2

Schedule J (Form 990) 2012

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

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

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

(B) Breakdown of W-2 and/or 1099-MISC compensation	285	(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	Character of the Control of the Cont			
		6	0 4.50 C 4.50	oth O	other deferred	(D) Nontaxable	(E) Lotal of columns	(F) Compensation
(A) Name and Title		(i) base compensation	(ii) bonus a incentive compensation	reportable compensation	compensation			reported as deferred in prior Form 990
	9	0.00	000	4 440	200	010.3	207 426	
Colleen McDonough - Director, 1 ASCAP Foundation	E	510,101	000,01	77.	201,51	200	7,75	
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2	€				1			
	8							
6	€							
	Ξ							
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16	<u>E</u>							
							Sch	Schedule J (Form 990) 2012

), 6a, 6b, 7, and 8, and for Part													Schedule J (Form 990) 20
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													
descriptions required for Part I, I		-	-	-			-	-	 -	-	-		
nation enformation, explanation, or or	dundial information.												
art III Supplemental Inform	Also complete this part for any additional information.												

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Employer identification number

OMB No 1545-0047

The ASCAP Foundation 51-0181769
Part III - Statement of Service Accomplishments - response to line 2 undertake significant program services during the year
The ASCAP Foundation accepts grant applications on an annual basis. Grants are reviewed and are selected for funding based on The
ASCAP Foundation's mission. In some cases new funding has become available to establish new programs. In 2012 The ASCAP
Foundation funded an additional 26 programs that were not funded in 2011. These programs are reflected in Part III, lines 4 a - d.
Programs over \$5,000 are also reflected on Schedule I.
Part III - Statement of Service Accomplishments - response to line 3cease conducting or significant changes in programs
Some organizations may not have requested funding in 2012, some may have only been a one year commitment and in other cases the
source of funding is no longer available or the program is not as vital to the Foundation's mission. In total 30 programs were eliminated
in 2012.
Part III - Statement of Service Accomplishments - response to line 4d - Other program services
Grants and allocations for senior service programs (1) and other / humanitarian (5). Other expenses include salaries, benefits and other
allocatable expenses related to program activity.
Part VI, Section A, response to line 6 - Does the organization have members or stockholders?
The ASCAP Foundation membership consists of ASCAP's Board of Directors.
Part VI, Section B, Policies: response to line 11aprovide a copy of this Form 990 to all members of its governing body before filing
The Form 990 is reviewed by internal staff members. The Board of Director's of The ASCAP Foundation reviews the annual independent
audited financial statements as well as the 990 program service accomplishments and functional expenses.
Part VI, Section B, Policies - response to line 15 a, b compensation
The organization maintains a formal written compensation program. Annual performance appraisal's are prepared by an employee's
supervisor or manager and is reviewed and discussed with the employee. Compensation and merit increases are based on a program that is
linked to the current market.

schedule O (Form 990 or 990-EZ) (2012)	Page Z
lame of the organization	Employer identification number
The ASCAP Foundation	51-0181769
Part VI, Section C, Disclosure - response to line 19: The Federal for 990 and other	r information regarding The ASCAP Foundation are available
on the website, ASCAPFoundation.org or by request to The ASCAP Foundation.	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

The ASCAP Foundation

Part I

Related Organizations and Unrelated Partnerships

▶ See separate instructions. ▶ Attach to Form 990.

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

N
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OMB No. 1545-0047

Open to Public

Employer Identification number

51-0181769

Schedule R (Form 990) 2012 (g) Section 512(b)(13) controlled entity? (f) Direct controlling entity ŝ Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Yes (f)
Direct controlling
entity (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) (d) Total income (d) Exempt Code section (c)
Legal domicile (state
or foreign country) Cat. No 50135Y (c) Legal domicile (state or foreign country) (b) Primary activity (b) Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. (a) Name, address, and EIN (if applicable) of disregarded entity (1) (a) Name, address, and EIN of related organization Part II ₹ <u>0</u> 9 Ð 9 8 2 ପ € ල Ξ

Schedule R (Form 990) 2012
Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.
1 Dunng the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
L. Oith month of contraction of a relation to relation to

During the stay of 10 includes (i) murutes (ii) annutes (iii) annutes (iiiii) annutes (iiiii) annutes (iiiii) annutes (iiiii) annutes (iiiiii)) annutes (iiiiiiiiiii) annutes (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii				
Complete this line, including covered relationsh Comp				
complete this line, including covered relationsh type (a-s) m 19,500 ba n 94,104 Es	83 actual amount reimbursed	585,5	0	P - The ASCAP Foundation reimburses ASCAP for co-op payroll services, employee benefits, ge, supplies, telephone and other office related services rendered.
complete this line, including covered relationsh type (a-s) Transaction Type (a-s) m 19,500 ba		94,1	5	ASCAP Foundation.
complete this line, including covered relationsh (b) Transaction Transaction Type (a-s) a,c \$483,722 Ar a,c \$483,722 Ar			5	P-ASCAP personnel assist in the administration of The ASCAP Foundation activities as described as a salaries & benefits based on individual current salary & estimated time allocated
from a controlled entity	00 based on market value	19,5	Ε	ASCAP-ASCAP provides office space at no charge to The ASCAP Foundation, the estimated value of the chare is:
tre following trainsactions with one or more related organization(s) rganization(s) d organization(s) ses ses ses transaction tr	22 Amount received	\$483,7	a,c	ASCAP-In 2012 48 members/heirs elected to donate/bequest a portion or all of their royalties from ASCAP to The ASCAP Foundation. Additionally, ASCAP made a contribution to the ASCAP (1) Foundation in 2012 for program support.
(i) intervest (ii) monutes (iii) royalities or (iv) rent from a controlled entity or capital contribution to related organization(s) or orapital contribution to related organization(s) or orapital contribution from related organization(s) or orapital contribution from related organization(s) oran guarantees by related organization(s) oran guarantees by related organization(s) oran guarantees by related organization(s) oran guarantees by related organization(s) oran guarantees by related organization(s) oran guarantees by related organization(s) oran gassets from related organization(s) of assets incm related organization(s) oran gassets from related organization(s) oran gassets from related organization(s) oran gassets from related organization(s) oran gassets from related organization(s) oran gassets from related organization(s) oran gassets from related organization(s) oran gassets from related organization(s) oran gassets from related organization(s) oran gassets from related organization(s) oran gassets from related organization(s) oran gassets from related organization(s) oran gassets from related organization(s) oran gassets from related organization(s) oran gassets from related organization(s) oran gassets from related organization(s) oran gassets from related organization(s) oran related organization(s) oran related organization(s) oran related organization(s) oran related organization(s) oran related organization(s) oran related organization(s) oran related organization(s) oran related organization(s) orange from related organization(s) orange from related organization(s) orange from related organization(s) orange from related organization(s) orange from related organization(s) orange from related organization(s) orange from related organization(s) orange from related organization(s) orange from related organization(s) orange from related organization(s) orange from related organization(s) orange from related organization(s) orange from related organization(s) orange from related organization(s) orange	(d) Method of determining amount involved	(c) Amount involved	(b) Transaction type (a–s)	(a) Name of other organization
to capital contribution (s) and the digalaction state of galactation (s) and galactation state of galactation (s) and galactation state of galactation(s) and galactation(s) from related organization(s) from related organ	ionships and transaction thresholds.	cluding covered relat	omplete this line, in	ne answer to any of the above is "Yes," see the instructions for information on who must or
tre billowing transactions with one or more related organization(s) from a controlled entity f	18			Other transfer of cash or property from related organization(s)
tre following transactions with one of more related organization(s) from a controlled entity f	> 14 · · · · · · · · · · · · · · · · · ·	•		an transfer of each or proporty to related organization(c)
tren following transactions with one or more related organizations issed in a to into the following transactions with related organization(s)	, 1q · · · · · ·			Reimbursement paid by related organization(s) for expenses
from a controlled entity	\vdash			Reimbursement paid to related organization(s) for expenses
from a controlled entity				Sharing of paid employees with related organization(s)
from a controlled entity				Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).
from a controlled entity				rformance of services or membership or fundraising solicitations by related organization(s)
from a controlled entity in(s) in(s				rformance of services or membership or fundraising solicitations for related organization(s)
from a controlled entity				ase of facilities, equinoment, or other assets from related organization(s)
from a controlled entity	,			Lease of facilities, equipment, or other assets to related organization(s)
from a controlled entity	<u> </u>			Exchange of assets with related organization(s)
from a controlled entity	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			Purchase of assets from related organization(s)
from a controlled entity				Sale of assets to related organization(s)
from a controlled entity	+			Dividends from related organization(s)
from a controlled entity		· · · · · · ·	· · · · · ·	
from a controlled entity	4	•		ans or loan guarantees to or for related organization(s)
the following transactions with one of more related organizations iis do in a district. from a controlled entity	7	•	· · ·	giality of capital contribution from related organization(s)
the following transactions with one of more related organizations issued in that is in the first from a controlled entity				grant, or capital contribution to related organization(s)
the following transactions with one of more related organizations iisted in Faits ii-17:	7 4			
	_ / at			If If If Id year, and use organization engage must ye are recoming a discourse.

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

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

of gloss feveride, that was not a refaced organization. See this taction is regarding exercises of	gai ilkatioli. Oct	ווופנו מכנוסו ופ וב	galan ig cyclasi		יישוו וווייסטוווסווג שמו מוסוסווושיו					
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile	(d) Predominant	(e) Are all partners	(f) Share of	(g) Share of	(h) Disproportionate	Code V—UBI		(k) Percentage
		(state or foreign country)	income (related, unrelated, excluded				allocations?	of Schedule K-1	managing partner?	ownership
			from tax under section 512-514)	organizations (V Po N	(1000)	Ves	
(1)				3			3		<u> </u>	
(2)										
(6)										
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								Sche	dule R (For	Schedule R (Form 990) 2012

Schedule R (F	Form 990) 2012	Page 5
Part VII	Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).	
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