


<b>Form 990</b>  Department of the Treasury Internal Revenue Service	<b>Return of Organization Exempt From Income Tax</b>  <b>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)</b>	OMB No 1545-0047 <div> <div>2011</div> <div>Open to Public Inspection</div> </div>
	The organization may have to use a copy of this return to satisfy state reporting requirements	

<b>A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012</b>		<b>D Employer identification number</b> 13-3039601	
<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 type="checkbox"/> Amended return <input type="checkbox"/> Application pending		<b>E Telephone number</b> (312) 335-8700	
<b>C</b> Name of organization Alzheimer's Disease & Related Disorders Association Inc. Doing Business As Alzheimer's Association Number and street (or P O box if mail is not delivered to street address) Room/suite 225 N Michigan Ave City or town, state or country, and ZIP + 4 Chicago, IL 606017633		<b>G</b> Gross receipts \$ 159,787,494	
<b>F</b> Name and address of principal officer Richard Hovland 225 N Michigan Ave Chicago, IL 606017633		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>I</b> Tax-exempt status <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>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)	
<b>J</b> Website: ► www.alz.org		<b>H(c)</b> Group exemption number ► 9334	
<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►		<b>L</b> Year of formation 1980	
		<b>M</b> State of legal domicile IL	

Part I		Summary	
Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities To eliminate Alzheimer's disease through the advancement of research, to provide and enhance care and support for all affected, & to reduce the risk of dementia through the promotion of brain health    		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) . . . . .	<b>3</b>	43
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	<b>4</b>	43
	<b>5</b> Total number of individuals employed in calendar year 2011 (Part V, line 2a) . . . . .	<b>5</b>	388
	<b>6</b> Total number of volunteers (estimate if necessary) . . . . .	<b>6</b>	1,950
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .	<b>7a</b>	0
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34 . . . . .	<b>7b</b>	
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g) . . . . .	86,072,453	92,496,080
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . . .	3,178,335	5,109,038
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . .	1,542,653	2,227,187
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	3,659,971	4,743,184
		94,453,412	104,575,489
Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . . .	17,532,133	13,494,403
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .	0	0
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) . . . . .	25,820,480	31,688,578
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . .	456,776	433,534
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <input checked="" type="checkbox"/> 18,392,627		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .	49,489,574	54,211,857
	<b>18</b> Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) . . . . .	93,298,963	99,828,372
	<b>19</b> Revenue less expenses Subtract line 18 from line 12 . . . . .	1,154,449	4,747,117
Net Assets or Fund Balances		<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>20</b> Total assets (Part X, line 16) . . . . .	126,296,070	122,758,605
	<b>21</b> Total liabilities (Part X, line 26) . . . . .	57,675,570	52,119,030
	<b>22</b> Net assets or fund balances Subtract line 21 from line 20 . . . . .	68,620,500	70,639,575

Part II		Signature Block	
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
Sign Here	***** Signature of officer		2012-12-14 Date
	RICHARD H HOVLAND COO/CFO Type or print name and title		
Paid Preparer's Use Only	Preparer's signature	DANIEL ROMANO	Date
	Check if self-employed	<input checked="" type="checkbox"/>	Preparer's taxpayer identification number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4	GRANT THORNTON LLP 175 W JACKSON BLVD STE 2000 CHICAGO, IL 60604	
	EIN		
	Phone no	(312) 856-0200	
May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

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 ALZHEIMER'S ASSOCIATION IS THE LEADING VOLUNTARY HEALTH ORGANIZATION IN ALZHEIMER RESEARCH, care, and support OUR MISSION IS TO ELIMINATE ALZHEIMER'S DISEASE THROUGH THE ADVANCEMENT OF RESEARCH, TO PROVIDE AND ENHANCE CARE AND SUPPORT FOR ALL AFFECTED, AND TO REDUCE THE RISK OF DEMENTIA THROUGH THE PROMOTION OF BRAIN HEALTH OUR VISION IS A WORLD WITHOUT ALZHEIMER'S DISEASE THE ALZHEIMER'S ASSOCIATION IS A VALUED RESOURCE FOR CAREGIVERS AND THOSE LIVING WITH THE DISEASE, OFFERING INFORMATION, EDUCATION AND SUPPORT WE ARE A NATIONWIDE NETWORK WITH more than 80 AFFILIATED CHAPTERS WORKING TOGETHER TO ACCOMPLISH OUR MISSION OUR NATIONAL OFFICE IS HEADQUARTERED IN CHICAGO, AND WE HAVE A PUBLIC POLICY OFFICE IN WASHINGTON, D C THE ALZHEIMER'S ASSOCIATION PROVIDES 24/7 CONSTITUENT SUPPORT THROUGH OUR HELPLINE 365 DAYS A YEAR (1 800 272 3900) AND AN AWARD-WINNING WEB SITE, ALZ.ORG WE ARE THE LARGEST NONPROFIT FUNDER OF ALZHEIMER'S DISEASE RESEARCH SINCE AWARDING OUR FIRST GRANTS IN

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 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 \$ 24,129,299 including grants of \$ 12,000 ) (Revenue \$ 0 )

Public Awareness and Education - Alzheimer's is a progressive, degenerative and ultimately fatal disease. Too few Americans understand that the looming epidemic of Alzheimer's will have a grave economic impact on the U.S. economy and as many as 16 million families by mid-century. Already millions of Americans and their families are struggling with this disease without enough information and support. The Alzheimer's Association has invested in education campaigns and initiatives to increase knowledge about Alzheimer's disease and awareness of the Alzheimer's Association as the leader in the fight against it. Key messages include the importance of early detection, resources for people with Alzheimer's and their families, and the societal impact of the disease. We also engage millions of people as champions to educate their communities and workplaces.

4b

(Code ) (Expenses \$ 23,770,407 including grants of \$ 12,055,538 ) (Revenue \$ 4,885,187 )

Research - The Alzheimer's Association implements an aggressive research and science program strategically designed to accelerate progress by fostering innovation, identifying and filling critical knowledge gaps, developing and disseminating tools, and nurturing talent. The Alzheimer's Association has been a catalyst and convener for more than 30 years. Whether funding innovative grants to help further treatments and discovery, hosting the Alzheimer's Association International Conference (AAIC\*), the world's largest gathering of Alzheimer's researchers or leading the Worldwide Alzheimer's Disease Neuroimaging Initiative (WW-ADNI) to accelerate advances in imaging, the Alzheimer's Association seeks to fund best-in-class research. We work with collaborators around the globe from all sectors to hasten this progress. \* These are names that are trademarks to Alzheimer's Association.

4c

(Code ) (Expenses \$ 10,832,839 including grants of \$ 386,841 ) (Revenue \$ 0 )

Chapter Services - From coast to coast, more than 80 affiliated chapters are in communities nationwide, providing services to families and professionals, including information and referral, support groups, care consultation, education and safety services. The national organization provides strategic and tactical support in these activities.

4d
























Other program services (Describe in Schedule O )

(Expenses \$ 16,367,015 including grants of \$ 1,040,024 ) (Revenue \$ 377,779 )

4e

Total program service expenses \$ 75,099,560

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)? If "Yes," complete Schedule A 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 	3	No
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? If "Yes," complete Schedule C, Part II 	4	Yes
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	No
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	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
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	Yes
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? If "Yes," complete Schedule D, Part VI. 	11a	Yes
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? If "Yes," complete Schedule D, Part VII. 	11b	Yes
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 	11c	No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. 	11d	No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 	11e	Yes
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)? If "Yes," complete Schedule D, Part X. 	11f	Yes
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12a	Yes
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 	12b	Yes
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I 	14b	Yes
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II and IV 	15	Yes
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV 	16	No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 	17	Yes
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	Yes
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	Yes
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b	

Part IV

Checklist of Required Schedules (continued)

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

<div>Part V</div> <div>Statements Regarding Other IRS Filings and Tax Compliance</div> <div>Check if Schedule O contains a response to any question in this Part V</div>						
				Yes	No	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .			126		
1a						
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.			0		
c. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?				1c	Yes	
2a	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. .			388		
b. If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).				2b	Yes	
3a. Did the organization have unrelated business gross income of \$1,000 or more during the year?				3a	No	
b. If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.				3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?			4a	No	
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.						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	No	
b. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				5b	No	
c. If "Yes" to line 5a or 5b, did the organization file Form 8886-T?				5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?			6a	No	
b. If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?				6b		
7 Organizations that may receive deductible contributions under section 170(c).						
a. Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?				7a	Yes	
b. If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b	Yes	
c. Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?				7c	No	
d. If "Yes," indicate the number of Forms 8282 filed during the year.				7d		
e. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				7e	No	
f. Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				7f	No	
g. If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?				7g		
h. If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?						
9 Sponsoring organizations maintaining donor advised funds.						
a. Did the organization make any taxable distributions under section 4966?				9a		
b. Did the organization make a distribution to a donor, donor advisor, or related person?				9b		
10 Section 501(c)(7) organizations. Enter						
a. Initiation fees and capital contributions included on Part VIII, line 12.				10a		
b. Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.				10b		
11 Section 501(c)(12) organizations. Enter						
a. Gross income from members or shareholders.				11a		
b. Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).				11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?						
b. If "Yes," enter the amount of tax-exempt interest received or accrued during the year.				12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.						
a. Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.				13a		
b. Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.				13b		
c. Enter the aggregate amount of reserves on hand.				13c		
14a. Did the organization receive any payments for indoor tanning services during the tax year?				14a	No	
b. If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.				14b		

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  
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		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
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?	7a	No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	8a	Yes
8b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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?	10a	Yes
10b	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	Yes
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
11b	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
12b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	15a	Yes
15b	Other officers or key employees of the organization	15b	Yes
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
16b	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	AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, IL, IA, KS, KY, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, UT, VA, WA, WV, WI
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	<input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	RICHARD HOVLAND COO CFO 225 N MICHIGAN AVENUE Chicago, IL 606017633 (312) 335-5771

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

☒ Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

Form **990** (2011)

## Part VII

<b>1b</b>	<b>Sub-Total</b>			
<b>c</b>	<b>Total from continuation sheets to Part VII, Section A</b>			
<b>d</b>	<b>Total (add lines 1b and 1c)</b>	2,556,013	12,650	791,004

**2** Total number of individuals (including but not limited to those listed in Item 1) who received or accrued more than \$100,000 of reportable compensation from the organization. ▶ 62

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

## Section B. Independent Contractors

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. 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
T G Madison Tower Place 3340 Peachtree Rd St ATLANTA, GA 30326	Consultant	9,549,999
Alaniz Box 799 425 N Iris Street MT PLEASANT, IA 52641	Printing/letter shop	5,219,093
InfoCision 325 Springside Dr AKRON, OH 44333	Tele marketing	2,763,166
Thompson Habib Denison 80 Hayden Avenue Ste 300 LEXINGTON, MA 02421	Consultant	1,622,844
RR Donnelly PO Box 93514 CHICAGO, IL 606733514	Printing	1,581,025

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 ▶78



Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues . . . . .	1b	261,740				
	c	Fundraising events . . . . .	1c	557,425				
	d	Related organizations . . . .	1d					
	e	Government grants (contributions)	1e	1,907,130				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	89,769,785				
	g	Noncash contributions included in lines 1a-1f \$ 2,761,638						
	h	Total. Add lines 1a-1f . . . . .		92,496,080				
Program Service Revenue			Business Code					
	2a	PROGRAM CONFERENCES	611710	4,821,434	4,821,434			
	b	JOURNAL	511120	63,753	63,753			
	c	SAFE RETURN REGISTRATION FEE	611710	155,099	155,099			
	d	CAREGIVER TRAINING	611710	68,752	68,752			
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f . . . . .		5,109,038				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . .						
				2,041,153			2,041,153	
	4	Income from investment of tax-exempt bond proceeds . . .			0			
	5	Royalties . . . . .			34,902		34,902	
	6a	(i) Real		(ii) Personal				
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss) . . . . .						
	7a	(i) Securities		(ii) Other				
		53,422,792		0				
		53,235,662		1,096				
		187,130		-1,096				
	d	Net gain or (loss) . . . . .			186,034			186,034
	8a	Gross income from fundraising events (not including \$ 557,425 of contributions reported on line 1c) See Part IV, line 18 . . . .						
		a	2,988,825					
	b	Less direct expenses . . . . .		b	1,431,694			
	c	Net income or (loss) from fundraising events . . .			1,557,131			1,557,131
	9a	Gross income from gaming activities See Part IV, line 19 . . . .						
		a	20,350					
	b	Less direct expenses . . . . .		b	7,500			
	c	Net income or (loss) from gaming activities . . .			12,850			12,850
	10a	Gross sales of inventory, less returns and allowances . . . .						
		a	925,744					
b	Less cost of goods sold . . . . .		b	536,053				
c	Net income or (loss) from sales of inventory . . .			389,691	153,928		235,763	
Miscellaneous Revenue		Business Code						
11a	AFFILIATE REVENUE		900099	949,791			949,791	
b	CHAPTER LICENSING AND MAINTENANCE		900099	846,245			846,245	
c	OTHER REVENUE		900099	952,574			952,574	
d	All other revenue . . . . .							
e	Total. Add lines 11a-11d . . . . .			2,748,610				
12	Total revenue. See Instructions . . . . .			104,575,489	5,262,966		6,816,443	

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	11,702,297	11,702,297		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	1,792,106	1,792,106		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,964,409	1,186,371	453,299	324,739
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	23,318,361	17,687,531	880,520	4,750,310
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,451,203	1,837,093	157,213	456,897
9	Other employee benefits	2,177,403	1,610,006	126,413	440,984
10	Payroll taxes	1,777,202	1,316,070	94,059	367,073
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	549,419	183,140	183,140	183,139
c	Accounting	123,435	101,410	10,457	11,568
d	Lobbying	219,000	219,000		
e	Professional fundraising See Part IV, line 17	433,534			433,534
f	Investment management fees	96,775	96,775		
g	Other	8,707,539	4,324,332	465,183	3,918,024
12	Advertising and promotion	11,037,159	10,827,143	2	210,014
13	Office expenses	19,505,989	10,619,111	3,760,951	5,125,927
14	Information technology	517,044	456,140	23,488	37,416
15	Royalties	0			
16	Occupancy	5,153,627	4,696,365	53,374	403,888
17	Travel	5,473,630	4,359,956	32,068	1,081,606
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	1,420,709	1,289,829	6,654	124,226
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	796,677	538,101	83,884	174,692
23	Insurance	127,620	113,120	1,643	12,857
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O )				
a	RECOGNITION/RECRUITMENT	127,564	112,551	1,744	13,269
b	INVENTORY BUY-BACK EXPENSE	24,983	2,397		22,586
c					
d					
e					
f	All other expenses	330,687	28,716	2,093	299,878
25	Total functional expenses. Add lines 1 through 24f	99,828,372	75,099,560	6,336,185	18,392,627
26	Joint costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	15,413,689	8,180,841	2,705,397	4,527,450

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .			0	1	0
	2	Savings and temporary cash investments . . . . .			10,708,534	2	11,693,107
	3	Pledges and grants receivable, net . . . . .			17,099,520	3	17,180,305
	4	Accounts receivable, net . . . . .			22,708,593	4	16,708,937
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .			0	5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .			0	6	0
	7	Notes and loans receivable, net . . . . .			0	7	493,120
	8	Inventories for sale or use . . . . .			135,491	8	328,464
	9	Prepaid expenses and deferred charges . . . . .			4,137,719	9	6,120,978
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	10a	15,569,281			
	b	Less: accumulated depreciation . . . . .	10b	12,088,543	3,242,084	10c	3,480,738
	11	Investments—publicly traded securities . . . . .			55,910,534	11	54,744,000
	12	Investments—other securities. See Part IV, line 11 . . . . .			12,353,595	12	12,008,956
	13	Investments—program-related. See Part IV, line 11 . . . . .			0	13	0
	14	Intangible assets . . . . .			0	14	0
	15	Other assets. See Part IV, line 11 . . . . .			0	15	0
16	Total assets. Add lines 1 through 15 (must equal line 34) . . . . .			126,296,070	16	122,758,605	
Liabilities	17	Accounts payable and accrued expenses . . . . .			6,741,706	17	6,929,664
	18	Grants payable . . . . .			27,149,833	18	22,525,567
	19	Deferred revenue . . . . .			3,996,445	19	2,479,892
	20	Tax-exempt bond liabilities . . . . .			0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .			0	21	0
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .			0	22	0
	23	Secured mortgages and notes payable to unrelated third parties . . . . .			0	23	0
	24	Unsecured notes and loans payable to unrelated third parties . . . . .			0	24	0
	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 . . . . .			19,787,586	25	20,183,907
	26	Total liabilities. Add lines 17 through 25 . . . . .			57,675,570	26	52,119,030
	Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
27		Unrestricted net assets . . . . .			32,643,433	27	26,593,123
28		Temporarily restricted net assets . . . . .			13,922,372	28	21,875,658
29		Permanently restricted net assets . . . . .			22,054,695	29	22,170,794
Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.							
30		Capital stock or trust principal, or current funds . . . . .				30	
31		Paid-in or capital surplus, or land, building or equipment fund . . . . .				31	
32		Retained earnings, endowment, accumulated income, or other funds . . . . .				32	
33		Total net assets or fund balances . . . . .			68,620,500	33	70,639,575
34	Total liabilities and net assets/fund balances . . . . .			126,296,070	34	122,758,605	

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	104,575,489
2	Total expenses (must equal Part IX, column (A), line 25)	2	99,828,372
3	Revenue less expenses Subtract line 2 from line 1	3	4,747,117
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	68,620,500
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-2,728,042
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	70,639,575

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?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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 type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
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	Yes	

SCHEDULE A  
(Form 990 or 990EZ)

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 Alzheimer's Disease & Related Disorders Association Inc	Employer identification number  13-3039601
--	--

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

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

1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II )

8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )

9

☒

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )

10

☐

An organization organized and operated exclusively to test for public safety Se**section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h  

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

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

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

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, or 8 of Part I 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	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

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

Section C. Computation of Public Support Percentage						
14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))		14				
15 Public Support Percentage for 2010 Schedule A, Part II, line 14		15				
16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
b 33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization						
b 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization						
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions						

Part IIIPart III

Support Schedule for Organizations Described in IRC 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
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	95,071,788	78,177,850	75,805,366	86,383,096	92,496,080	427,934,180
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	3,384,152	5,318,528	4,413,451	3,178,355	5,109,038	21,403,524
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	98,455,940	83,496,378	80,218,817	89,561,451	97,605,118	449,337,704
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	3,200,000	1,188,870	599,940	728,821	619,685	6,337,316
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						
c Add lines 7a and 7b	3,200,000	1,188,870	599,940	728,821	619,685	6,337,316
8 Public Support (Subtract line 7c from line 6.)						443,000,388

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	98,455,940	83,496,378	80,218,817	89,561,451	97,605,118	449,337,704
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,684,438	3,077,704	1,969,538	2,154,572	2,076,055	13,962,307
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	4,684,438	3,077,704	1,969,538	2,154,572	2,076,055	13,962,307
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	439,146	607,419	2,610,156	4,921,675	6,683,529	15,261,925
13 Total support (Add lines 9, 10c, 11 and 12.)	103,579,524	87,181,501	84,798,511	96,637,698	106,364,702	478,561,936
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	92.569%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	93.209%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	2.918%
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	3.493%
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	<input checked="" type="checkbox"/>	
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	<input type="checkbox"/>	
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions	<input type="checkbox"/>	

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

Facts And Circumstances Test

Explanation



Additional Data

Software ID:

Software Version:

EIN: 13-3039601

Name: Alzheimer's Disease & Related Disorders Association Inc

Form 990, Special Condition Description:

Special Condition Description
-------------------------------

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Edward Berube Chair, Exec Comm , Director	10 0	X		X				0	0	0
Gerald Sampson Vice Chair, Exec Comm , Dir	10 0	X		X				0	0	0
Thomas J Winkel treasurer, exec comm , dir	10 0	X		X				0	0	0
Mary Guerriero Austrom PhD Secretary, Exec Comm , Dir	10 0	X		X				0	0	0
R Thomas Bodkin DIRECTOR AND EXEC COMMITTEE	5 0	X						0	0	0
Bill Buechele DIRECTOR AND EXEC COMMITTEE	5 0	X						0	0	0
Cathy Edge DIRECTOR and exec committee	5 0	X						0	0	0
Deborah Jones DIRECTOR and exec committee	5 0	X						0	0	0
Ralph A Nixon MD PhD DIRECTOR and exec committee	5 0	X						0	0	0
John Osher DIRECTOR and exec committee	5 0	X						0	0	0
Ronald Petersen MD PhD DIRECTOR and exec committee	5 0	X						0	0	0
Stewart Putnam DIRECTOR AND EXEC COMMITTEE	5 0	X						0	0	0
John Sabl DIRECTOR and Exec committee	5 0	X						0	0	0
Electa Anderson DIRECTOR	5 0	X						0	0	0
Christopher Binkley DIRECTOR	5 0	X						0	0	0
Robert K Burke DIRECTOR	5 0	X						0	0	0
Richard Della Penna MD DIRECTOR	5 0	X						0	0	0
Jack Faer DIRECTOR	5 0	X						0	0	0
Marlana Geha PhD DIRECTOR	5 0	X						0	0	0
Elizabeth Gelfand Stearns DIRECTOR	5 0	X						0	0	0
Colleen Goldhammer Benzin DIRECTOR	5 0	X						0	0	0
David Goltermann DIRECTOR	5 0	X						0	0	0
Louis Holland Jr DIRECTOR	5 0	X						0	0	0
Stephen Hume PsyD DIRECTOR	5 0	X						0	0	0
Karen Kauffman PhDCRNP BC DIRECTOR	5 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jacqueline Kouri DIRECTOR	5 0	X						0	0	0
John E Maggio PhD DIRECTOR	5 0	X						0	0	0
Jeffrey Maloney DIRECTOR	5 0	X						0	0	0
Bonnie H Marcus DIRECTOR	5 0	X						0	0	0
Linda Mendelson DIRECTOR	5 0	X						0	0	0
David Moscow DIRECTOR	5 0	X						0	0	0
Manny Najera DIRECTOR	5 0	X						0	0	0
Margaret Noel MD DIRECTOR	5 0	X						0	0	0
Ron Profili DIRECTOR	5 0	X						0	0	0
Deborah A Randall Esq DIRECTOR	5 0	X						0	0	0
Kimberly Reed DIRECTOR	5 0	X						0	0	0
Scott Russell EdD DIRECTOR	5 0	X						0	0	0
Alan Silverglat Director	5 0	X						0	0	0
Suzanne B Swift Director	5 0	X						0	0	0
Carl E Tuerk Jr DIRECTOR	5 0	X						0	0	0
Paul Wexler DIRECTOR	5 0	X						0	0	0
Shellie N Williams MD Director	5 0	X						0	0	0
Jerome H Stone Founding Pres, Honorary Chair	5 0	X						0	0	0
HARRY JOHNS PRESIDENT & CEO	60 0			X				575,108	6,750	414,966
RICHARD HOVLAND COO/CFO	60 0			X				328,506	658	90,233
Angela Geiger CHIEF STRATEGY OFFICER	60 0				X			392,202		101,066
William Thies CHIEF MEDICAL SCIENCE OFFICER	60 0					X		331,291		49,614
Robert Egge VP - Public Policy	60 0					X		305,467	5,242	55,806
SCOTT GARDNER VP - CHAPTER RELATIONS	60 0					X		254,103		32,639
Paula Pelissero Sr Director, Human Resources	55 0					X		184,668		23,340

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Matthew Baumgart Sr Director, Public Policy	55.0					X		184,668		23,340

SCHEDULE C  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below.

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

OMB No 1545-0047

2011

Open to Public Inspection

If the organization answered “Yes,” to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered “Yes,” to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization Alzheimer's Disease & Related Disorders Association Inc	Employer identification number  13-3039601
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1

Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV
- 2

Political expenditures ▶ \$
- 3

Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1

Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2

Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3

If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a

Was a correction made? ☐ Yes ☐ No
- b

If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- 1

Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities ▶ \$
- 3

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$
- 4

Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
- 5

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- Check
- ☐
- if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check
- ☐
- if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?	Yes		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c Media advertisements?	Yes		235,991
d Mailings to members, legislators, or the public?	Yes		50,070
e Publications, or published or broadcast statements?	Yes		7,183
f Grants to other organizations for lobbying purposes?		No	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		551,000
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes		218,197
i Other activities? If "Yes," describe in Part IV	Yes		409,317
j Total lines 1c through 1i			1,471,758
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1.  
Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
LOBBYING ACTIVITIES	SCHEDULE C, PART II-B, Line 1i	Nearly all of the Association's lobbying is through staff or volunteers. Therefore, only a small amount of reportable expenses are incurred for grass roots lobbying, 10% of the costs associated with database contracts, or \$3,888. These amounts are used for advocacy. ADDITIONALLY THE ASSOCIATION HAS TRAINING TO DEVELOP AND ORGANIZE CHAPTER BASED GRASSROOTS ACTIVITIES. FOR FISCAL YEAR 2012 THESE TRAINING EXPENDITURES WERE \$405,429. As Alzheimer's disease threatens to bankrupt families, businesses and our healthcare system, scientists are coming close to finding better treatments that could drastically alter the course of the disease. The Alzheimer's Association advocates for public policies aimed at advancing research toward better therapies, detection, methods of prevention and ultimately a cure, as well as for health and long-term coverage to ensure high quality cost effective care for people with Alzheimer's and their families. We also advocate for better care for people and families already facing Alzheimer's. More than 400,000 grass roots advocates speak up for the needs and rights of people with Alzheimer's and their families, and help encourage Congress to increase funding for research and care. Policy activities also include collaborating with other organizations to improve quality care and raise awareness of key issues.

SCHEDULE D  
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2011

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, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b  
Attach to Form 990. See separate instructions.

Name of the organization Alzheimer's Disease & Related Disorders Association Inc	Employer identification number 13-3039601
---	--

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 may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit	
	<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 pleasure)  
☐ Protection of natural habitat  
☐ Preservation of open space  
☐ Preservation of an historically importantly land area  
☐ Preservation of a certified historic structure

2

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

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

3

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

4

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

5

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

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

b

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

(i)

Revenues included in Form 990, Part VIII, line 1

▶ \$ \_\_\_\_\_

(ii)

Assets included in Form 990, Part X

▶ \$ \_\_\_\_\_

2

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

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ \_\_\_\_\_

b

Assets included in Form 990, Part X

▶ \$ \_\_\_\_\_

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

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

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 . . . . .	11,626,613	9,438,167	8,125,409	9,400,894	
b Contributions . . . . .	323,701	96,708	117,211	60,401	
c Investment earnings or losses . . . . .	192,033	2,091,738	1,195,547	-1,285,475	
d Grants or scholarships . . . . .				50,411	
e Other expenditures for facilities and programs . . . . .					
f Administrative expenses . . . . .					
g End of year balance . . . . .	12,142,347	11,626,613	9,438,167	8,125,409	

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶ 90 960 %

c

Term endowment ▶ 9 040 %

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 . . . . .

b

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

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

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 . . . . .				
b Buildings . . . . .				
c Leasehold improvements . . . . .		4,003,514	2,276,753	1,726,761
d Equipment . . . . .		5,537,788	4,574,195	963,593
e Other . . . . .		6,027,980	5,237,595	790,385
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				3,480,739





Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements						
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	104,575,489	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	99,828,372	
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	4,747,117	
4	Net unrealized gains (losses) on investments			4	-1,099,120	
5	Donated services and use of facilities			5		
6	Investment expenses			6		
7	Prior period adjustments			7		
8	Other (Describe in Part XIV)			8	-1,628,922	
9	Total adjustments (net) Add lines 4 - 8			9	-2,728,042	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9			10	2,019,075	
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	107,920,123
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12					
a	Net unrealized gains on investments . . . . .	2a	-1,099,120			
b	Donated services and use of facilities . . . . .	2b	5,258,984			
c	Recoveries of prior year grants . . . . .	2c				
d	Other (Describe in Part XIV) . . . . .	2d	-788,339			
e	Add lines 2a through 2d . . . . .				2e	3,371,525
3	Subtract line 2e from line 1 . . . . .				3	104,548,598
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1					
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a				
b	Other (Describe in Part XIV) . . . . .	4b	26,891			
c	Add lines 4a and 4b . . . . .				4c	26,891
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .				5	104,575,489

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return				
1	Total expenses and losses per audited financial statements . . . . .	1	106,282,136	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities . . . . .	2a	5,569,627	
b	Prior year adjustments . . . . .	2b		
c	Other losses . . . . .	2c		
d	Other (Describe in Part XIV) . . . . .	2d	1,447,081	
e	Add lines 2a through 2d . . . . .	2e	7,016,708	
3	Subtract line 2e from line 1 . . . . .	3	99,265,428	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a		
b	Other (Describe in Part XIV) . . . . .	4b	562,944	
c	Add lines 4a and 4b . . . . .	4c	562,944	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .	5	99,828,372	

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
Intended Uses of Endowment Funds	Schedule D, Part V, Line 4	Permanently restricted net assets are restricted as investments in perpetuity The Association's endowment only consists of donor-restricted endowment funds Net assets associated with the Association's endowment funds are classified and reported based on the existence of donor-imposed restrictions Donors restrict the earnings of some of the Association's endowment funds to fund the Association's research program In accordance with donor stipulations, the income generated from these assets is restricted for research (approximately 56%) or not purpose restricted (approximately 44%) The Association accounts for endowment net assets by preserving the fair value of the original gift as of the gift date of the donor-restricted endowment fund absent explicit donor stipulations to the contrary As a result, the Association classifies as permanently restricted net assets (1) the original value of gifts donated to the permanent endowment, (2) the original value of subsequent gifts to the permanent endowment and (3) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the endowment fund The Association considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds 1 The duration and preservation of the fund 2 The purposes of the Association and the donor-restricted endowment fund 3 General economic conditions 4 The possible effects of inflation and deflation 5 The expected total return from income and the appreciation of investments 6 Other resources of the Association 7 The investment policies of the Association The Association has adopted an investment policy that attempts to provide a predictable stream of funding to programs supported by its endowment while seeking to maintain the purchasing power of the endowment assets As of June 30, 2012, endowment assets only include those assets of donor-restricted funds that the Association must hold in perpetuity, as the Association does not have any Board-designated endowment funds Under this policy, as approved by the Board of Directors, the endowment assets are invested in a manner that is intended to provide adequate liquidity, maximizing returns on all funds invested and achieving full employment of all available funds as earning assets The Association has an active Finance Committee and Investment Sub-Committee that meets regularly to ensure that the objectives of the investment policy are being met, and that the strategies used to meet the objectives are in accordance with the investment policy The Association's policy is to appropriate spending amounts deemed prudent for donor-restricted funds
FIN 48	SCHEDULE D, PART X, LINE 2	The Alzheimer's Association and the Alzheimer's Impact Movement (AIM) have received favorable determination letters from the Internal Revenue Service, stating that they are exempt from federal income taxes under the provisions of 501(c)(3) and 501(c)(4) of the Internal Revenue Code of 1986 (IRC), except for income taxes pertaining to unrelated business income AIMPAC is a political action committee organization exempt from federal taxes under Section 57 of the IRC The Financial Accounting Standards Board issued guidance that requires tax effects from uncertain tax positions to be recognized in the financial statements only if the position is more likely than not to be sustained if the position were to be challenged by a taxing authority Management has determined there are no material uncertain positions that require recognition in the financial statements Additionally, no provision for income taxes is reflected in these financial statements There are no interest or penalties recognized in the statement of activities or statement of position The tax years ending 2008, 2009, and 2010 are still open to audit for both federal and state purposes
Reconciliation of Net assets	SCHEDULE D, PART XI, LINE 8	CHANGE IN PERPETUAL TRUST \$ (207,601) Change in split interest (580,738) Acquisition of dissolved chapters 481,427 Donated noncash contributions (310,643) Bad Debt (911,028) PRIOR PERIOD ADJUSTMENT TO NET ASSETS (100,342) Miscellaneous Adjustment 3 TOTAL \$ (1,628,922)
Reconciliation of Revenue	Schedule D, Part XII, Line 2D	Change in perpetual trust \$ (207,601) Change in split interest (580,738) TOTAL \$ (788,339)
Reconciliation of Revenue	Schedule D, Part XII, Line 4B	Cost Of Goods Sold \$ (536,053) Reimbursement of legal Fees 562,944 TOTAL \$ 26,891
Reconciliation of Expenses	Schedule D, Part XIII, Line 2D	Cost of goods sold \$ 536,053 Bad debt 911,028 TOTAL \$ 1,447,081
Reconciliation of Expenses	Schedule D, Part XIII, Line 4B	Reimbursement of legal fees \$ 562,944 TOTAL \$ 562,944



Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 . . . . . ☐

Use Part V if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			Europe/Iceland/Greenland	Program Support	199,790	CHECK			FMV
			Europe/Iceland/Greenland	Program Support	396,969	CHECK			FMV
			Europe/Iceland/Greenland	Program Support	100,000	CHECK			FMV
			North America	Program Support	97,090	CHECK			FMV
			North America	Program Support	100,000	CHECK			FMV
			Europe/Iceland/Greenland	Program Support	100,000	CHECK			FMV
			North America	Program Support	100,000	CHECK			FMV
			Europe/Iceland/Greenland	Program Support	100,000	CHECK			FMV
			Europe/Iceland/Greenland	Program Support	99,000	CHECK			FMV
			Europe/Iceland/Greenland	Program Support	99,857	CHECK			FMV
			East Asia/Pacific	Program Support	100,000	CHECK			FMV
			Europe/Iceland/Greenland	Program Support	100,000	CHECK			FMV
			East Asia/Pacific	Program Support	99,400	CHECK			FMV
			South America	Program Support	100,000	CHECK			FMV

2

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ☐

14

3

Enter total number of other organizations or entities . . . . . ☐

0

## Part III

[illegible]

**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 (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 and/or Form 3520-A. (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, 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



SCHEDULE G  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information Regarding  
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,  
or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization Alzheimer's Disease & Related Disorders Association Inc	Employer identification number  13-3039601
--	--

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- 1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a

☒ Mail solicitations
- e

☒ Solicitation of non-government grants
- b

☒ Internet and e-mail solicitations
- f

☒ Solicitation of government grants
- c

☒ Phone solicitations
- g

☒ Special fundraising events
- d

☒ In-person solicitations
- 2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No
- b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
THD	Dir Mail PUSH E-MAIL		No	38,468,281	924,733	37,543,548
Infocision	Aware & Vol Program		No	2,545,217	1,988,747	556,470
Total . . . . . ▶				41,013,498	2,913,480	38,100,018

- 3

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY



Part II

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

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		<u>NY Gala</u> (event type)	<u>Sardi's Gala</u> (event type)	<u>4</u> (total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts . . . .	1,085,000	720,750	1,740,500
	2	Less Charitable contributions . . . .	148,800	198,500	210,125
	3	Gross income (line 1 minus line 2) . . . .	936,200	522,250	1,530,375
Direct Expenses	4	Cash prizes . . . .	0	0	0
	5	Non-cash prizes . . . .	195,387	15,000	92,756
	6	Rent/facility costs . . . .	236,233	124,196	355,317
	7	Food and beverages . . . .			
	8	Entertainment . . . .			
	9	Other direct expenses . . . .	110,185	84,636	217,984
	10	Direct expense summary Add lines 4 through 9 in column (d) . . . . . ►			
	11	Net income summary Combine lines 3 and 10 in column (d). . . . . ►			
					( 1,431,694 )
					1,557,131

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 . . . . .		20,350	20,350
	2	Cash prizes . . . . .			
Direct Expenses	3	Non-cash prizes . . . . .		7,500	7,500
	4	Rent/facility costs . . . . .			
	5	Other direct expenses . . . . .			
	6	Volunteer labor . . . . .	<input type="checkbox"/> Yes ..... <input type="checkbox"/> No	<input type="checkbox"/> Yes ..... <input checked="" type="checkbox"/> No	
7 Direct expense summary Add lines 2 through 5 in column (d) . . . . . ►					( 7,500 )
8 Net gaming income summary Combine lines 1 and 7 in column (d) . . . . . ►					12,850

9 Enter the state(s) in which the organization operates gaming activities IL

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 \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Schedule G (Form 990 or 990-EZ) 2011

11

Does the organization operate gaming activities with nonmembers?

☒ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☒ No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a	0 %
b	An outside facility	13b	0 021 %

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name

Michelle Helton

Address

225 N Michigan Ave 17th Flr  
Chicago,IL 606017633

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☒ No

b

If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$

c

If "Yes," enter name and address

Name

Address

16 Gaming manager information

Name

Lynne Carey

Gaming manager compensation \$

600

Description of services provided

Overall supervision and management

☐ Director/officer

☒ Employee

☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☒ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
FUNDRAISING CONSULTANT-CONTROL ARRANGEMENT	SCHEDULE G, PART I, LINE 2B, BOX (iii)	The aLZHEIMER'S ASSOCIATION ENGAGES IMC FOR PROFESSIONAL FUNDRAISING CONSULTANT SERVICES A DESCRIPTION OF THE ARRANGMENT OF THE FUNDS IS LISTED BELOW Post Office Box IMC will facilitate the set up of a post office box to be used solely for the purpose of the volunteer recruitment campaign All donations mailed in for the volunteer recruitment campaign will be mailed to the separate post office box and will be collected daily (5 days per week, Monday - Friday) by the caging vendor Post Office fees will be invoiced through IMC and paid through the cage Bank Account IMC will facilitate the set up of a bank account, at the bank of Client's choice, to be used solely for deposits of donations from the volunteer recruitment campaign All donations mailed in for the volunteer recruitment campaign will be collected and processed by the caging vendor All funds from the volunteer recruitment donations will be deposited into the bank account set up for volunteer recruitment within 2 days Bank fees will be invoiced through IMC and paid through the cage
FUNDRAISING CONSULTANT-Gross Receipts ARRANGEMENT	SCHEDULE G, PART I, LINE 2B, BOX (iv)	In FY13, the Association will receive \$340,000 in revenue from Infocision as a result of FY12 campaigns Those dollars are over and above the FY12 stated gross revenue
FUNDRAISING CONSULTANT- FEE ARRANGEMENT	SCHEDULE G, PART I, LINE 2B, BOX (vi)	The agreement between InfoCision Management Corporation and Alzheimer's Disease & Related Disorders Association is not a percentage-based agreement InfoCision Management Corporation is to be paid a fixed fee per completed call as described in the main agreement and said compensation provisions shall be controlling Alzheimer's Disease & Related Disorders Association exercises control and approval over the content and frequency of all solicitations and volunteer recruitment interactions
Organization operates gaming activities with nonmembers	SCHEDULE G, PART III, LINE 11	The Alzheimer's Association is not a membership organization as described by the IRS The organization therefore doesn't consider its donors members Therefore, the organization has checked box 11 in Part III of Schedule G, "Yes "
Additional Gaming Manager Information	SCHEDULE G, PART III, LINE 16	Name Kate Levy Gaming manager compensation \$300 Description of services provided Recordkeeping Employee Name Katherine Lee Gaming manager compensation \$300 Description of services provided Cash management and bank deposits Employee

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Alzheimer's Disease & Related Disorders  
Association Inc

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

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

OMB No 1545-0047

2011

Open to Public  
Inspection

Employer identification number  
13-3039601

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .

☒ Yes ☐ No
- 2

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

Part II

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

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

2

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

105

3

Enter total number of other organizations listed in the line 1 table . . . . . ▶

4

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

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

Identifier	Return Reference	Explanation
Procedure for Monitoring Use of Grant Funds Inside U S	Schedule I, Part I, Line 2	<p>The over-sight of the scientific integrity of the Alzheimer's Association International Research Grant Program is three-fold First, the Alzheimer's Association voluntary Medical &amp; Scientific Advisory Council ensures diversity of funded awards during the grant review process and develops focused Requests for Applications (RFAs) based on identified needs in the Alzheimer research community Second, the Alzheimer's Association is engaged in a portfolio analysis of our scientific areas of investment to monitor the diversity of our grants portfolio, potential gaps in research funding, and potential overlap of areas funded The analysis informs future funding decisions and areas of RFA focus Third, there is a detailed process once a grant is awarded to monitor program and scientific and financial integrity The Alzheimer's Association monitors the use of grant funds both inside and outside of the United States as follows All awardees are required to provide annual reporting to the Alzheimer's Association on both the status of the research project and financial expenditures associated with the award Sixty days prior to the anniversary of the award, an Alzheimer's Association Post-Award Specialist notifies all researchers and all designated institutional financial officials with fiscal responsibility for the award of the required reports, which include an interim scientific report, and interim financial report and documentation of any publications as a result of Association funding The institutional official who has fiscal responsibility for the award cannot be the primary investigator of the project The Alzheimer's Association provides a template for the interim scientific report and a template for the interim financial report, both of which are available for download by the researchers as well as the official with fiscal responsibility for the grant at the awarded institution at <a href="https://proposalcentral.altum.com/login.asp">https //proposalcentral altum com/login asp</a> The financial report must be signed by the institutional official with fiscal responsibility, and all reports must be uploaded by the award recipient to proposalcentral After receipt, all financial reports are reviewed by an Alzheimer's Association post-award specialist for accuracy and consistency with the agreed upon budget Any subsequent payments to grant awardees are generated after their receipt and approval by our Chief Medical Science Officer or Vice President, Medical and Scientific Relations At the conclusion of the award, all reports/publication(s) are due 90 days after the award expires and must be uploaded to proposalCENTRAL online system The Financial Report must be signed by the Institutional Official who has fiscal responsibility for the award In addition, we request, monitor, and follow-up to ensure submission compliance on all awarded contracts, and to secure financial reporting requirements are met We audit annual awardees financial reports to ensure eligibility for continued funding Delinquent report (s) may result in the withdrawal of funding Researchers are informed that delinquent reporting could lead to withdrawal of funding when the request for annual report(s) is sent If funding is withdrawn due to delinquent reports, any unspent funds must be returned to the Alzheimer's Association This Researcher becomes ineligible to apply for funding from the Alzheimer's Association Foreign institutions are required to submit one of the following as verification of non-profit status *</p> <p>* Organization's charter, bylaws and other governing documents * Documentation of non-profit designation from organization's government For-profit organizations are not eligible to apply to the Alzheimer's Association's International Research Grant Program All institutions are required to submit verification of their non-profit status dated within the last five years (e g , IRS tax determination letter) If their determination letter is dated prior to this five year period, the institution is asked to provide documentation from an authorized organization individual to confirm there has not been a status change for the organization The Alzheimer's Association monitors the scientific advances of the Association's grant awardees by maintaining records of publications, presentations, and intellectual property that results from funded studies The Association requires the grant recipient to notify us on an annual basis with updates to these records We also monitor follow-on funding from federal agencies</p>

**Software ID:**  
**Software Version:**  
**EIN:** 13-3039601  
**Name:** Alzheimer's Disease & Related Disorders  
Association Inc

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Regents of the University of Minnesota200 Oak Street Minneapolis, MN 55455	41-6007513	501(c)(3)	400,000		FMV		Program Support
Portland State UniversityPO Box 751 Portland, OR 97207	48-1278529	501(c)(3)	199,469		FMV		Program Support

**Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Massachusetts General Hospital101 Huntington Ave Boston, MA 02199	04-2697983	501(c)(3)	240,000		FMV		Program Support
Mount Sinai School of MedicinePO Box 1075 New York, NY 10029	13-6171197	501(c)(3)	240,000		FMV		Program Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Nathan S Kline Institute140 Old Orangeburg Rd Orangeburg, NY 10962	14-1410842	501(c)(3)	240,000		FMV		Program Support
The Institute for Molecular Medicine 16371 Gothard St Huntington Beach, CA 92647	88-0366979	501(c)(3)	239,503		FMV		Program Support

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
The University of Iowa2 Gilmore Hall Iowa City, IA 52242	42-6004813	501(c)(3)	239,250		FMV		Program Support
Rush University Medical Center 1653 W Congress Parkway Chicago, IL 60612	36-2174823	501(c)(3)	239,910		FMV		Program Support



Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Sloan-Kettering Institute1275 York Avenue New York, NY 10065	13-1624182	501(c)(3)	240,000		FMV		Program Support
Mount Sinai School of MedicinePO Box 1075 New York, NY 10029	13-6171197	501(c)(3)	240,000		FMV		Program Support

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Univ of Texas Health Science Center7703 Floyd Curl Dr San Antonio, TX 78229	74-1586031	501(c)(3)	239,862		FMV		Program Support
Mayo Clinic Jacksonville4500 San Pablo Road Jacksonville, FL 32224	15-9333702	501(c)(3)	240,000		FMV		Program Support

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Case Western Reserve University 10900 Euclid Cleveland, OH 44106	34-1018992	501(c)(3)	239,996		FMV		Program Support
University of South Florida 3650 Spectrum Tampa, FL 33612	59-3102112	501(c)(3)	159,774		FMV		Program Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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The University of TexasPO Box 20036 Houston, TX 77225	74-1761309	501(c)(3)	160,000		FMV		Program Support
The Nathan S Kline Institute140 Old Orangeburg Rd Orangeburg, NY 10962	14-1410842	501(c)(3)	399,956		FMV		Program Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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New York University665 Broadway Suite 801 New York, NY 10012	13-5562308	501(c)(3)	100,000		FMV		Program Support
Banner Research Institute10515 West Santa Fe Sun City, AZ 85351	86-0768795	501(c)(3)	100,000		FMV		Program Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Mount Sinai School of MedicinePO Box 1075 New York, NY 10029	13-6171197	501(c)(3)	98,670		FMV		Program Support
New York University School of Medicine1 Park Ave New York, NY 10016	13-5562308	501(c)(3)	100,000		FMV		Program Support

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Washington University660 South Euclid Ave St Louis, MO 63110	43-0653611	501(c)(3)	100,000		FMV		Program Support
The Children's Hospital of Philadelphia3615 Civic Center Philadelphia, PA 19104	23-1352166	501(c)(3)	99,549		FMV		Program Support

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University of Delaware210 Hullihen Hall Newark, DE 19716	51-6000297	501(c)(3)	100,000		FMV		Program Support
The Trustees of Columbia University630 W 168th St New York, NY 10032	13-5598093	501(c)(3)	100,000		FMV		Program Support



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San Diego State Univ Research Fdn 5250 Campanile Dr San Diego, CA 92182	95-6042721	501(c)(3)	99,998		FMV		Program Support
New York University 665 Broadway Suite 801 New York, NY 10012	13-5562308	501(c)(3)	99,979		FMV		Program Support

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The University of Texas Medical Branch301 University Galveston, TX 77555	74-6000949	501(c)(3)	100,000		FMV		Program Support
West Virginia University886 Chestnut Ridge Morgantown, WV 26506	55-6000842	501(c)(3)	97,493		FMV		Program Support

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Mayo Clinic200 First St SW Rochester, MN 559050001	41-6011702	501(c)(3)	100,000		FMV		Program Support
Emory University1599 Clifton Rd Atlanta, GA 30322	58-0566256	501(c)(3)	99,997		FMV		Program Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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Mount Sinai School of MedicinePO Box 1075 New York, NY 10029	13-6171197	501(c)(3)	99,974		FMV		Program Support
Rush University Medical Center 1653 W Congress Parkway Chicago, IL 60612	36-2174823	501(c)(3)	99,831		FMV		Program Support

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University of Pittsburgh123 University Pl Pittsburgh, PA 15213	25-0965591	501(c)(3)	100,000		FMV		Program Support
Medical University of South Carolina19 Hagood Ave Charleston, SC 29425	57-6000722	501(c)(3)	99,988		FMV		Program Support

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The Regents of the University of California Los A 11000 Kinross Avenue Los Angeles, CA 90095	95-6006143	501(c)(3)	100,000		FMV		Program Support
University of Houston4800 Calhoun Houston, TX 772042015	74-6001399	501(c)(3)	100,000		FMV		Program Support

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The Regents of the University of California5171 California Irvine, CA 926977600	95-2226406	501(c)(3)	100,000		FMV		Program Support
The Regents of the University of California5171 California Irvine, CA 926977600	95-2226406	501(c)(3)	100,000		FMV		Program Support

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Washington University in St Louis660 South Euclid St Louis, MO 63110	43-0653611	501(c)(3)	100,000		FMV		Program Support
The Regents of the University of California5200 North Lake Road Merced, CA 95343	27-0093858	501(c)(3)	100,000		FMV		Program Support



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The University of Chicago5801 South Ellis Avenue Chicago, IL 60637	36-2177139	501(c)(3)	100,000		FMV		Program Support
Univ of North Texas Health Science Center 3500 Camp Bowie Blvd Fort Worth, TX 76107	75-6064033	501(c)(3)	100,000		FMV		Program Support

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The Regents of the University of California1850 Research Park Davis, CA 95618	94-6036494	501(c)(3)	100,000		FMV		Program Support
University of Pennsylvania3451 Walnut St Philadelphia, PA 19104	23-1352685	501(c)(3)	99,840		FMV		Program Support

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Emory University 1599 Clifton Atlanta, GA 30322	58-0566256	501(c)(3)	100,000		FMV		Program Support
The Regents of the University of California 5171 California Ave Irvine, CA 92697	95-2226406	501(c)(3)	100,000		FMV		Program Support

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The University of Kansas2385 Irving Hill Lawrence, KS 66045	48-0680117	501(c)(3)	100,000		FMV		Program Support
Brigham and Women's Hospital Inc75 Francis Street Boston, MA 02115	04-2312909	501(c)(3)	100,000		FMV		Program Support

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The Board of Trustees of the Univ of IL1901 S First Champaign, IL 61820	37-6000511	501(c)(3)	100,000		FMV		Program Support
Brigham and Women's Hospital Inc75 Francis Street Boston, MA 02115	04-2312909	501(c)(3)	96,565		FMV		Program Support

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

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University of Colorado Denver AMC and DC 13001 E 17th Place Aurora, CO 80045	84-6000555	501(c)(3)	99,998		FMV		Program Support
University of South Florida 3650 Spectrum Blvd Tampa, FL 33612	59-3102112	501(c)(3)	100,000		FMV		Program Support

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University of Vermont85 S Prospect St Burlington, VT 05401	03-0225105	501(c)(3)	299,998		FMV		Program Support
The Regents of the University of California3333 California St San Francisco, CA 94118	94-6036493	501(c)(3)	200,000		FMV		Program Support

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Baylor College of Medicine One Baylor Plaza Houston, TX 77030	74-1613878	501(c)(3)	200,000		FMV		Program Support Program Support
The Regents of the University of California 3333 California St San Francisco, CA 94118	94-6036493	501(c)(3)	71,623		FMV		Program Support Program Support



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Foundation for the National Inst of Health3333 California St San Francisco, CA 94118	52-1986675	501(c)(3)	250,000		FMV		Program Support
Washington University in St Louis660 S Euclid Ave St Louis, MO 63110	43-0653611	501(c)(3)	1,095,209		FMV		Program Support

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Cleveland Clinic Foundation9500 Euclid Avenue Cleveland, OH 44195	34-0714585	501(c)(3)	46,667		FMV		Program Support
Cleveland Clinic Foundation9500 Euclid Avenue Cleveland, OH 44195	34-0714585	501(c)(3)	46,667		FMV		Program Support

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Cleveland Clinic Foundation9500 Euclid Avenue Cleveland, OH 44195	34-0714585	501(c)(3)	46,667		FMV		Program Support
Case Western Reserve University10900 Euclid Avenue Cleveland, OH 44106	34-1018992	501(c)(3)	80,000		FMV		Program Support

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University of Pennsylvania3451 Walnut St Philadelphia, PA 19104	23-1352685	501(c)(3)	100,000		FMV		Program Support
University of Washington4333 Brooklyn Ave Seattle, WA 98195	91-6001537	501(c)(3)	77,000		FMV		Program Support

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Greater Wisconsin Chapter2900 Curry Lane Suite A Green Bay, WI 54311	39-1493227	501(c)(3)	23,000		FMV		Program Support
Ohio Department of Health246 N High Street Columbus, OH 43215	31-1334820	501(a)	12,400		FMV		Program Support

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Georgia Chapter 1925 Century Blvd Atlanta, GA 30345	58-1492046	501(c)(3)	15,000		FMV		Program Support
Mississippi Chapter 1900 Dunbarton Jackson, MS 39216	64-0786327	501(c)(3)	23,000		FMV		Program Support

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St Louis Chapter 9370 Olive Blvd St Louis, MO 63132	43- 1237069	501(c)(3)	28,000		FMV		Program Support
Greater Iowa Chapter 1730 28th St West Des Moines, IA 50266	42- 1520582	501(c)(3)	28,100		FMV		Program Support

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Mid South Chapter 4825 Trousdale Dr Nashville, TN 37215	62- 1860364	501(c)(3)	14,000		FMV		Program Support
Northern California and Nevada Chapter1060 La Avenida Mountain View, CA 94043	94- 2897949	501(c)(3)	25,500		FMV		Program Support



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West Virginia Chapter1111 Lee St Charleston, SC 25301	36-3487172	501(c)(3)	18,000		FMV		Program Support
Louisiana Dept of HealthPO Box 3118 Baton Rouge, LA 70821	72-6011595	501(a)	25,000		FMV		Program Support

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Arizona Dept of Health1740 W Adams Room 303 Phoenix, AZ 85007	86-6004791	501(a)	20,000		FMV		Program Support
Greater Kentucky Chapter6100 Duchmans Lane Louisville, KY 40205	36-4497854	501(c)(3)	5,500		FMV		Program Support

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Minnesota North Dakota Chapter 4550 W 77th Minneapolis, MN 55435	41-1361624	501(c)(3)	7,270		FMV		Program Support
Oregon Chapter 1650 NW Naito Pkwy Portland, OR 97209	93-0813252	501(c)(3)	28,000		FMV		Program Support

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Connecticut Chapter 2075 Silas Deane Hwy Rocky Hill, CT 06067	42-1540769	501(c)(3)	17,000		FMV		Program Support
OklahomaArkansas Chapter 6465 South Yale Tulsa, OK 74136	73-1183372	501(c)(3)	14,520		FMV		Program Support

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Maine Dept of Health221 S State St Agusta,ME 04333	01-6000001	501(a)	15,000		FMV		Program Support
National Capital Area Chapter3701 Pender Dr Fairfax,VA 22030	52-1196162	501(c)(3)	23,000		FMV		Program Support

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Alzheimer's Impact Movement (AIM) 225 Michigan Chicago, IL 60601	27-1961435	501(c)(3)	589,830		FMV		Program Support
Houston and Southeast Texas Chapter 2242 West Holcombe Blvd Houston, TX 77030	74-2198685	501(c)(3)	35,161		FMV		Program Support

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California and Central Coast chapter1528 Chapala St Santa Barbara, CA 93101	77-0006745	501(c)(3)	9,600		FMV		Program Support
Central and North Florida Chapter378 Center Pt Altamonte Springs, FL 32701	36-3487166	501(c)(3)	7,480		FMV		Program Support

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East Central Iowa Chapter317 Seventh Ave Cedar Rapids, IA 52401	42-1333384	501(c)(3)	6,471		FMV		Program Support
Central and Western Virginia1160 Pepsi Pl Charlottesville, VA 22901	54-1309570	501(c)(3)	7,158		FMV		Program Support



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Connecticut Chapter 2075 Silas Deane Hwy Rocky Hill, CT 06067	42-1540769	501(c)(3)	10,120		FMV		Program Support
Georgia Chapter 1925 Century Blvd Atlanta, GA 30345	58-1492046	501(c)(3)	12,972		FMV		Program Support

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Greater Illinois Chapter8430 W Bryn Mawr Chicago, IL 60631	36-3102348	501(c)(3)	18,520		FMV		Program Support
Greater Kentucky Chapter6100 Duchmans Ln Louisville, KY 40205	36-4497854	501(c)(3)	9,998		FMV		Program Support

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Greater Maryland Chapter1850 York Road Timonium, MD 21093	52-1219428	501(c)(3)	9,516		FMV		Program Support
Greater Dallas Chapter4144 N Central Expy Dallas, TX 75204	75-2041194	501(c)(3)	13,200		FMV		Program Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mid Missouri Chapter2400 Bluff Creek Dr Columbia, MO 65201	43-1344786	501(c)(3)	5,952		FMV		Program Support
Northern California and Nevada Chapter1060 La Avenida Mountain View, CA 94043	94-2897949	501(c)(3)	16,718		FMV		Program Support

**Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Northeastern New York Chapter4 Pine West Plaza Albany, NY 12205	14-1634958	501(c)(3)	7,916		FMV		Program Support
North Central Texas Chapter2630 West Fwy Fort Worth, TX 76102	75-1984152	501(c)(3)	7,681		FMV		Program Support

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Oklahoma and Arkansas Chapter 6465 South Yale Tulsa, OK 74136	73-1183372	501(c)(3)	8,160		FMV		Program Support
Rochester and Finger Lakes Chapter 435 E henrietta Rd Rochester, NY 14620	16-1159941	501(c)(3)	9,517		FMV		Program Support

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
South Carolina Chapter4124 Clemson Blvd Anderson, SC 29621	57-0792592	501(c)(3)	7,651		FMV		Program Support
Southeastern Virginia Chapter 6350 Center Dr Norfolk, VA 23502	54-1204329	501(c)(3)	5,710		FMV		Program Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Utah Chapter855 E 4800 S Salt Lake City, UT 84107	87-0397943	501(c)(3)	6,219		FMV		Program Support
Vermont Chapter 300 Cornerstone Williston, VT 05495	03-0286299	501(c)(3)	6,650		FMV		Program Support



**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Western Carolina Chapter3800 Shamrock Charlotte, NC 28215	56-1440727	501(c)(3)	7,770		FMV		Program Support
Mid South Chapter 4825 Trousdale Nashville, TN 37215	62-1860364	501(c)(3)	9,016		FMV		Program Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
California Southland Chapter5900 Wilshire Blvd Los Angeles, CA 90036	95-3718119	501(c)(3)	18,400		FMV		Program Support
Greater Pennsylvania Chapter3544 Progress Ave Harrisburg, PA 17110	25-1510692	501(c)(3)	10,080		FMV		Program Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Wake Forest UniversityMedical Center Blvd WinstonSalem, NC 27157	22-3849199	501(c)(3)	362,821		FMV		Program Support

Schedule J  
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization  
Alzheimer's Disease & Related Disorders Association Inc

Employer identification number  
13-3039601

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

Part II

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

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

**Note.** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) 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 in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) HARRY JOHNS	(i) (ii)	489,391 6,750	85,000	717	393,218	21,748	990,074 6,750	
(2) RICHARD HOVLAND	(i) (ii)	250,221 658	76,658	1,627	60,283	29,950	418,739 658	
(3) Angela Geiger	(i) (ii)	302,974	88,920	308	82,784	18,282	493,268	
(4) William Thies	(i) (ii)	252,334	76,045	2,912	26,950	22,664	380,905	
(5) Robert Egge	(i) (ii)	243,083 5,242	62,138	246	26,950	28,856	361,273 5,242	
(6) SCOTT GARDNER	(i) (ii)	202,395	50,891	817	24,848	7,791	286,742	
(7) Paula Pelissero	(i) (ii)	175,300	8,737	631	20,470	2,870	208,008	
(8) Matthew Baumgart	(i) (ii)	175,300	8,737	631	20,470	2,870	208,008	

**Part III**   **Supplemental Information**

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

Identifier	Return Reference	Explanation
Travel for companions	Schedule J, Part I, Line 1a	Three board members have early on-set Alzheimer's Disease and traveled to board meetings with a companion for safety purposes. Companion's travel expense was reimbursed.
Supplemental nonqualified retirement plan	Schedule J, Part I, Line 4b	Harry Johns participates in a 457(f) plan. The amounts accrued are included on Schedule J as deferred compensation. The amount for 2011 is \$224,768. Richard Hovland, Angela Geiger, and Harry Johns participate in a 457(b) plan. The amount accrued is included on Schedule J as deferred compensation. Harry Johns was the only individual in 2011 with an amount accrued. His amount in 2011 was \$16,500.
SUPPLEMENTAL COMPENSATION INFORMATION	SCHEDULE J, PART II, COLUMN (C)	Harry Johns - Incentive compensation of \$85,500 (Part II B(II)) is based on performance measures developed, reviewed and approved by the Compensation Committee of the Alzheimer's Association Board of Directors in consultation with the Association's independent compensation consultants and represents achievement of goals for fiscal year 2010. This incentive compensation was earned in fiscal year 2010, however, not paid until calendar year 2011 as a result of fiscal year timing. Retirement and other deferred compensation of \$393,218 (Part II (c )) is comprised of both employee and employer funding to the 401K retirement plan and employer accrual to a supplemental retirement account. This annual contribution is subject to multiple year vesting requirements through June 30, 2012. The latter has not been paid to the executive and will not be paid until a later date in 2012, AND WILL APPEAR IN THE 2012 RETURN. Nontaxable benefits of \$21,748 (Part II(D)) include employer contribution to medical, dental, short- and long-term disability and basic life provision. Deferred compensation for Angela Geiger includes employer funding to 401K retirement plan and a retention incentive accrued but not paid at December 31, 2011. Ms. Geiger's deferred compensation is tied to specific multi-year vesting requirements through June 30, 2012. Deferred compensation for Richard Hovland includes employer funding to retirement plan and a retention incentive accrued but not paid at December 31, 2011. Mr. Hovland's deferred compensation is tied to specific multi-year vesting requirements through January 30, 2013. Deferred compensation for Robert Egge and William Thies include employer funding to 401K retirement plan.

SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

NonCash Contributions

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization  
Alzheimer's Disease & Related Disorders  
Association Inc

Employer identification number  
13-3039601

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining 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 . . . . .	X	569	292,027	Cost/Selling Price
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	105	1,848,325	Cost/Selling Price
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 ► ( Attachment ) . . . . .	X	118	310,643	Fair Market Value
26 Other ►( ) . . . . .				
27 Other ►( ) . . . . .				
28 Other ►( ) . . . . .				

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 . . . . .

290

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? . . . . .

30a

Yes

No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? . . . . .

32a

Yes

b If "Yes," describe in Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

Part III

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

Identifier	Return Reference	Explanation
Third Party Assistance of Noncash Contributions	SCHEDULE M, PART I, LINE 25 AND LINE 32B	LINE 25 The Alzheimer's Association receives various noncash contributions for their fundraising events These items include sporting tickets, jewelry, concert tickets, dinners and various other packages LINE 32B A THIRD PARTY BROKER RECEIVES DIRECTLY, SELLS AND REMITS PROCEEDS FROM STOCK GIFTS



SCHEDULE O  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization  
Alzheimer's Disease & Related Disorders  
Association Inc

Employer identification number  
  
13-3039601

Identifier	Return Reference	Explanation
Other Program Services	FORM 990, Part III, Line 4d	Advocacy - As Alzheimer's disease threatens to bankrupt families, businesses and our healthcare system, scientists are coming close to finding better treatments that could drastically alter the course of the disease The Alzheimer's Association advocates for public policies aimed at advancing research toward better therapies, detection, methods of prevention and ultimately a cure, as well as for health and long-term coverage to ensure high quality cost effective care for people with Alzheimer's and their families We also advocate for better care for people and families already facing Alzheimer's More than 400,000 grass roots advocates speak up for the needs and rights of people with Alzheimer's and their families, and help encourage Congress to increase funding for research and care Policy activities also include collaborating with other organizations to improve quality care and raise awareness of key issues REVENUES NONE EXPENSES \$ 5,448,079 GRANTS \$ 593,227 PATIENT AND FAMILY SERVICES - The Alzheimer's Association* provides an array of information and support services designed specifically for individuals with Alzheimer's disease, their families, friends and caregivers In order to meet the diverse needs of individuals affected by Alzheimer's disease, the Association's programs and services are offered in person, by phone and online Through our programs and services, the Association serves over 700,000 individuals in person or by telephone, and millions more over the web each year Online nationwide and in more than 80 affiliated chapters throughout the country, constituents can attend education programs and support groups, enroll in Support programs and products to reduce the risks associated with wandering, a dangerous and potentially fatal symptom of Alzheimer's disease, receive personalized care consultation and engage in early stage programs The Association has been a leader in providing Support programs and products to reduce the risks associated with wandering, a dangerous and potentially fatal symptom of Alzheimer's disease, for the approximately 6 of 10 persons with dementia at risk for wandering Through The MedicAlert* + Alzheimer's Association Safe Return program* and comfort zone In 2012, the Alzheimer's association launched two free resources for families impacted by Alzheimer's disease Alzheimer's association alzheimer's navigator* is an online tool to help caregivers and people with dementia evaluate their needs, identify action steps and connect with local programs and services developed with the feedback of people living with Alzheimer's and caregivers, Alzheimer navigator* also allows users to reassess needs and adjust care plans as the disease progresses alzconnected*, powered by Alzheimer's association, is the first social networking community designed for people living with Alzheimer's and their caregivers it offers a place where those impacted by Alzheimer's can connect to others, find support and share tips and strategies for living with disease Through the Association's 24/7/365 Helpline, individuals with Alzheimer's and their families can talk to a specialist to receive information and basic education about the disease and for more complicated or urgent situations, constituents can speak to a masters level trained counselor, any time, day or night The helpline handles over 260,000 calls per year The Association's website (alz.org) receives an average of 1.4 million visits each month Online programs include self-service education programs, an online community, an interactive brain tour (available in 14 languages), access to comprehensive disease information, portals in Spanish, Chinese, and Vietnamese, a virtual library, and a safety center Through the Association's Early Stage Initiative, individuals in the early stages of the disease can participate in education programs, support groups and engagement programs Additionally, the Association convenes an Early Stage Advisory Group whose members work to raise awareness, advocate for the cause and provide guidance and review of our programs and services The programs and services of the Alzheimer's Association are designed to provide education, information and support and to help individuals with Alzheimer's and their families navigate the long and complicated journey through Alzheimer's disease *THESE ARE NAMES THAT ARE TRADEMARKS TO ALZHEIMER'S ASSOCIATION REVENUES \$ 377,779 EXPENSES \$ 10,937,786 GRANTS \$ 446,797

Identifier	Return Reference	Explanation
governing body	Form 990, Part VI, Line 1a	<p>The Board of Directors of the Alzheimer's Association is the organization's governing body. The Board has delegated authority to its standing and other business committees as described in Article VIII of the organizational bylaws. In addition to describing the responsibilities of each committee, the Alzheimer's Association bylaws describe the process by which committees of the Board of Directors are created and members are appointed. The following excerpt from the Association bylaws discusses committees of the Board of Directors.</p> <p><b>Committees of Directors.</b> The Board of Directors shall have the following standing committees: Executive, Finance, Governance and Nominating, Compensation and Audit.</p> <p><b>Executive Committee.</b> The Executive Committee shall supervise the affairs of the Association and regulate its internal economy, approve expenditures and commitments according to policies prescribed by the Board of Directors, act for and carry out the established policies of the Association as defined by the Board of Directors, including the Policies and Procedures, report to the Board of Directors at each meeting of the Board of Directors and have such other additional powers as may be by law or resolution of the Board of Directors provided. The Executive Committee shall have and may exercise all authority of the Board of Directors in the management of the Association, subject to the limitations contained in the Delaware Corporation Law. The Committee's responsibilities shall include, but not be limited to, initiating long-range planning, environmental scanning and performance evaluation, initiating the Board's annual strategic priorities for approval by the Board, assisting the Chair in developing charges to the Committees, identifying programmatic and financial indicators of Association performance, conducting the review, performance evaluation and succession planning for the President and CEO, making by-law recommendations to the Board, reviewing the activities of the Medical and Scientific Advisory Council and National Advisory Council, and identifying Significant Issues as that term is defined in Article X hereafter which require consideration by the Association Assembly as described in the same Article and receiving, on behalf of the Board, the Association Assembly's suggestions and recommendations for Board consideration or action. At each of its annual meetings, the Board of Directors by duly adopted resolution shall elect an Executive Committee consisting of not less than eleven or more than fifteen Directors. The Chair, Chair Elect, Vice Chairs, Secretary, Treasurer, Chairs of the Standing Committees, and Chairs of the following committees: Chapter Relations, Development, Program, and Public Policy, shall be members of the Executive Committee. The Chair of the Board of Directors shall be the chair of the Executive Committee. The Executive Committee may hold regular meetings monthly or as it may otherwise determine, at such place and at such times and upon such notice as it may determine. Special meetings of the Executive Committee may be called at any time by the chair or by any three of its members, by notice delivered personally or by mail, telephone, electronic mail or facsimile at least seven days prior to the meeting. A majority of the currently serving members of the Executive Committee shall constitute a quorum for all purposes.</p> <p><b>Finance Committee.</b> The Finance Committee shall consist of at least five Directors and shall be chaired by the Treasurer. The Finance Committee shall oversee and review all financial reports, accounting activities and investment decisions of the Association and also shall prepare a projected budget for each fiscal year to be presented to the Board of Directors for approval.</p> <p><b>Governance and Nominating Committee.</b> At each of its annual meetings, the Board of Directors by duly adopted resolution shall elect a Governance and Nominating Committee consisting of not less than nine nor more than fifteen individuals currently serving as a Director. At least one-third of the Governance and Nominating Committee shall be Directors having Chapter Experience. The Governance and Nominating Committee shall assist the Board in ensuring the successful governance of the Association through Board assessment, recruitment, nominations, orientation and development. The Governance and Nominating Committee shall nominate candidates for Directors, officers and members of the Executive Committee. The Governance and Nominating Committee may nominate candidates for Director Emeritus, Honorary Director and the National Advisory Council and approve and present to the Board for approval the candidates for MSAC membership. The Committee also advises the Chair on the selection of Vice Chairs, Committee Chairs and Committee Vice Chairs.</p> <p><b>Compensation Committee.</b> A Compensation Committee which shall recommend salary and benefits for the President and CEO and senior officers of the Association, ensure succession plans are in place.</p>

Identifier	Return Reference	Explanation
governing body	Form 990, Part VI, Line 1a	<p>in place for key positions in the Association and provide oversight on the retirement programs offered by the Association to its employees. <b>Audit Committee.</b> THE AUDIT COMMITTEE IS A COMMITTEE OF THE BOARD OF DIRECTORS, REPORTS DIRECTLY TO THE BOARD AND ACTS UNDER A WRITTEN CHARTER ADOPTED AND APPROVED BY THE BOARD OF DIRECTORS. THE AUDIT COMMITTEE SHALL OVERSEE THE ACTIVITIES OF ANY INTERNAL AUDITOR OF THE ASSOCIATION. THE AUDIT COMMITTEE SHALL SEE THAT AN ANNUAL AUDIT IS PREPARED BY AN INDEPENDENT FIRM OF CERTIFIED PUBLIC ACCOUNTANTS RECOMMENDED BY THE AUDIT COMMITTEE TO THE BOARD OF DIRECTORS. THE AUDIT COMMITTEE SHALL REVIEW THE ASSOCIATION'S EXTERNAL AUDIT REPORTS AND ANNUAL REPORTS AND SUBMIT TO THE BOARD OF DIRECTORS. THE AUDIT COMMITTEE SHALL REVIEW AND APPROVE THE FORM 990. THE AUDIT COMMITTEE SHALL HAVE AT LEAST FIVE MEMBERS, ALL OF WHOM ARE MEMBERS OF THE BOARD OF DIRECTORS AND ARE FINANCIALLY LITERATE, DEFINED AS HAVING THE ABILITY TO READ AND UNDERSTAND FUNDAMENTAL FINANCIAL STATEMENTS. AT LEAST ONE MEMBER OF THE AUDIT COMMITTEE SHALL MEET THE DEFINED REQUIREMENT OF "FINANCIAL EXPERT." THE MAJORITY OF THE MEMBERS OF THE AUDIT COMMITTEE MAY NOT CONCURRENTLY SERVE ON THE FINANCE COMMITTEE. THE TREASURER AND CHAIR OF THE FINANCE COMMITTEE MAY NOT SERVE CONCURRENTLY ON THE AUDIT COMMITTEE, HOWEVER, THE TREASURER AND THE CHAIR OF THE FINANCE COMMITTEE MAY BE AN EX OFFICIO OF THE AUDIT COMMITTEE MEANING THAT HE OR SHE HAS A VOICE BUT NO VOTE.</p> <p><b>Other Committees.</b> In addition to the Standing Committees, other committees may be designated by resolution adopted by a majority of the Directors present at any meeting. Other Committees shall include, but not be limited to, the following Business Committees:</p> <ul style="list-style-type: none"> <li>a. A Chapter Relations Committee which shall recommend and monitor consistent, predictable and accountable Board policy in affiliate relations.</li> <li>b. A Development Committee which shall advise the Board on philanthropic giving to the Association and recommend fundraising policies.</li> <li>c. A Program Committee which shall recommend for Board consideration and approval policy issues related to market and needs assessment, programs and services, quality and standards and related matters.</li> <li>d. A Public Policy Committee which provides guidance to the Board on advocacy strategies, federal, state and local public policy issues including research funding, health care, long term care, and publicly funded care and support programs.</li> <li>e. A Diversity &amp; Inclusiveness Committee which shall help ensure that the Alzheimer's Association serves and reflects diverse communities, shall work with the National Board and other committees to foster diversity and inclusion with respect to the Association strategic plan and shall report on progress the Association and Board are making on achieving the Association's diversity and inclusiveness strategic goals.</li> </ul>

Identifier	Return Reference	Explanation
Form 990 Review Process	Form 990, Part VI, Line 11b	The Organization undergoes a thorough review process before filing the return. The audit committee discusses and reviews the form before it goes to the officers and full Board of Directors. All officers and the full Board of Directors are provided a copy for their review and have the opportunity to comment before the form is filed.

Identifier	Return Reference	Explanation
Conflict of Interest Policy Monitoring & Enforcement	Form 990, Part VI, Line 12c	<p>The Alzheimer's Association conflict of interest policy is described in article XIII, Section 2 of the organizational bylaws. The responsibility for disclosing any known or reasonably foreseen actual or potential conflicts of interest shall be upon the interested party whose interests are or may appear to be in conflict with the Association. All interested parties are required to file with the Association a disclosure statement prior to such individual commencing his or her service with the Association and thereafter shall file with the Association an updated disclosure statement as may be required from time to time by the Board of Directors or its Committee designee and in no event less often than annually. As cited from Article XVIII, Section 2 of the bylaws, interested persons or Chapters shall disclose any conflict and shall not vote on a matter and further shall retire from the room in which the Board of committee is meeting and shall not participate in any deliberation or decision regarding the matter under consideration. The minutes shall reflect that the conflict of interest was disclosed and the interested person or Chapter representative was not present during any discussion of the matter and did not vote on the matter in person or by proxy. When any such conflict of interest is relevant to a matter requiring action by the Board of Directors or any committee of the Board, the interested person or Chapter shall disclose such conflict to the Board of Directors or such committee and shall not vote on the matter. Further the interested person or representative from a Chapter having a conflict shall retire from the room in which the Board or the committee is meeting and shall not participate in any deliberation or decision regarding the matter under consideration. When there is a doubt as to whether a conflict of interest exists, the matter shall be resolved by a vote of the Board of Directors or the committee, as the case may be, excluding the interested person or representative from a chapter concerning whom the doubt has arisen. The Governance and Nominating Committee of the Board of Directors shall report to the Board of Directors from time to time on the implementation of these guidelines and the status of any policy developments regarding compensation and conflicts of interest. Further, the Governance and Nominating committee shall report to the Board as soon as reasonable after having been alerted to specific instances when these guidelines have not been followed or any other issue regarding compensation or conflict of interest is determined to exist. Copies of the Alzheimer's Association bylaws, including the conflict of interest policy, are provided to all Board of Directors no less than annually. Board Director disclosure statements are submitted no less than annually. Potential conflicts disclosed by Board Directors or candidates for election to the board are reviewed by the Governance and Nominating Committee, which reports no less than annually on its review to the full board. As documented in the meeting minutes, at the start of each meeting of the Board of Directors as well as each meeting of the executive committee, the agenda is reviewed and all Directors in attendance are reminded of the Conflict of Interest Policy and advised to disclose any potential conflicts should they exist or arise.</p>

Identifier	Return Reference	Explanation
Process for Determining Compensation	Form 990, Part VI, Line 15a & 15b	Compensation is established for the CEO by the Compensation Committee and the Executive Committee after a thorough salary/market review conducted by outside compensation consultants. For the CEO and for the senior management team this review was last done in 2011. Each year the Compensation Committee evaluates the CEO's performance through a robust assessment process which includes 360 feedback collection, interviews and performance evaluation comparing results to goals. The committee and chairman of the board use this data to determine incentive compensation eligibility. The senior staff has a comprehensive performance evaluation and compensation review done at the end of each fiscal year. This includes a self-assessment, 360 review and evaluation by the CEO. Salary is benchmarked every two years. For This year the salaries and total compensation packages of the senior staff were benchmarked by AonHewitt. Compensation is contemporaneously documented in the compensation committee minutes.

Identifier	Return Reference	Explanation
Governing Documents	FORM 990, Part VI, Section C, Line 19	Form 990 is made available to the general public by posting on our organization's website and upon request The organization's audited financial statements are made available to the general public by posting on our organization's website and upon request The organization's conflict of interest policy is available to the general public upon request

Identifier	Return Reference	Explanation
other change in net assets or fund balances	part xi, line 5	Unrealized Loss \$(1,099,120) CHANGE IN PERPETUAL TRUST (207,602) Change in split interest (580,738) Acquisition of dissolved chapters 481,427 Donated noncash contributions (310,643) Bad Debt (1,011,370) Miscellaneous Adjustment 5 TOTAL \$(2,728,040)



Identifier	Return Reference	Explanation
Schedule B	Form 990, Schedule B/Part IV, Line 2	The organization has checked "no" to Form 990, Part IV, Line 2 as it is required to complete Schedule B, but the organization qualifies for the special rule of meeting the 33 1/3% and is only required to report contributions greater than 2% of total contributions. There are no contributors that are required to be reported on Schedule B for this reporting period.

Identifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME HARRY JOHNS TITLE PRESIDENT & CEO HOURS

Identifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME RICHARD HOVLAND TITLE COO/CFO HOURS

Identifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME Robert Egge TITLE VP - Public Policy HOURS

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization  
Alzheimer's Disease & Related Disorders  
Association Inc

Employer identification number  
  
13-3039601

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) Alzheimer's Impact Movement (AIM)  225 North Michigan Ave Suite 1700  Chicago, IL 606017633 27-1961435	Soc Welfare	IL	501(c)(4)	N/A	Alz Assoc	Yes	

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V

Transactions With Related Organizations

(Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1 During 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 (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Sale of assets to related organization(s)

g Purchase of assets from related organization(s)

h Exchange of assets with related organization(s)

i Lease of facilities, equipment, or other assets to related organization(s)

j Lease of facilities, equipment, or other assets from related organization(s)

k Performance of services or membership or fundraising solicitations for related organization(s)

l Performance of services or membership or fundraising solicitations by related organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

n Sharing of paid employees with related organization(s)

o Reimbursement paid to related organization(s) for expenses

p Reimbursement paid by related organization(s) for expenses

q Other transfer of cash or property to related organization(s)

r Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

Yes

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

Yes

1n

Yes

1o

No

1p

No

1q

No

1r

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) Alzheimer's Impact Movement	b	589,830	FMV
(2) Alzheimer's Impact Movement	N	97,148	FMV
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2011

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.

[illegible]



Part VII

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
Amount Involved in Relationship	Schedule R, Part V, Line 2	Alzheimer's Association granted funds to Alzheimer's Impact Movement (AIM) for public policy division activities in fiscal year 2012 to support the leadership roles identified in the strategic plan of the Alzheimer's Association. This grant is restricted to the following 501(c)(3) activities and the ancillary activities necessary to accomplish the listed activities: Implementation of the national Alzheimer's Project Act. Recognizing this growing Alzheimer's crisis, Congress unanimously passed and President Obama signed into law the National Alzheimer's Project Act (NAPA), Increasing the commitment to Alzheimer's research, Expanding diagnosis and care planning.