

Return of Organization Exempt from Income Tax

2004

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

For the 2004 calendar year, or tax year beginning Jul 1, 2004, and ending Jun 30, 2005

Header section containing organization name (Alzheimer's Association), address (225 North Michigan Avenue, Chicago, IL), and identification numbers.

Section G (Web site), J (Organization type), K (Check here), L (Gross receipts), and H (Affiliates) information.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions)

Main table with columns for Revenue, Expenses, and Assets. Rows include contributions received, program service revenue, membership dues, interest, dividends, rents, special events, and total revenue/expenses.

- If you are filing for an **Additional (not automatic) 3-Month Extension, complete only Part II** and check this box, . . . . .  **X**
- Note:** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

**Part II Additional (not automatic) 3-Month Extension of Time - Must File Original and One Copy.**

Type or print  File by the extended due date for filing the return. See instructions.	Name of Exempt Organization <b>ALZHEIMER'S ASSOCIATION</b>	Employer identification number <b>13-3039601</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>275 NORTH MICHIGAN AVENUE, 17TH FLOOR</b>	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>CHICAGO, IL 60610-7633</b>	

Check type of return to be filed (File a separate application for each return):

- |  |  |                                    |
|--|--|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T(sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (trust other than above)     | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 1041-A                             | <input type="checkbox"/> Form 8870 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 4720                               |                                    |

**STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- The books are in the care of **MICHELLE D. HELTON**  
Telephone No. **312 335-5183** FAX No. \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box, . . . . .
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the **whole group**, check this box . If it is for **part of the group**, check this box  and attach a list with the names and EINs of all members the extension is for.

- I request an additional 3-month extension of time until 05/15/2006
- For calendar year \_\_\_\_\_, or other tax year beginning 07/01/2004 and ending 06/30/2005
- If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period
- State in detail why you need the extension \_\_\_\_\_

**ADDITIONAL TIME IS NEEDED TO COLLECT ALL THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.**

- If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions . . . . . \$ \_\_\_\_\_
- If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 . . . . . \$ \_\_\_\_\_
- Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions . . . . . \$ \_\_\_\_\_

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature *Barbara Helton* Title Manager Date 2/13/06

**Notice to Applicant - To Be Completed by the IRS**

- We **have** approved this application. Please attach this form to the organization's return.
- We **have not** approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
- We **have not** approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
- We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested.
- Other \_\_\_\_\_

Director \_\_\_\_\_ By: \_\_\_\_\_ Date \_\_\_\_\_

**Alternate Mailing Address** - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	Name <b>ERNST &amp; YOUNG LLP</b>
	Number and street (include suite, room, or apt. no.) or a P.O. box number <b>5451 LAKEVIEW PARKWAY SOUTH DRIVE</b>
	City or town, province or state, and country (including postal or ZIP code) <b>INDIANAPOLIS, IN 46268</b>

## Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
  - If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

**Part I Automatic 3-Month Extension of Time**—Only submit original (no copies needed)

**Form 990-T corporations** requesting an automatic 6-month extension—check this box and complete Part I only   
*All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.*

**Electronic Filing (e-file).** Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile).

<b>Type or print</b>  <small>File by the due date for filing your return. See instructions.</small>	Name of Exempt Organization <b>ALZHEIMER'S ASSOCIATION</b>	<b>Employer identification number</b> <b>13 : 3039601</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>275 NORTH MICHIGAN AVENUE, 17TH FLOOR</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>CHICAGO, IL 60610-7633</b>	

**Check type of return to be filed** (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

• The books are in the care of ▶ **MICHELLE D. HELTON**

Telephone No. ▶ ( **312** ) **335-5183**

FAX No. ▶ ( )

- If the organization does **not** have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the **whole** group, check this box  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

**1** I request an automatic 3-month (6-months for a **Form 990-T corporation**) extension of time until **February 15**, 20**06**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year 20... or  
 ▶  tax year beginning **July 01**, 20**04**, and ending **June 30**, 20**05**.

**2** If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

**3a** If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ 0

**b** If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ 0

**c Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ 0

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Cat. No. 27916D

Form **8868** (Rev. 12-2004)

003463222

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**Part II Statement of Functional Expenses** All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (att sch) (cash \$ 21,036,864. non-cash \$ ) . . . . .	22	21,036,864.	21,036,864.		
23 Specific assistance to individuals (att sch) . . . . .	23	0.	0.		
24 Benefits paid to or for members (att sch) . . . . .	24	0.	0.		
25 Compensation of officers, directors, etc . . . . .	25	589,494.	0.	589,494.	0.
26 Other salaries and wages . . . . .	26	13,730,366.	9,263,859.	-315,005.	4,781,512.
27 Pension plan contributions . . . . .	27	987,779.	656,571.	19,568.	311,640.
28 Other employee benefits . . . . .	28	1,151,210.	730,241.	21,289.	399,680.
29 Payroll taxes . . . . .	29	1,057,687.	674,882.	17,340.	365,465.
30 Professional fundraising fees . . . . .	30	167,110.	124.	4.	166,982.
31 Accounting fees . . . . .	31	161,313.	103,297.	19,521.	38,495.
32 Legal fees . . . . .	32	178,702.	57,294.	7,072.	114,336.
33 Supplies . . . . .	33	195,813.	121,960.	3,619.	70,234.
34 Telephone . . . . .	34	1,163,985.	1,065,742.	4,241.	94,002.
35 Postage and shipping . . . . .	35	7,458,578.	4,981,250.	8,544.	2,468,784.
36 Occupancy . . . . .	36	2,356,284.	1,638,670.	50,182.	667,432.
37 Equipment rental and maintenance . . . . .	37				
38 Printing and publications . . . . .	38	10,925,006.	7,843,225.	5,408.	3,076,373.
39 Travel . . . . .	39	1,973,921.	1,470,326.	21,098.	482,497.
40 Conferences, conventions, and meetings . . . . .	40	1,634,746.	1,384,476.	15,285.	234,985.
41 Interest . . . . .	41				
42 Depreciation, depletion, etc (attach schedule) . . . . .	42	1,340,541.	885,762.	77,698.	377,081.
43 Other expenses not covered above (itemize):					
a Miscellaneous . . . . .	43a	1,500,666.	1,337,114.	53,758.	109,794.
b Professional fees . . . . .	43b	5,869,212.	4,322,574.	34,854.	1,511,784.
c Recruitment fees . . . . .	43c	292,145.	196,091.	6,884.	89,170.
d Grants - Fundraising . . . . .	43d	10,000.	0.	0.	10,000.
e . . . . .	43e				
44 Total functional expenses (add lines 22 - 43). Organizations completing columns (B) - (D), carry these totals to lines 13 - 15 . . . . .	44	73,781,422.	57,770,322.	640,854.	15,370,246.

**Joint Costs.** Check  if you are following SOP 98-2.  
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If 'Yes,' enter (i) the aggregate amount of these joint costs \$ 12,034,185. ; (ii) the amount allocated to Program services \$ 7,427,653. ; (iii) the amount allocated to Management and general \$ 1,025,327. ; and (iv) the amount allocated to Fundraising \$ 3,581,205.

**Part III Statement of Program Service Accomplishments**

What is the organization's primary exempt purpose? <u>See Attachment</u> <small>All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) &amp; (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants &amp; allocations to others.)</small>	Program Service Expenses <small>(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)</small>
a <u>Research</u> (Grants and allocations \$ 19,258,367. )	24,551,524.
b <u>Public Awareness and Education</u> (Grants and allocations \$ 238,529. )	17,972,269.
c <u>Chapter Services</u> (Grants and allocations \$ 1,458,616. )	5,743,004.
d <u>Public Policy</u> (Grants and allocations \$ 91,000. )	2,845,182.
e <u>Other program services. . Patient and Family Services</u> (Grants and allocations \$ 351. )	6,658,343.
f <b>Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) . . . . .	57,770,322.

**Part IV Balance Sheets** (See Instructions)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)
		Beginning of year		End of year
<b>ASSETS</b>	<b>45</b> Cash -- non-interest-bearing . . . . .	7,972,801.	<b>45</b>	4,483,244.
	<b>46</b> Savings and temporary cash investments . . . . .	1,372,675.	<b>46</b>	350,850.
	<b>47 a</b> Accounts receivable . . . . .	<b>47 a</b> 5,501,287.		
	<b>b</b> Less: allowance for doubtful accounts . . . . .	<b>47 b</b> 568,065.	3,525,568.	<b>47 c</b> 4,933,222.
	<b>48 a</b> Pledges receivable . . . . .	<b>48 a</b> 39,411,140.		
	<b>b</b> Less: allowance for doubtful accounts . . . . .	<b>48 b</b> 2,572,076.	26,443,443.	<b>48 c</b> 36,839,064.
	<b>49</b> Grants receivable . . . . .		0.	<b>49</b> 0.
	<b>50</b> Receivables from officers, directors, trustees, and key employees (attach schedule) . . . . .		0.	<b>50</b> 0.
	<b>51 a</b> Other notes & loans receivable (attach sch) . . . . .	<b>51 a</b> 0.		
	<b>b</b> Less: allowance for doubtful accounts . . . . .	<b>51 b</b> 0.	0.	<b>51 c</b> 0.
	<b>52</b> Inventories for sale or use . . . . .		320,559.	<b>52</b> 337,294.
	<b>53</b> Prepaid expenses and deferred charges . . . . .		2,913,246.	<b>53</b> 1,602,979.
	<b>54</b> Investments -- securities (attach schedule) . . . . .	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	50,623,090.	<b>54</b> 56,724,408.
	<b>55 a</b> Investments -- land, buildings, & equipment: basis . . . . .	<b>55 a</b> 0.		
	<b>b</b> Less: accumulated depreciation (attach schedule) . . . . .	<b>55 b</b> 0.	0.	<b>55 c</b> 0.
<b>56</b> Investments -- other (attach schedule) . . . . .			<b>56</b>	
<b>57 a</b> Land, buildings, and equipment: basis . . . . .	<b>57 a</b> 10,748,068.			
<b>b</b> Less: accumulated depreciation (attach schedule) . . . . .	<b>57 b</b> 5,577,166.	5,453,670.	<b>57 c</b> 5,170,902.	
<b>58</b> Other assets (describe ▶ _____).			<b>58</b>	
<b>59 Total assets</b> (add lines 45 through 58) (must equal line 74) . . . . .		98,625,052.	<b>59</b> 110,441,963.	
<b>LIABILITIES</b>	<b>60</b> Accounts payable and accrued expenses . . . . .	10,448,324.	<b>60</b>	12,883,779.
	<b>61</b> Grants payable . . . . .	31,209,648.	<b>61</b>	34,781,065.
	<b>62</b> Deferred revenue . . . . .	2,337,531.	<b>62</b>	137,475.
	<b>63</b> Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .	0.	<b>63</b>	0.
	<b>64 a</b> Tax-exempt bond liabilities (attach schedule) . . . . .	0.	<b>64 a</b>	0.
	<b>b</b> Mortgages and other notes payable (attach schedule) . . . . .	0.	<b>64 b</b>	0.
	<b>65</b> Other liabilities (describe ▶ <u>Deferred Rent</u> ).	3,507,768.	<b>65</b>	3,334,160.
<b>66 Total liabilities</b> (add lines 60 through 65) . . . . .		47,503,271.	<b>66</b> 51,136,479.	
<b>NET ASSETS OR FUND BALANCES</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	<b>67</b> Unrestricted . . . . .	19,673,670.	<b>67</b>	24,838,831.
	<b>68</b> Temporarily restricted . . . . .	14,338,954.	<b>68</b>	17,086,355.
	<b>69</b> Permanently restricted . . . . .	17,109,157.	<b>69</b>	17,380,298.
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> and complete lines 70 through 74.			
	<b>70</b> Capital stock, trust principal, or current funds . . . . .		<b>70</b>	
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund . . . . .		<b>71</b>	
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>72</b>	
<b>73 Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21) . . . . .		51,121,781.	<b>73</b> 59,305,484.	
<b>74 Total liabilities and net assets/fund balances</b> (add lines 66 and 73) . . . . .		98,625,052.	<b>74</b> 110,441,963.	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

BAA

**Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return** (See instructions.)

<b>a</b>	Total revenue, gains, and other support per audited financial statements . . . . . ▶	<b>a</b>	82,867,529.
<b>b</b>	Amounts included on line <b>a</b> but not on line 12, Form 990:		
(1)	Net unrealized gains on investments . . . \$ 2,050,861.		
(2)	Donated services and use of facilities . . . \$ 397,977.		
(3)	Recoveries of prior year grants . . . . \$		
(4)	Other (specify): Cost of Sales \$ 504,427.		
	Add amounts on lines (1) through (4) . . . ▶	<b>b</b>	2,953,265.
<b>c</b>	Line <b>a</b> minus line <b>b</b> . . . . . ▶	<b>c</b>	79,914,264.
<b>d</b>	Amounts included on line 12, Form 990 but not on line <b>a</b> :		
(1)	Investment expenses not included on line 6b, Form 990 . . . \$		
(2)	Other (specify): ----- \$		
	Add amounts on lines (1) and (2) . . ▶	<b>d</b>	
<b>e</b>	Total revenue per line 12, Form 990 (line <b>c</b> plus line <b>d</b> ) . . . . . ▶	<b>e</b>	79,914,264.

**Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return**

<b>a</b>	Total expenses and losses per audited financial statements . . . . . ▶	<b>a</b>	74,683,826.
<b>b</b>	Amounts included on line <b>a</b> but not on line 17, Form 990:		
(1)	Donated services and use of facilities . . . . \$ 397,977.		
(2)	Prior year adjustments reported on line 20, Form 990 . . \$		
(3)	Losses reported on line 20, Form 990 . . \$		
(4)	Other (specify): Cost of Sales \$ 504,427.		
	Add amounts on lines (1) through (4) . . . ▶	<b>b</b>	902,404.
<b>c</b>	Line <b>a</b> minus line <b>b</b> . . . . . ▶	<b>c</b>	73,781,422.
<b>d</b>	Amounts included on line 17, Form 990 but not on line <b>a</b> :		
(1)	Investment expenses not included on line 6b, Form 990 . . . \$		
(2)	Other (specify): ----- \$		
	Add amounts on lines (1) and (2) . . ▶	<b>d</b>	
<b>e</b>	Total expenses per line 17, Form 990 (line <b>c</b> plus line <b>d</b> ) . . . . . ▶	<b>e</b>	73,781,422.

**Part V List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated; see instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
Sheldon Goldberg 222 W. Columbus Drive #3408, Chicago, IL 60601	President and CEO 7.5	440,927.	26,400.	0.
Gary Beiting 225 N. Michigan Avenue Chicago, IL 60601	Interim President; 17.5	148,567.	17,707.	0.
See List of Board of Directors See attachment for addresses	See attachment 10.0	0.	0.	0.
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75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? . . . . . ▶  Yes  No  
If 'Yes,' attach schedule — see instructions.

Part VI Other Information (See instructions.)

	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity		X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes		X
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement		X
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc. to any other exempt or nonexempt organization?		X
b If 'Yes,' enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81a Enter direct and indirect political expenditures See line 81 instructions <b>81a</b> 0.		
b Did the organization file Form 1120-POL for this year?		X
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	X	
b If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) <b>82b</b> 397,977.		
83a Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a Did the organization solicit any contributions or gifts that were not tax deductible?		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	N/A	
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	N/A	
c Dues, assessments, and similar amounts from members <b>85c</b> N/A		
d Section 162(e) lobbying and political expenditures <b>85d</b> N/A		
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices <b>85e</b> N/A		
f Taxable amount of lobbying and political expenditures (line 85d less 85e) <b>85f</b> N/A		
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? <b>85g</b> N/A		
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? <b>85h</b> N/A		
86 501(c)(7) organizations Enter: a Initiation fees and capital contributions included on line 12 <b>86a</b> N/A		
b Gross receipts, included on line 12, for public use of club facilities <b>86b</b> N/A		
87 501(c)(12) organizations Enter: a Gross income from members or shareholders <b>87a</b> N/A		
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) <b>87b</b> N/A		
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX		X
89a 501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under: section 4911 <u>0</u> ; section 4912 <u>0</u> ; section 4955 <u>0</u>		
b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction <b>89b</b> X		X
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <u>0</u>		
d Enter: Amount of tax on line 89c, above, reimbursed by the organization <u>0</u>		
90a List the states with which a copy of this return is filed <u>See Attachment</u>		
b Number of employees employed in the pay period that includes March 12, 2004 (See instructions) <b>90b</b> 220		
91 The books are in care of <u>Michelle D. Helton</u> Telephone number <u>(312) 335-5183</u> Located at <u>225 N. Michigan Avenue, Chicago IL</u> ZIP + 4 <u>60601-7633</u>		
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year. <u>92</u>		

Form 990 (2004) Alzheimer's Association

Part VII Analysis of Income-Producing Activities (See instructions.)

Note: Enter gross amounts unless otherwise indicated.

Table with 5 columns: (A) Business code, (B) Amount, (C) Exclusion code, (D) Amount, (E) Related or exempt function income. Rows include Program service revenue, membership dues, rental income, and other revenue.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See instructions.)

Table with 2 columns: Line No., Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See instructions.)

Table with 5 columns: (A) Name, address, and EIN of corporation, partnership, or disregarded entity; (B) Percentage of ownership interest; (C) Nature of activities; (D) Total income; (E) End-of-year assets.

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See instructions.)

a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?
b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

Please Sign Here
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.
Signature of preparer: [Signature]
Date: 3/1/06
Type or print name and title: Harry Johns, President and CEO

Paid Preparer's Use Only
Preparer's signature: [Signature]
Date: 3/1/06
Check if self-employed: [ ]
Preparer's SSN or PTIN: P00362066
Firm's name (or yours if self-employed), address, and ZIP + 4: ERNST & YOUNG-LLP, 5451 LAKEVIEW PARKWAY, S. DR., INDIANAPOLIS, IN 46268
EIN: 34-6565596
Phone no.: 317-280-3400

BAA

003628886

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

**Organization Exempt Under**  
**Section 501(c)(3)**  
**(Except Private Foundation) and Section 501(e), 501(f), 501(k),**  
**501(n), or Section 4947(a)(1) Nonexempt Charitable Trust**  
**Supplementary Information — (See separate instructions.)**

OMB No. 1545-0047

**2004**

Department of the Treasury  
Internal Revenue Service

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.**

Name of the organization <b>Alzheimer's Association</b>	Employer identification number <b>13-3039601</b>
--	---

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See instructions. List each one. If there are none, enter 'None.')

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
<u>Daniel Williams</u> 225 N. Michigan Avenue, Chicago, IL 60601	VP of Finance and Technology 7.5	202,368.	21,667.	13,890.
<u>Ronald Champagne</u> 225 N. Michigan Avenue, Chicago, IL 60601	VP of Development 7.5	204,584.	21,322.	6,352.
<u>Stephen McConnell</u> 225 N. Michigan Avenue, Chicago, IL 60601	VP of Public Policy and Prg 7.5	198,274.	21,544.	5,960.
<u>Kathy O'Brian</u> 225 N. Michigan Avenue, Chicago, IL 60601	VP of Program and Community Svcs 7.5	169,224.	18,557.	6,033.
<u>William Theis</u> 225 N. Michigan Avenue, Chicago, IL 60601	VP of Medical Science 7.5	168,570.	18,349.	9,445.
Total number of other employees paid over \$50,000 . . . . . ▶	107			

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See instructions. List each one (whether individuals or firms). If there are none, enter 'None.')

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
<u>Rapp Collins Worldwide</u> 437 Madison Avenue, New York, NY 10022	Consultant	10,263,800.
<u>Porter Novelli, Inc.</u> 1838 Solutions Center, Chicago, IL 60677	Consultant	3,588,718.
<u>Stage Right, Inc.</u> 13610 Boulton Blvd, Mettawa, IL 60045	Equipment Rental	330,182.
<u>Thompson Habib Denison</u> 754 Massachusetts Avenue, Arlington, MA 02476	Consultant	270,000.
<u>Kintera, Inc.</u> Dept. AT 952208, Suite 240, Atlanta, GA 31192	Consultant	253,913.
Total number of others receiving over \$50,000 for professional services . . . . . ▶	32	

**BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.**

Schedule A (Form 990 or 990-EZ) 2004

Part III Statements About Activities (See instructions.)

Table with 3 columns: Question, Yes, No. Contains questions 1 through 4b regarding lobbying activities, property transactions, grants, and credit counseling.

Part IV Reason for Non-Private Foundation Status (See instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)
11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
12 [X] 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 charitable, etc, 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). (Also complete the Support Schedule in Part IV-A.)
13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See instructions.)

Table with 2 columns: (a) Name(s) of supported organization(s), (b) Line number from above.

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Table with 6 columns: Calendar year (or fiscal year beginning in), (a) 2003, (b) 2002, (c) 2001, (d) 2000, (e) Total. Rows include: 15 Gifts, grants, and contributions received; 16 Membership fees received; 17 Gross receipts from admissions, merchandise sold or services performed; 18 Gross income from interest, dividends, amounts received from payments on securities loans; 19 Net income from unrelated business activities not included in line 18; 20 Tax revenues levied for the organization's benefit; 21 The value of services or facilities furnished to the organization by a governmental unit without charge; 22 Other income; 23 Total of lines 15 through 22; 24 Line 23 minus line 17; 25 Enter 1% of line 23.

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24; b Prepare a list for your records to show the name of and amount contributed by each person; c Total support for section 509(a)(1) test; d Add: Amounts from column (e) for lines 18, 19, 22, 26b; e Public support (line 26c minus line 26d total); f Public support percentage (line 26e (numerator) divided by line 26c (denominator)).

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.'; b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000.; c Add: Amounts from column (e) for lines 15, 16, 17, 20, 21; d Add: Line 27a total and line 27b total; e Public support (line 27c total minus line 27d total); f Total support for section 509(a)(2) test; g Public support percentage (line 27e (numerator) divided by line 27f (denominator)); h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)).

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

**Part V Private School Questionnaire** (See instructions.)  
 (To be completed ONLY by schools that checked the box on line 6 in Part IV)

		N/A	Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? . . . . .			
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? . . . . .			
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? . . . . . If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.) ----- ----- -----			
32	Does the organization maintain the following:			
	a Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . .	32 a		
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? . . . . .	32 b		
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? . . . . .	32 c		
	d Copies of all material used by the organization or on its behalf to solicit contributions? . . . . .  If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----	32 d		
33	Does the organization discriminate by race in any way with respect to:			
	a Students' rights or privileges? . . . . .	33 a		
	b Admissions policies? . . . . .	33 b		
	c Employment of faculty or administrative staff? . . . . .	33 c		
	d Scholarships or other financial assistance? . . . . .	33 d		
	e Educational policies? . . . . .	33 e		
	f Use of facilities? . . . . .	33 f		
	g Athletic programs? . . . . .	33 g		
	h Other extracurricular activities? . . . . .  If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----	33 h		
34 a	Does the organization receive any financial aid or assistance from a governmental agency? . . . . .	34 a		
	b Has the organization's right to such aid ever been revoked or suspended? . . . . . If you answered 'Yes' to either 34a or b, please explain using an attached statement.	34 b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation. . . . .	35		

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See instructions.)  
 (To be completed ONLY by an eligible organization that filed Form 5768)

Check  **a** if the organization belongs to an affiliated group. Check  **b** if you checked 'a' and 'limited control' provisions apply.

<b>Limits on Lobbying Expenditures</b>		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term 'expenditures' means amounts paid or incurred.)			
<b>36</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . .	<b>36</b>	5,000.
<b>37</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	<b>37</b>	509,800.
<b>38</b>	Total lobbying expenditures (add lines 36 and 37) . . . . .	<b>38</b>	514,800.
<b>39</b>	Other exempt purpose expenditures . . . . .	<b>39</b>	73,266,622.
<b>40</b>	Total exempt purpose expenditures (add lines 38 and 39). . . . .	<b>40</b>	73,781,422.
<b>41</b>	Lobbying nontaxable amount. Enter the amount from the following table — If the amount on line 40 is —                      The lobbying nontaxable amount is — Not over \$500,000 . . . . . 20% of the amount on line 40 . . . . . 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 . . . . .	<b>41</b>	1,000,000.
<b>42</b>	Grassroots nontaxable amount (enter 25% of line 41). . . . .	<b>42</b>	250,000.
<b>43</b>	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 . . . . .	<b>43</b>	0.
<b>44</b>	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 . . . . .	<b>44</b>	0.

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720.

**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 45 through 50.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
<b>45</b> Lobbying nontaxable amount . . . . .	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
<b>46</b> Lobbying ceiling amount (150% of line 45(e)) . . . . .					6,000,000.
<b>47</b> Total lobbying expenditures . . . . .	509,800.	509,800.	747,275.	730,040.	2,496,915.
<b>48</b> Grassroots non-taxable amount . . . . .	250,000.	250,000.	250,000.	250,000.	1,000,000.
<b>49</b> Grassroots ceiling amount (150% of line 48(e)) . . . . .					1,500,000.
<b>50</b> Grassroots lobbying expenditures . . . . .	5,000.	5,000.	5,000.	5,000.	20,000.

**Part VI-B Lobbying Activity by Nonelecting Public Charities** (See instructions.)  
 (For reporting only by organizations that did not complete Part VI-A)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

	Yes	No	Amount
<b>a</b> Volunteers . . . . .			
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines c through h.) . . . . .			
<b>c</b> Media advertisements . . . . .			
<b>d</b> Mailings to members, legislators, or the public . . . . .			
<b>e</b> Publications, or published or broadcast statements . . . . .			
<b>f</b> Grants to other organizations for lobbying purposes. . . . .			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body . . . . .			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means . . . . .			
<b>i</b> Total lobbying expenditures (add lines c through h.) . . . . .			

If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities.



**Schedule B**  
**(Form 990, 990-EZ,**  
**or 990-PF)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**  
**Supplementary Information for**  
**line 1 of Form 990, 990-EZ and 990-PF (see instructions)**

OMB No. 1545-0047

**2004**

Name of organization

Alzheimer's Association

Employer identification number

13-3039601

**Organization type** (check one):

**Filers of:**

Form 990 or 990-EZ

**Section:**

- 501(c)( 3 ) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule — see instructions.)

**General Rule —**

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

**Special Rules —**

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc. purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc. purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc. contributions of \$5,000 or more during the year.) . . . . . ▶ \$ \_\_\_\_\_

**Caution:** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

**BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, Form 990-EZ, and Form 990-PF.**

Schedule B (Form 990, 990-EZ, or 990-PF) (2004)

Alzheimer's Disease and Related Disorders Association, Inc.  
Form 990, Part I, Line 1d  
Total contributions, gifts, grants, and similar amounts received > than 2% of Line 1d  
FEIN # 13-3039601  
Year ended June 30, 2005

N/A

\_\_\_\_\_

0

Alzheimer's Disease and Related Disorders Association, Inc.  
 Form 990, Part I, Line 8d  
 Net gain on sale of assets other than inventory  
 FEIN # 13-3039601  
 Year ended June 30, 2005

	Unrestricted Mutual Funds	Restricted Mutual Funds	Endowment Mutual Funds	Treasury Notes	Stock Gifts	Fixed Asset Disposals	Total
Gross sales price	\$ 199,641	\$ -	\$ -	\$ 50,000	\$ -	\$ 12,740	\$ 262,381
Cost	188,043	0	0	50,546	0	22,970	261,559
Basis for sale	188,043	0	0	50,546	0	22,970	\$ 261,559
Sales expenses	0	0	0	0	0	0	0
Gain/(Loss) on sale	\$ 11,598	\$ -	\$ -	\$ (546)	\$ -	\$ (10,230)	\$ 822

Alzheimer's Disease and Related Disorders Association, Inc.  
 Form 990, Part I, Line 9  
 Special events and activities  
 FEIN # 13-3039601  
 Year ended June 30, 2005

	(A) New York Gala	(B) Chicago Gala	C DC Gala	(D) Memory Walk	Total
Gross Receipts	\$ 1,984,573	\$ 1,174,245	\$ 431,875	\$ 279,610	\$ 3,870,303
Less: Contributions	1,575,573	985,245	0	0	\$ 2,560,818
Gross Revenue	409,000	189,000	431,875	279,610	\$ 1,309,485
Less: Direct Expenses	420,731	251,081	250	549	\$ 672,611
	<u>\$ (11,731)</u>	<u>\$ (62,081)</u>	<u>\$ 431,625</u>	<u>\$ 279,061</u>	<u>\$ 636,874</u>

Description of Events:

Two Rita Hayworth Galas are held on an annual basis; one in New York and one in Chicago. The value listed on the ticket (\$500 for New York and \$250 for Chicago) includes dinner and entertainment. The value of the ticket varies based on the size of the contribution the attendees wish to make.

Alzheimer's Disease and Related Disorders Association, Inc.  
Form 990, Part I, Line 10 and Form 990, Part VII, Line 102  
Gross profit or (loss) from sales of inventory  
FEIN # 13-3039601  
Year ended June 30, 2005

**Sale of Educational Materials**

Gross sales		\$	490,670
Less:			
Beginning inventory	320,559		
Cost of materials purchased during the year	521,162		
Ending inventory	(337,294)		
Cost of goods sold			(504,427)
Gross profit			<u>          </u> <u>\$ (13,757)</u>

Alzheimer's Disease and Related Disorders Association, Inc.  
Form 990, Part I, Line 20  
Other changes in net assets or fund balances  
FEIN # 13-3039601  
Year ended June 30, 2005

Unrealized gains on investments carried at market value	\$ 2,050,860
	-----
Total - Other changes in net assets or fund balances	<u>\$ 2,050,860</u>

Alzheimer's Disease and Related Disorders Association, Inc.  
Form 990, Part II, Line 22  
Grants and allocations  
FEIN # 13-3039601  
Year ended June 30, 2005

Summary of Grants

Research	\$ 19,248,367
Public Awareness and Education	238,529
Chapter Services	1,458,616
Public Policy	91,000
Patient and Family Services	351
	<u>-----</u>
	<u>\$ 21,036,863</u>

\*\*\* See attached lists for Part III for detail.

Alzheimer's Disease and Related Disorders Association, Inc.  
 Form 990, Part II, Line 42  
 Depreciation schedule  
 FEIN # 13-3039601  
 Year ended June 30, 2005

<u>Fixed Asset Class</u>	<u>Method</u>	<u>Asset Life (Years)</u>	<u>FY04 Depreciation</u>
Leasehold Improvements	Straight Line	Lease period	\$ 181,119
Equipment	Straight Line	5	476,843
Furniture & Fixtures	Straight Line	5	208,499
Library Equipment	Straight Line	5	4,440
Software	Straight Line	3	461,571
Library Books	Straight Line	5	0
Joint Venture Furniture, Fixtures and Equipment	Straight Line	5	8,069
			\$ 1,340,541

Alzheimer's Disease and Related Disorders Association, Inc.  
Form 990, Part III  
Statement of program service accomplishments  
FEIN # 13-3039601  
Year ended June 30, 2005

OUR MISSION (Primary Exempt Purpose):

To provide leadership to eliminate Alzheimer's disease through the advancement of research while enhancing care and support services for individuals and their families. The Association's mission is carried out by:

- investigating the causes, preventions, treatments and cures for Alzheimer's disease and related disorders;
- offering programs and services to individuals and families affected by the disease;
- maintaining a nationwide network of chapters to provide family support in local communities;
- educating and informing public and public care professionals;
- and advocating for research funding and legislative support for families.

Alzheimer's Disease and Related Disorders Association, Inc.  
 Form 990, Part III  
 Research Grants  
 FEIN # 13-3039601  
 Year ended June 30, 2005

**Zenith Grants**

*Expense portion of grants that were paid, but approved in prior fiscal years*

University of Alabama	4,028
The Research Foundtion for Mental Hygiene, Inc.	4,019
Research Institute on Aging	4,035
LSU Health Science Center	6,797
Baylor College of Medicine	4,028

*Grants approved, payable over 2 years, 1st year will be paid in FY2005*

Uppsala University	242,545
Washington University in St. Louis	246,089
Columbia University	246,089
Mayo Clinic Jacksonville	246,089
Boston University	245,932
Flanders University	243,444
Cleveland Clinic Foundation	246,089
Indiana University	246,089
University of California - Irvine	246,089
Stanford University	245,307

**Temple Foundation Grants**

*Expense portion of grants that were paid, but approved in prior fiscal years*

Beth Israel Deaconess Medical	2,686
University of Massachusetts - Worcester	2,686
Children's Hospital Oakland	2,686
The Regents of the University of California	3,739
Trustees of the University of Illinois	2,686
Rhode Island Hospital	2,686
University of Iowa	2,686
Albert Einstein Healthcare Network	4,028
University of Washington	2,682
Weil Medical College of Cornell	2,686

**Pioneer Grants**

Brigham & Women's Hospital	29,876
Brigham & Women's Hospital	34,171
Oklahoma Medical Research Foundation	32,076
The General Hospital Corporation	41,581

Alzheimer's Disease and Related Disorders Association, Inc.  
Form 990, Part III  
Research Grants  
FEIN # 13-3039601  
Year ended June 30, 2005

**Hatfield Grants**

*Expense portion of grants that were paid, but approved in prior fiscal years*

The Trustees of Columbia	3,737
Emory University	2,693

**Other Research Grants**

*Expense portion of grants that were paid, but approved in prior fiscal years*

University of Massachusetts	3,530
Brigham & Women's Hospital	2,217
University of South Florida	3,510
Texas A&M University System	6,997
Brigham & Women's Hospital	3,547
Northwestern University	7,292
The Research Foundation for SUNY	6,935
Sun Health Research Institute	6,937
New York University School of Medicine	3,547
Texas Tech University Health	2,030
The Trustees of Columbia	7,402
The University of Chicago	6,353
The University of Chicago	6,938
University of Kentucky Research	5,721
University of South Florida Research	6,939
Bay Pines Foundation	6,935
Baylor College of Medicine	7,456
The Board of Trustees of the State of IL	6,907
Georgetown University	3,504
New York University School of Medicine	2,578
Northwestern University	6,937
The Research Foundation	7,225
Trustees of the University of PA	6,953
Emory University	6,938
The Institute of Molecular Medicine	2,637
The Trustees of Columbia	6,070
Albert Einstein Healthcare Network	2,578
Arizona State University	0
Hartford Hospital	6,619
The President and Fellows of Harvard	1,611
The Regents of the University of California	2,305
The Regents of the University of California	2,922
University of Arkansas for Medical Sciences	1,610
The University of Chicago	1,635
University of South Florida	6,590
University of Pittsburgh	1,287
Brown University	1,611

Alzheimer's Disease and Related Disorders Association, Inc.  
 Form 990, Part III  
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 Year ended June 30, 2005

Research Foundation of State	1,611
Trustees of Boston University	1,611
UT Southwestern Medical Center	1,611
Pacific Health Research Institute	2,578
University of Maryland	2,578
Weill Medical College of Cornell	3,547
The Burnham Institute	2,560
The Research Foundation	6,938
Cold Spring Harbor Laboratory	1,611
Cold Spring Harbor Laboratory	1,611
Northwestern University	6,916
The Regents of the University of California	1,607
The Regents of the University of California	7,267
Veterans Medical Research	1,606
Case Western Reserve University	6,938
Goteborg University	3,827
King's College London	6,938
The Regents of the University of California	932
University of Genova, DOBIG	6,938
Wayne State University	2,578
Brigham & Women's Hospital	9,114
Brigham & Women's Hospital	6,938
Case Western Reserve University	6,938
Indiana University	8,800
Minnesota Veterans Research Institute	2,608
Mount Saint Vincent University	3,214
North Shore - Long Island Jewish	2,493
The Regents of the University of California	2,026
The Trustees of Columbia	1,635
Yale University	4,511
Brown University	1,956
Emory University	2,578
The Regents of the University of California	3,547
Fundacion Innova	2,578
The Regents of the University of California	2,572
The Regents of the University of California	6,937
The Regents of the University of California	1,611
The Regents of the University of California	5,683
University of Missouri	2,833
The University of Chicago	1,887
The University of Chicago	7,143
University of Massachusetts	7,142
Vereinigtes Universitaetsvermoegen	6,883
Stanford University	19,274
University of South Florida	3,844
University of Genova, DOBIG	3,223
The Jackson Laboratory	1,629

Alzheimer's Disease and Related Disorders Association, Inc.  
 Form 990, Part III  
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 Year ended June 30, 2005

The University of South Florida	6,837
Karolinska Institutet, Neurotec	2,375
Western University	3,013
Duke University	701
The Regents of the University of California	182
Treasurer Virginia Tech	2,666
University of Conneticut	48,539
The University of British Columbia	2,331
Duke University	6,938
The Trustees of Columbia	2,577
UMDNJ - School of Osteopathic Medicine	2,578
The Research Foundation of SUNY	3,128
University of Wisconsin - Madison	6,938
Harvard Medical School	7,144
Trustees of Boston University	6,938
Trustees of Boston University	6,938
The Regents of the University of California	6,938
Case Western Reserve University	2,578
Washington University	2,576
Weill Medical College of Cornell	6,938
Stanford University	1,611
New York University School of Medicine	6,938
Seattle Institute for Biomedicine	1,807
Vradenburg Foundation	75,000
Foundation for the National ---	200,000
Alzheimer's Research Consortium	100,000
Khoulén	97,584
Kantarci	98,491

*Grants approved, payable over 2 or 3 years, 1st year paid in FY2005*

Oregon Health and Science University	195,952
Florida Institute of Technology	195,590
California State University - East Bay	192,507
Carnegie Mellon University	195,714
University of New Mexico	97,441
Medical University of South Carolina	98,436
Benjamin Rose Institute	98,454
Mayo Clinic Rochester	98,418
Rensselaer Polytechnic Institute	98,436
University of Southern California	98,349
University of California - Berkeley	98,436
University of Pennsylvania	98,398
Pine Rest Christian mental Health Services	98,084
University of Southern California	98,436
Stanford University	98,436

Alzheimer's Disease and Related Disorders Association, Inc.  
 Form 990, Part III  
 Research Grants  
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 Year ended June 30, 2005

University of Texas Medical Branch at Galveston	98,436
Mayo Clinic Jacksonville	98,434
Washington University St. Louis	98,436
Case Western Reserve University	98,436
New York University	98,436
Loyola University Medical Center	98,436
University of Chicago	98,437
University of Milan	98,123
University of Florida	98,477
University of Kentucky Research Foundation	98,312
Columbia University	98,075
Washington University St. Louis	95,601
Seattle Institute for Biomedical and Clinical Research	98,436
Northwestern University	98,418
Institute Pasteur	173,199
Research Foundation for Mental Hygiene, Inc.	232,482
The University of Alabama at Birmingham	232,635
University of Wisconsin - Madison	233,421
Brigham & Women's Hospital	232,569
University of Oklahoma, Health Sciences Center	232,569
Hebrew Rehabilitation Center for Aged	187,589
Hertie Institute for Clinical Brain Research	230,150
McGill University	230,312
Queens College - CUNY	232,606
LSU Health Sciences Center - New Orleans	232,568
Mather Life Ways Institute on Aging	232,648
The University of North Carolina at Charlotte	230,797
Standord University	232,203
Brigham & Women's Hospital	232,392
Brigham & Women's Hospital	232,361
Oregon Health and Science University	232,569
Johns Hopkins University, School of Medicine	232,425
University of California at Los Angeles	232,040
Duke University	232,201
Eastern Virginia Medical School	232,662
City College of New York	232,127
Mount Sinai School of Medicine	232,908
Indiana University	232,569
Vanderbilt University Medical Center	232,421
Columbia University Medical Center	232,467
The Ohio State University Research Foundation	232,569
UCLA David Geffen School of Medicine	234,016
Institute for Neurodegenerative Disorders	230,262
The University of Nroth Carolina at Chapel Hill	234,407
Erasmus MC	233,292
The Regents of California	232,393
Dalhousie University	230,243

Alzheimer's Disease and Related Disorders Association, Inc.  
Form 990, Part III  
Research Grants  
FEIN # 13-3039601  
Year ended June 30, 2005

University of Colorado	230,509
Columbia University Medical Center	232,569
Albert Einstein College of Medicine	232,569
Yale University	232,415
Mayo Clinic Rochester	233,336
The Ohio State University Research Foundation	232,379
The University of Tennessee	232,569
William Beaumont Hospital	97,036
Duke University	232,123
Baylor College of Medicine	232,569
University of California - San Diego Health Science	232,723
Mount Sinai School of Medicine	234,407
Johns Hopkins University, School of Medicine	232,569
Weill Medical College of Cornell University	234,053
The Burnham Institute	228,957
Yale University	229,196
Columbia University Medical Center	233,838
Baylor College of Medicine	232,494
The Hospital for Sick Children	232,569
UCLA School of Medicine	232,569
University of Nebraska Medical Center	232,569
Miscellaneous grant reclassifications and grants returned	(17,844)
	<u>\$ 19,258,367</u>

Alzheimer's Disease and Related Disorders Association, Inc.  
Form 990, Part III  
Public Awareness & Education Grants  
FEIN # 13-3039601  
Year ended June 30, 2005

Chapter grant - Education Conference	\$	-
Research grant - Education Conference		0
Chapter grants - Education programs		238,529
		-----
	\$	<u>238,529</u>

Alzheimer's Disease and Related Disorders Association, Inc.  
Form 990, Part III  
Chapter Services Grants  
FEIN # 13-3039601  
Year ended June 30, 2005

Chapter gift annuity grants	\$	-
Chapter support grants		1,458,616
		-----
	\$	<u>1,458,616</u>

Alzheimer's Disease and Related Disorders Association, Inc.

Form 990, Part III

Public Policy Grants

FEIN # 13-3039601

Year ended June 30, 2005

National Citizens Coalition	\$	-
Technical Assistance Grants		0
Long Term Care Education Fund		0
Public Policy Forum		91,000
Various Chapters		0
Other Association Grants		0
		-----
	\$	<u>91,000</u>

Alzheimer's Disease and Related Disorders Association, Inc.  
Form 990, Part III  
Patient and Family Services Grants  
FEIN # 13-3039601  
Year ended June 30, 2005

Chapter Grants - approved and paid during FY2005	\$	-
Safe Return Grants		0
Other Grants - approved and paid during FY2005		351
	\$	<u>351</u>

Alzheimer's Disease and Related Disorders Association, Inc.  
Form 990, Part IV, Line 54  
Investments - securities  
FEIN # 13-3039601  
Year ended June 30, 2005

**Investments - Recorded at end-of-year market value**

<u>Description</u>	<u>Balance</u> <u>06/30/05</u>
Bond funds	\$ 6,927,249
Stock funds	33,258,755
Commercial paper	16,432,688
Accrued income	105,716
	-----
	<u>\$ 56,724,408</u>

Alzheimer's Disease and Related Disorders Association, Inc.  
 Form 990, Part IV, Lines 57a & 57b  
 Land, buildings, and equipment: basis  
 Less: accumulated depreciation  
 FEIN # 13-3039601  
 Year ended June 30, 2005

Asset Description	Balance 06/30/03	Additions & (Write-offs)	Balance 06/30/04
Leasehold Improvements	\$ 2,676,355	\$ 9,880	\$ 2,686,235
Facility Study	\$ -	\$ -	\$ -
Equipment	3,311,266	442,377	3,753,643
Furniture & Fixtures	1,075,690	23,259	1,098,949
Library Equipment	102,250	12,705	114,955
Software	2,471,372	546,967	3,018,339
Library Books	75,947	0	75,947
Total Fixed Assets	\$ 9,712,880	\$ 1,035,188	\$ 10,748,068
Accumulated Depreciation	(4,259,210)	(1,317,956)	(5,577,166)
	<u>\$ 5,453,670</u>	<u>\$ (282,768)</u>	<u>\$ 5,170,902</u>

Alzheimer's Disease and Related Disorders Association, Inc.  
 Form 990, Part V  
 Key Employee  
 FEIN # 13-3039601  
 Year ended June 30, 2005

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Sheldon Goldberg 222 W. Columbus Drive Chicago, IL 60601	President and CEO 37.5 hours per week	440,927	26,400	0
Gary Beiting 225 North Michigan Avenue Chicago, IL 60601	Interim President & CEO 37.5 hours per week	148,567	17,707	0

Alzheimer's Disease and Related Disorders Association, Inc.  
Form 990, Part VI, Line 90a  
States with which a copy of the return is filed  
FEIN # 13-3039601  
Year ended June 30, 2005

**State Registrations / Filings for Solicitation of Charitable Contributions**

**List of States**

Alabama	New Hampshire
Arizona	New Jersey
Arkansas	New Mexico
California	New York
Colorado	North Carolina
Connecticut	North Dakota
Delaware	Ohio
District of Columbia	Oklahoma
Florida	Oregon
Georgia	Pennsylvania
Illinois	Rhode Island
Kansas	South Carolina
Kentucky	South Dakota
Louisiana	Tennessee
Maine	Utah
Maryland	Washington
Massachusetts	West Virginia
Michigan	Wisconsin
Minnesota	
Mississippi	

Alzheimer's Disease and Related Disorders Association, Inc.  
Form 990, Part VIII  
Relationship of activities to accomplishment of exempt purposes  
FEIN # 13-3039601  
Year ended June 30, 2005

Line 93d - Program service revenue: Safe Return Registration Fees

The Alzheimer's Association derives income from registration fees for the Safe Return program.

This is the Association's nationwide bracelet identity program, created for those with Alzheimer's who "wander" and may not be able to find their way home. As offering patient and family services to aid those affected by the disease is one of the exempt purposes of this organization, these fees do not constitute Unrelated Business income and therefore were not reported on Form 990-T.

Line 101 - Net income or (loss) from special events

The Alzheimer's Association derives income from the sale of tickets to the two annual Rita Hayworth galas.

Proceeds from these galas are used for research. Investigating the causes, preventions, treatments, and cures for the disease is one of the exempt purposes of this organization. Therefore, these sales do not constitute Unrelated Business income and were not reported on Form 990-T.

Line 102 - Gross profit or (loss) from sales of inventory

The Alzheimer's Association derives income from the sale of educational materials to local chapters of the organization and other interested parties.

These books provide information regarding Alzheimer's Disease; no advertising is contained in these volumes. As educating the public about Alzheimer's is one of the exempt purposes of this organization, these sales do not constitute Unrelated Business income in accordance with Reg. 1.513-1(d) 1 & 2 and therefore were not reported on Form 990-T.

Alzheimer's Disease and Related Disorders Association, Inc.  
Form 990, Schedule A, Part III, Line 3A  
Statement about grants  
FEIN # 13-3039601  
Year ended June 30, 2005

A Medical and Scientific Advisory Council composed of individuals knowledgeable in the field of Medical Research reviews all proposals from organizations interested in receiving grants, as it is the purpose of this organization to encourage new research into the causes of and cures for Alzheimer's Disease. Grants are approved only for direct research expenses related to the organization's exempt purposes which show potential for new discoveries.

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