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Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung  
benefit trust or private foundation)

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

OMB No 1545-0047

**2009****Open to Public  
Inspection****A** For the 2009 calendar year, or tax year beginning **07/01/09**, and ending **06/30/10****B** Check if applicable:

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☒ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

**C** Name of organization**Alumni Assoc of Univ of Michigan**

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

**200 Fletcher Street**

Room/suite

City or town, state or country, and ZIP + 4

**Ann Arbor****MI 48109-1007****F** Name and address of principal officer:**D** Employer identification number**23-7206591****E** Telephone number**G** Gross receipts \$ **12,554,974****H(a)** Is this a group return for

affiliates?

☐ Yes☒ No**H(b)** Are all affiliates included?☐ Yes☐ No

If "No," attach a list. (see instructions)

**I** Tax-exempt status. ☒ 501(c) ( **3** ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **www.umalumni.com****H(c)** Group exemption number ▶**K** Type of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation **1897** **M** State of legal domicile **MI****Part I Summary****1** Briefly describe the organization's mission or most significant activities:**See Statement 9****2** Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.**3** Number of voting members of the governing body (Part VI, line 1a)**3** **23****4** Number of independent voting members of the governing body (Part VI, line 1b)**4** **23****5** Total number of employees (Part V, line 2a)**5** **0****6** Total number of volunteers (estimate if necessary)**6** **2200****7a** Total gross unrelated business revenue from Part VIII, column (C), line 12**7a** **195,154****b** Net unrelated business taxable income from Form 990-T, line 34**7b** **-283,029****8** Contributions and grants (Part VIII, line 1h)

Prior Year

Current Year

**4,382,210****4,816,108****9** Program service revenue (Part VIII, line 2g)**4,472,435****4,165,061****10** Investment income (Part VIII, column (A), lines 3, 4, and 7d)**3,088,986****3,153,894****11** Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)**352,568****357,947****12** Total revenue -- add lines 8 through 11 (must equal Part VIII, column (A), line 12)**12,296,199****12,493,010****13** Grants and similar amounts paid (Part IX, column (A), lines 1-3)**704,932****839,725****14** Benefits paid to or for members (Part IX, column (A), line 4)**15** Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)**5,005,373****5,042,282****16a** Professional fundraising fees (Part IX, column (A), line 11e)**b** Total fundraising expenses (Part IX, column (D), line 25) ▶ **188,653****17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)**6,031,913****4,903,159****18** Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)**11,742,218****10,785,166****19** Revenue less expenses. Subtract line 18 from line 12**553,981****1,707,844****20** Total assets (Part X, line 16)

Beginning of Current Year

End of Year

**74,815,051****80,437,177****21** Total liabilities (Part X, line 26)**15,375,718****16,392,287****22** Net assets or fund balances. Subtract line 21 from line 20**59,439,333****64,044,890****Part II Signature Block****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. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Signature of officer

**Gerald J. Sigler****Senior VP/CFO**

Type or print name and title

Date

**6/3/11****Paid Preparer's Use Only**

Preparer's signature

Date

**06/03/11**Check if self-employed ☐

Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4

**Alumni Assoc. of U of Michigan****200 Fletcher St****Ann Arbor, MI 48109-1007**

EIN ▶

Phone

no. ▶

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

☐ Yes ☐ NoFor Privacy Act and Paperwork Reduction Act Notice, see the separate Instructions.  
DAAForm **990** (2009)

917-19-22

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**Part III Statement of Program Service Accomplishments****1** Briefly describe the organization's mission:**See Statement 9****2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

**4** Describe the exempt purpose achievements for each of the organization's three largest program services 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 \$ including grants of \$ ) (Revenue \$ )**See Statement 10****4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )**4d** Other program services. (Describe in Schedule O.)(Expenses \$ **10,180,068** including grants of \$ **839,725** ) (Revenue \$ )**4e** Total program service expenses ► **10,180,068**

**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	<b>X</b>	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	<b>X</b>	
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		<b>X</b>
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		<b>X</b>
5 <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		
6 Did the organization maintain any donor advised funds or any similar funds or accounts where 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		<b>X</b>
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		<b>X</b>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		<b>X</b>
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		<b>X</b>
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	<b>X</b>	
11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	<b>X</b>	
<ul style="list-style-type: none"> <li>Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.</li> <li>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.</li> <li>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.</li> <li>Did the organization report an amount for other assets related 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.</li> <li>Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.</li> <li>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? If "Yes," complete Schedule D, Part X.</li> </ul>		
12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	<b>X</b>	
12A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.	<b>X</b>	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<b>X</b>
14a Did the organization maintain an office, employees, or agents outside of the United States?		<b>X</b>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I		<b>X</b>
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		<b>X</b>
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		<b>X</b>
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		<b>X</b>
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	<b>X</b>	
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		<b>X</b>
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		<b>X</b>

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

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

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a	37
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	2
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X
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	2a	0
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	2b	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and 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	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	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	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
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	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
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	<b>Section 501(c)(7) organizations.</b> 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	<b>Section 501(c)(12) organizations.</b> 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	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

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

**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body	1a	23
b Enter the number of voting members that are independent	1b	23
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	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5	X
6 Does the organization have members or stockholders?	6	X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	X

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

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	X
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X
11a Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	X
13 Does the organization have a written whistleblower policy?	13	X
14 Does the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	X
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	X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken 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 ► **None**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
☐ Own website ☐ Another's website ☒ Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. ► **Gerald J. Sigler** **200 Fletcher Street**

**Ann Arbor****MI 48109-1007 734-764-0384**





**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
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>				
	<b>b</b> Membership dues	<b>1b</b>	<b>2,782,521</b>			
	<b>c</b> Fundraising events	<b>1c</b>	<b>869,399</b>			
	<b>d</b> Related organizations	<b>1d</b>				
	<b>e</b> Government grants (contributions)	<b>1e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	<b>1,164,188</b>			
	<b>g</b> Noncash contributions included in lines 1a-1f: \$					
<b>h Total. Add lines 1a-1f</b>			<b>4,816,108</b>			
<b>Program Service Revenue</b>	<b>2a</b> See Statement 5	<b>Busn. Code</b>	<b>3,778,271</b>	<b>3,778,271</b>		
	<b>b</b> Alumni Travel Program	<b>561520</b>	<b>195,154</b>		<b>195,154</b>	
	<b>c</b> See Statement 5		<b>191,636</b>	<b>191,636</b>		
	<b>d</b>					
	<b>e</b>					
	<b>f</b> All other program service revenue					
	<b>g Total. Add lines 2a-2f</b>		<b>4,165,061</b>			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		<b>3,153,894</b>			<b>3,153,894</b>
	<b>4</b> Income from investment of tax-exempt bond proceeds					
	<b>5</b> Royalties					
	<b>6a</b> Gross Rents	(i) Real (ii) Personal				
	<b>b</b> Less: rental exps					
	<b>c</b> Rental inc or (loss)					
	<b>d</b> Net rental income or (loss)					
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	<b>b</b> Less: cost or other basis & sales exps					
	<b>c</b> Gain or (loss)					
	<b>d</b> Net gain or (loss)					
	<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	<b>a</b>	<b>350,881</b>			
	<b>b</b> Less: direct expenses	<b>b</b>				
	<b>c</b> Net income or (loss) from fundraising events		<b>350,881</b>	<b>350,881</b>		
	<b>9a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>				
	<b>b</b> Less: direct expenses	<b>b</b>				
	<b>c</b> Net income or (loss) from gaming activities					
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>a</b>	<b>69,030</b>				
<b>b</b> Less: cost of goods sold	<b>b</b>	<b>61,964</b>				
<b>c</b> Net income or (loss) from sales of inventory		<b>7,066</b>	<b>7,066</b>			
<b>Miscellaneous Revenue</b>			<b>Busn. Code</b>			
<b>11a</b>						
<b>b</b>						
<b>c</b>						
<b>d</b> All other revenue						
<b>e Total. Add lines 11a-11d</b>						
<b>12 Total Revenue. See instructions.</b>			<b>12,493,010</b>	<b>4,327,854</b>	<b>195,154</b>	<b>3,153,894</b>

**Part IX Statement of Functional Expenses**

**Section 501(c)(3) and 501(c)(4) organizations must complete all columns.**  
**All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).**

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 U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	<b>839,725</b>	<b>839,725</b>		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	<b>267,917</b>	<b>147,354</b>	<b>107,167</b>	<b>13,396</b>
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	<b>3,487,786</b>	<b>3,387,933</b>	<b>17,833</b>	<b>82,020</b>
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	<b>966,497</b>	<b>884,229</b>	<b>59,447</b>	<b>22,821</b>
10 Payroll taxes	<b>320,082</b>	<b>292,144</b>	<b>19,947</b>	<b>7,991</b>
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	<b>117,862</b>	<b>106,010</b>	<b>9,447</b>	<b>2,405</b>
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion	<b>399,358</b>	<b>361,218</b>	<b>271</b>	<b>37,869</b>
13 Office expenses	<b>923,413</b>	<b>915,318</b>	<b>6,452</b>	<b>1,643</b>
14 Information technology	<b>188,994</b>	<b>168,130</b>	<b>16,631</b>	<b>4,233</b>
15 Royalties				
16 Occupancy				
17 Travel	<b>1,880,601</b>	<b>1,698,922</b>	<b>167,879</b>	<b>13,800</b>
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	<b>548,744</b>	<b>536,547</b>	<b>9,722</b>	<b>2,475</b>
23 Insurance	<b>10,762</b>	<b>9,880</b>	<b>882</b>	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <b>See Statement 4</b>	<b>833,425</b>	<b>832,658</b>	<b>767</b>	
b				
c				
d				
e				
f All other expenses				
<b>25 Total functional expenses. Add lines 1 through 24f</b>	<b>10,785,166</b>	<b>10,180,068</b>	<b>416,445</b>	<b>188,653</b>
<b>26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation</b>				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash—non-interest bearing .....	<b>386,019</b>	1	<b>392,523</b>
	2 Savings and temporary cash investments .....		2	
	3 Pledges and grants receivable, net .....	<b>228,848</b>	3	<b>442,859</b>
	4 Accounts receivable, net .....	<b>260,159</b>	4	<b>263,260</b>
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L .....		6	
	7 Notes and loans receivable, net .....		7	
	8 Inventories for sale or use .....	<b>611,848</b>	8	<b>586,854</b>
	9 Prepaid expenses and deferred charges .....	<b>1,650,289</b>	9	<b>1,646,795</b>
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a 16,513,959</b>		
	b Less: accumulated depreciation .....	<b>10b 7,768,846</b>		
	11 Investments—publicly traded securities .....	<b>6,097,472</b>	<b>10c 8,745,113</b>	
	12 Investments—other securities. See Part IV, line 11 .....	<b>65,580,416</b>	11	<b>68,359,773</b>
	13 Investments—program-related. See Part IV, line 11 .....		12	
	14 Intangible assets .....		13	
	15 Other assets. See Part IV, line 11 .....		14	
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	<b>74,815,051</b>	15	<b>80,437,177</b>	
<b>Liabilities</b>	17 Accounts payable and accrued expenses .....	<b>2,082,932</b>	16	<b>2,532,976</b>
	18 Grants payable .....		17	
	19 Deferred revenue .....		18	
	20 Tax-exempt bond liabilities .....		19	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D .....		20	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		21	
	23 Secured mortgages and notes payable to unrelated third parties .....		22	
	24 Unsecured notes and loans payable to unrelated third parties .....		23	
	25 Other liabilities. Complete Part X of Schedule D .....	<b>13,292,786</b>	24	<b>13,859,311</b>
	26 <b>Total liabilities.</b> Add lines 17 through 25 .....	<b>15,375,718</b>	25	<b>16,392,287</b>
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	27 Unrestricted net assets .....	<b>56,663,957</b>	26	<b>62,294,298</b>
	28 Temporarily restricted net assets .....	<b>1,024,784</b>	27	
	29 Permanently restricted net assets .....	<b>1,750,592</b>	28	<b>1,750,592</b>
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	30 Capital stock or trust principal, or current funds .....		29	
	31 Paid-in or capital surplus, or land, building, or equipment fund .....		30	
	32 Retained earnings, endowment, accumulated income, or other funds .....		31	
	33 <b>Total net assets or fund balances</b> .....	<b>59,439,333</b>	32	<b>64,044,890</b>
	34 <b>Total liabilities and net assets/fund balances</b> .....	<b>74,815,051</b>	33	<b>80,437,177</b>

**Part XI Financial Statements and Reporting**

**1** Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other \_\_\_\_\_

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

**2a** Were the organization's financial statements compiled or reviewed by an independent accountant? .....

**b** Were the organization's financial statements audited by an independent accountant? .....

**c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....

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

**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 consolidated basis, separate basis, or both:

☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

**3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....

**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	No
<b>2a</b>		<b>X</b>
<b>2b</b>	<b>X</b>	
<b>2c</b>	<b>X</b>	
<b>3a</b>		<b>X</b>
<b>3b</b>		

Form **990** (2009)



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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,264,109	3,589,174	4,176,943	4,382,210	6,283,831	21,696,267
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	328,388	324,884	322,892	359,361	405,063	1,740,588
4 <b>Total.</b> Add lines 1 through 3	3,592,497	3,914,058	4,499,835	4,741,571	6,688,894	23,436,855
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)						4,800,910
6 <b>Public support.</b> Subtract line 5 from line 4						18,635,945

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	3,592,497	3,914,058	4,499,835	4,741,571	6,688,894	23,436,855
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,540,262	2,762,548	3,057,291	3,088,986	3,153,894	14,602,981
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	827,957	809,404				1,637,361
11 <b>Total support.</b> Add lines 7 through 10						39,677,197
12 Gross receipts from related activities, etc. (see instructions)					12	10,027,643
13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> ▶ <input type="checkbox"/>						

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

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	46.97 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	48.46 %
16a <b>33 1/3 % support test—2009.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
b <b>33 1/3 % support test—2008.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a <b>10%-facts-and-circumstances test—2009.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b <b>10%-facts-and-circumstances test—2008.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6</b> <b>Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8</b> <b>Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13</b> <b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
<b>14</b> <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <span style="float: right;">► <input type="checkbox"/></span>						

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

<b>15</b> Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2008 Schedule A, Part III, line 15	<b>16</b>	%

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

<b>17</b> Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2008 Schedule A, Part III, line 17	<b>18</b>	%
<b>19a</b> <b>33 1/3 % support tests—2009.</b> 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 <span style="float: right;">► <input type="checkbox"/></span>		
<b>b</b> <b>33 1/3 % support tests—2008.</b> 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 <span style="float: right;">► <input type="checkbox"/></span>		
<b>20</b> <b>Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions <span style="float: right;">► <input type="checkbox"/></span>		

**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

**Part II, Line 10 - Other Income Detail**

\$ **1,637,361**

**Supplemental Information****Other Fundraising events**

THE ALUMNI ASSOCIATION OF  
THE UNIVERSITY OF MICHIGAN  
(23 - 7206591)

FOR THE YEAR ENDED JUNE 30, 2010

PART VIII, LINE 1 (f)  
ALL OTHER CONTRIBUTIONS

\$	5,000
	7,359
	15,000
	10,000
	9,381
	10,261
	5,000
	10,000
	12,500
	10,000
	10,000
	10,000
	5,000
	10,000
	7,500
	9,908
	150,000
	10,000
	10,000
	5,000
	5,025
	10,100
	10,000
	10,000
	10,000
	10,500
	5,000
	5,000
	10,000
	21,762
	350,000
	<u>22,000</u>
	791,296
	<u>372,892</u>
\$	1,164,188

**SCHEDULE D  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Supplemental Financial Statements**▶ Complete if the organization answered "Yes," to Form 990,  
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2009****Open to Public  
Inspection**

Name of the organization

Employer identification number

**Alumni Assoc of Univ of Michigan****23-7206591****Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or pleasure) ☐ Preservation of an historically important land area

☐ Protection of natural habitat ☐ Preservation of certified historic structure

☐ Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

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 section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, 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 acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

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

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

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

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

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if 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	59,995,924	80,604,478			
b Contributions	1,242,442	1,325,535			
c Net investment earnings, gains, and losses	3,606,452	-20,853,020			
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	64,136,079	59,995,924			

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ☒ 97.27 %  
 b Permanent endowment ☒ 2.73 %  
 c Term endowment ☐ \_\_\_\_\_ %

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

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		<input checked="" type="checkbox"/>
3a(ii)	<input checked="" type="checkbox"/>	
3b	<input checked="" type="checkbox"/>	

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

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

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

Description of investment	(a) Cost or other basis (Investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		316,742		316,742
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		16,197,217	7,768,846	8,428,371
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				<b>8,745,113</b>



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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	12,493,010
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	10,785,166
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	1,707,844
4	Net unrealized gains (losses) on investments	4	2,897,713
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	2,897,713
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	4,605,557

**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	15,390,723
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	2,897,713
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	2,897,713
3	Subtract line 2e from line 1	3	12,493,010
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	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	12,493,010

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

1	Total expenses and losses per audited financial statements	1	10,785,166
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	10,785,166
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	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	10,785,166

**Part XIV Supplemental Information**

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

**Part XIV - Supplemental Financial Information**

**Part V, Line 4 - Intended uses for the Endowment Funds are to support the activities of the Alumni Association and its Affiliate groups.**

<b>Part XIV</b>	<b>Supplemental Information (continued)</b>
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[illegible]



**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 <u>See Schedule 2</u> (event type)	(b) Event #2 <u>990PtVIII1c</u> (event type)	(c) Other events <u>None</u> (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	350,881	869,399		1,220,280
	2 Less: Charitable contributions		869,399		869,399
	3 Gross revenue (line 1 minus line 2)	350,881			350,881
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
	11 Net income summary. Combine line 3, column (d), and line 10				350,881

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

		Yes	No
9	Enter the state(s) in which the organization operates gaming activities:		
a	Is the organization licensed to operate gaming activities in each of these states?	9a	
b	If "No," Explain:		
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b	If "Yes," Explain:		
11	Does the organization operate gaming activities with nonmembers?	11	
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?	12	

**13** Indicate the percentage of gaming activity operated in:**a** The organization's facility .....**13a**

%

**b** An outside facility .....**13b**

%

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

Name ▶ .....

Address ▶ .....

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? .....**15a****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 of the third party:

Name ▶ .....

Address ▶ .....

**16** Gaming manager information:

Name ▶ .....

Gaming manager compensation ▶ \$ .....

Description of services provided ▶ .....

☐

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? .....**17a****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 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 Part IV and 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
<b>Scholarships</b>	<b>76</b>	<b>839,725</b>		<b>pv 4 years</b>	

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

**Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds**  
**Funds are transferred to the student's University of Michigan account and**  
**are applied against tuition and fees.**

**SCHEDULE J**  
**(Form 990)**Department of the Treasury  
Internal Revenue Service

Name of the organization

**Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees▶ Complete if the organization answered "Yes" to Form 990,  
Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2009**Open To Public  
Inspection**Alumni Assoc of Univ of Michigan**Employer identification number  
**23-7206591****Part I Questions Regarding Compensation****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.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**b** If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain**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?**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.

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee   | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study                               |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**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?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.****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?
- b** Any related organization?

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?
- b** Any related organization?

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**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**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2009



## 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.

[illegible]

**SCHEDULE O**  
(Form 990)Department of the Treasury  
Internal Revenue Service

Name of the organization

**Supplemental Information to Form 990**Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.

▶ Attach to Form 990.

OMB No. 1545-0047

**2009**Open to Public  
InspectionEmployer identification number  
**23-7206591****Alumni Assoc of Univ of Michigan****Amended Return Explanation**

Current year net assets did not tie to the balance sheet and correction of  
key employees.

**Form 990, Part VI, Line 2 - Related Party Information Among Officers****Gerald J. Sigler****Janice Sigler****Sr VP & CFO****VP Technolog****Family Relationship****Form 990, Part VI, Line 9 - Officers Who Cannot Be Reached****See attached****Form 990, Part VI, Line 10b - Policies and Procedures Governing Chapters****Yes****Form 990, Part VI, Line 11a - Organization's Process to Review Form 990**

The return preparer emails a copy of the final version of Form 990 to each  
board member before it is filed. A Review of the Form 990 is conducted by  
the Senior VP and CFO at a board meeting. The Senior VP and CFO responds  
to any questions from the board members regarding the Forms 990 and 990-T.

**Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy**

A. Each Director will review the Policy and will be asked to disclose any  
personal Business Relationship or Financial or Other Interest, or that of a  
Related Individual, that the Director knows could reasonably give rise to

Name of the organization

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an actual or potential conflict of interest with the Alumni Association.

Each Director shall acknowledge annually, by affixing his or her signature to the attached Certificate of Compliance, that he or she is acting in accordance with the letter and spirit of this Policy and has made all disclosures required under the terms of the Policy.

B. Notwithstanding A., each Director shall promptly disclose to the Chair of the Board ("Chair") any actual or potential conflict of which the Director becomes aware and which may arise between completions of a Certificate of Compliance from year to year. At such time, the Director shall complete an updated Certificate of Compliance and submit it.

C. At least once annually, the Chair and his or her fellow officers (collectively hereinafter, the "Officer(s)") of the Board will review all conflict disclosures with the President and Counsel, in order to ascertain the present and future effects of the disclosed conflicts. Per III.D, the Officers shall affirmatively act upon actual conflicts that are generated by pending or imminent contracts or other business transactions (collectively, "Transactions") with the Alumni Association. The Officers shall act on all other disclosed conflicts as they deem necessary and appropriate. Additionally, they will consider if any or all such disclosures should be referred to the Board, in Executive Session, for further review and action. The Officers shall keep minutes of their review of the conflicts and make those minutes available at the Alumni Association for review, but not copying or removal, by other Directors.

D. Procedures For Addressing Conflicts of Interest In Pending Transactions.

1. If the Alumni Association is considering a pending or imminent Transaction that involves a conflict of interest disclosed by a Director, the Officers shall work with the President and Counsel to investigate

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alternatives to the Transaction. They shall review appropriate comparable data and determine whether a more advantageous Transaction can be obtained with reasonable efforts by the Alumni Association.

If the Transaction in question arises from a conflict with any Officer, that Officer shall recuse him or herself; the most senior Officer remaining shall appoint a disinterested Director to replace the recused Officer in considering alternative Transactions.

2.If it is determined that a more advantageous Transaction cannot be obtained with reasonable efforts by the Alumni Association, then the Officers shall determine, with the approval of a majority of disinterested Directors in Executive Session,

-a. whether the Transaction is in the Alumni Association's best interest and for its own benefit,

-b. whether the Transaction is fair and reasonable to the Alumni Association, and

-c. whether to enter into the Transaction in conformity with such determination in a. and b. above.

3.The Officers shall keep minutes of their meeting. The minutes shall reflect the discussion of the conflict and Transaction, the nature of data reviewed, the record of votes taken, and any action the Officers agree to take on the conflict and Transaction. The Officers shall make those minutes available at the Alumni Association for review, but not copying or removal, by other Directors.

E.If two or more disinterested Directors disagree with the Officers' action taken on a particular conflict, they may request that the Board meet in Executive Session to review and reconsider the Officers' action and may request a vote to reverse the Officers' action. Reversal shall require

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the approval of a majority of disinterested Directors in Executive Session.

F.Any Director who has or may have a conflict of interest shall not participate or use any personal influence in the discussion of the matter involving the conflict and shall not make any recommendations regarding the matter. The Director shall formally recuse him or herself for the record and shall not be present when the matter is discussed and voted on.

G.Any Director, who is uncertain whether he or she has a conflict of interest or who desires assistance in interpreting this Policy, may seek advice from the Chair. If any Director perceives the existence of a potential or actual conflict of interest involving another Director, he or she shall immediately notify the Chair. If it is the Chair whom a Director suspects of a conflict of interest, that Director shall notify the next ranking Officer.

H.If, for purposes of subparagraph G, it is the Chair who is uncertain whether he or she has a potential conflict of interest, then he or she may seek advice from the other Officers.

I.All candidates for membership on the Board shall be advised of and acknowledge this Policy prior to the commencement of their service on the Board.

B.Disclosing, Evaluating, and Managing Potential Conflicts of Interest and Conflicts of Commitment

1. Identify and disclose potential conflicts of interest and conflicts of commitment

Whenever a potential conflict of interest or conflict of commitment exists for a staff member, he or she must promptly disclose it using the following guidelines:

a.The staff member must evaluate his/her conflict using the criteria below.

Name of the organization

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23-7206591

1. **Work for Pay:** Disclose the nature of the work and time commitment; do not need to disclose the specific employer unless it is a university unit or an AAUM business partner/vendor.

2. **Volunteering:** Need to disclose only if it is for a university unit or for a AAUM business partner/vendor

3. **Conflicts of commitment** can occur in many situations, whether you work for pay, are volunteering or are facing some significant situation in your personal life. The expectation is you will disclose this if/when it might impact your availability for work or your performance.

b. The staff member must discuss the conflict and his/her evaluation of it to his/her supervisor or the Human Resources Manager

c. If it is determined that a conflict of interest or a conflict of commitment may exist, the conflict must be disclosed in writing to the President and CEO of the Alumni Association (in the case of a potential conflict involving the President/CEO, he/she must disclose it, in writing, to the Chair of the Board of Directors of the Alumni Association). If it is determined that a conflict does not exist, no further disclosure is necessary, however the staff member should periodically re-evaluate as circumstances and relationships evolve.

2. **Evaluating disclosures of potential conflicts of interest or conflicts of commitment**

The President/CEO shall evaluate all disclosed potential conflicts of interest or conflicts of commitment. The President/CEO may require the staff member to provide additional information or documentation that may be relevant to evaluating the potential conflict of interest or conflict of commitment.

As needed, the President/CEO will consult with the Chair of the Board of

Name of the organization

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Directors of the Alumni Association and/or legal counsel.

3. Developing plans to manage potential conflicts of interest and conflicts of commitment

When the President/CEO has determined that a potential conflict of interest or conflict of commitment exists that must be managed or eliminated, he or she must develop, in consultation with the employee, a recommended plan for managing the potential conflict. The President/CEO will then provide the plan to the employee's supervisor, who has authority for approving it. The supervisor will provide the employee with a copy of the approved conflict management plan and will discuss any related ambiguities or issues that arise. Adherence to the plan will be monitored by the employee's supervisor.

Form 990, Part VI, Line 15a - Compensation Process for Top Official EXECUTIVE' s compensation shall be reviewed annually and may be subject to increase effective September 1 of each year after consideration by, and approval of, AAUM's Board of Directors.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation  
No documents available to the public

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# AAUM Board of Directors 2010-11

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**THE ALUMNI ASSOCIATION OF  
THE UNIVERSITY OF MICHIGAN  
(23 - 7206591)**

**FOR THE YEAR ENDED JUNE 30, 2010**

**LIST OF STATEMENTS ATTACHED**

<b>Statement 1</b>	<b>Part VIII, Line 1 (f) – All Other Contributions</b>
<b>Statement 2</b>	<b>Part VIII, Line 8 (a) - (c) - Fundraising Events</b>
<b>Statement 3</b>	<b>Part I, Line 22 - Other Changes in Fund Balance</b>
<b>Statement 4</b>	<b>Part IX, Line 24 - Other Expenses</b>
<b>Statement 5</b>	<b>Part VIII, Line 2 - Analysis of Income Producing Activities</b>
<b>Statement 6</b>	<b>Part X - Balance Sheet Detail</b>
<b>Statement 7</b>	<b>Part IV - Note Regarding Deferred Charges and Deferred Revenue</b>
<b>Statement 8</b>	<b>Schedule A, Part II, Section A Line 3 - Services Received from a Governmental Unit</b>
<b>Statement 9</b>	<b>Part III, Organization's Primary Exempt Purpose</b>
<b>Statement 10</b>	<b>Part III (A-D), Statement of Program Service Accomplishments</b>

STATEMENT 2

THE ALUMNI ASSOCIATION OF  
THE UNIVERSITY OF MICHIGAN  
(23 - 7206591)

FOR THE YEAR ENDED JUNE 30, 2010

PART VIII, LINES 8 (a) - (c)  
FUNDRAISING EVENTS

Gross Income

Sale of University of Michigan items

\$ 350,881

THE ALUMNI ASSOCIATION OF  
THE UNIVERSITY OF MICHIGAN  
(23 - 7206591)

FOR THE YEAR ENDED JUNE 30, 2010

PART I, LINE 22  
OTHER CHANGES IN FUND BALANCE

The other changes in fund balance consists of the following:

Funds received during the fiscal year for life memberships in The Alumni Association of The University of Michigan	\$ 708,739
--	------------

Funds received during the fiscal year for Alumni gifts and Bequests to The Alumni Association of The University of Michigan

Unrealized gain on investments recorded at market value	<u>2,897,713</u>
---	------------------

\$3,606,452

THE ALUMNI ASSOCIATION OF  
THE UNIVERSITY OF MICHIGAN  
(23 - 7206591)

FOR THE YEAR ENDED JUNE 30, 2010

PART IX, LINE 24  
OTHER EXPENSES

	<u>Total</u>	<u>Program Services</u>	<u>Management and General</u>	<u>Fundraising</u>
Scholarship	767		767	-
Bowl Tour	1,031	1,031	-	-
Utilities	439,401	439,401	-	-
Property Taxes	185,671	185,671	-	-
Rental of Horses	35,173	35,173	-	-
Miscellaneous	<u>171,382</u>	<u>171,382</u>	<u>-</u>	<u>-</u>
<b>TOTAL</b>	<b><u>\$ 833,425</u></b>	<b><u>\$ 832,658</u></b>	<b><u>\$ 767</u></b>	<b><u>\$ 0</u></b>

## STATEMENT 5

THE ALUMNI ASSOCIATION OF  
THE UNIVERSITY OF MICHIGAN  
(23 - 7206591)

FOR THE YEAR ENDED JUNE 30, 2010

PART VIII, LINE 2  
ANALYSIS OF INCOME PRODUCING ACTIVITIES

	<u>Unrelated Income</u>	<u>Related Income</u>
"Michigan Alumnus" Advertising	\$ 191,636	-
Program Fees	-	\$ 86,768
Alumni Travel Program	195,154	-
Insurance Surplus Refund	-	-
Program Sponsorship		40,800
No Bowl Tour	-	-
Credit Card Program	-	719,363
Horseback Riding Rentals	-	33,867
Michigania	-	2,753,471
Miscellaneous Alumni Programs	<u>-</u>	<u>144,002</u>
TOTAL	\$386,790	\$3,778,271

Memo - Part VIII Line 2 Program Service Revenue

Unrelated	\$ 195,154
Exempt	191,636
Related	<u>3,778,271</u>
	\$4,165,061

STATEMENT 5

THE ALUMNI ASSOCIATION OF  
THE UNIVERSITY OF MICHIGAN  
(23 - 7206591)

FOR THE YEAR ENDED JUNE 30, 2010

PART X  
BALANCE SHEET DETAIL

June 30, 2010

INVESTMENTS - SECURITIES, LINE 11

Equity in investment funds of	
The University of Michigan	<u>\$68,359,773</u>
Total Investments - Securities	<u>\$68,359,773</u>

LAND, BUILDINGS, AND EQUIPMENT,  
LINE 10 a-b

Michigania Property		11,911,748	
Equipment and office fixtures		<u>4,602,211</u>	
	Total	\$ 16,513,959	
Less: Accumulated Depreciation		<u>(7,768,846)</u>	
	Net	<u>\$ 8,745,113</u>	

OTHER LIABILITIES, LINE 25

Unearned memberships		\$ 2,250,000	
Deferred revenue		8,557,697	
Deferred revenue - Michigania see Statement 7		2,824,700	
Class and other deposits		<u>226,914</u>	
		<u>\$ 13,859,311</u>	

THE ALUMNI ASSOCIATION OF  
THE UNIVERSITY OF MICHIGAN  
(23 - 7206591)

FOR THE YEAR ENDED JUNE 30, 2010

PART IV  
NOTE REGARDING DEFERRED CHARGES AND DEFERRED REVENUE

The fiscal year of the Michigania Fund is from November 1, 2009 to October 31, 2010. Since the Alumni Association fiscal year ends on June 30, all expenditures related to the current Michigania season (i.e., incurred during the period from November 1, 2009 to June 30, 2010) are deferred until the Michigania fiscal year is completed. These payments are expensed in the following fiscal year. Deferred revenue also relates to the difference in fiscal years. All Michigania program fees received for the current fiscal year are deferred until the fiscal year is completed and are recognized as income in the following fiscal year of The Alumni Association.

THE ALUMNI ASSOCIATION OF  
THE UNIVERSITY OF MICHIGAN  
(23 - 7206591)

FOR THE YEAR ENDED JUNE 30, 2010

SCHEDULE A, PART II, SECTION A, LINE 3  
SERVICES RECEIVED FROM A GOVERNMENTAL UNIT

In consideration of a donation of funds for the construction of a facility, The University of Michigan has agreed to permit the Organization to occupy a portion of the facility on a rent-free basis and the University has also agreed to provide standard utilities without charge to the Organization.

	<u>Years beginning July 1,</u>					
	<u>2009</u>	<u>2008</u>	<u>2007</u>	<u>2006</u>	<u>2005</u>	<u>Total</u>
Rent	\$253,567	\$255,753	\$231,022	\$221,647	\$206,083	\$1,168,072
Utilities	<u>151,496</u>	<u>103,608</u>	<u>91,870</u>	<u>103,237</u>	<u>122,305</u>	<u>572,516</u>
Total	<u>\$405,063</u>	<u>\$359,361</u>	<u>\$322,892</u>	<u>\$324,884</u>	<u>\$328,388</u>	<u>\$1,740,588</u>

THE ALUMNI ASSOCIATION OF  
THE UNIVERSITY OF MICHIGAN  
(23 - 7206591)

FOR THE YEAR ENDED JUNE 30, 2010

PART III

ORGANIZATION'S PRIMARY EXEMPT PURPOSE

The Alumni Association of the University of Michigan is an independent, worldwide organization that nurtures lifelong relationships with and among current and future Michigan alumni. As a committed partner of the University, the Association offers programs of relevance and service to alumni and creates support for the University. Underlying all that we do is the belief in the value of education to the well being of society, a commitment to integrity, diversity, and service.

THE ALUMNI ASSOCIATION OF  
THE UNIVERSITY OF MICHIGAN  
(23 - 7206591)

FOR THE YEAR ENDED JUNE 30, 2010

PART III

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS (4A-D)

	Expense	Revenue
Coordination of a nationwide network of alumni volunteers who support the university by recruiting academically gifted students and raising funds for student scholarships.	\$ 2,304,801	\$ 892,301
Publications and electronic newsletters to keep alumni informed about current activities at U-M and highlighting the fundraising and other priorities of the University.	1,024,169	232,436
Membership benefits and services, including coordination and sponsorship of programming to enrich the lives of U-M alumni and students, including career networking and job search assistance, online networking, reunions and special events.	3,443,236	6,940,135
Programs that offer alumni (and their families) unique opportunities for alumni interchange and intellectual stimulation through seminars with U-M faculty in educational and social settings.	3,407,862	4,828,555
<b>Total</b>	<b>\$10,180,068</b>	<b>\$12,893,427</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).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and 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) and click on *e-file for Charities & Nonprofits*.

<b>Type or print</b>  File by the due date for filing your return. See instructions.	Name of Exempt Organization	Employer identification number	
	Alumni Association of The University of Michigan	23	7206591
	Number, street, and room or suite no. If a P.O. box, see instructions.		
	200 Fletcher Street		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
	Ann Arbor, Michigan 48109-1007		

**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 ► **Gerald J. Sigler**

Telephone No. ► ( 734 ) 763-5055 FAX No. ► ( 734 ) 763-6934

- 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 corporation required to file Form 990-T) extension of time until **February 15**, 20**11**, 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 1**, 20**09**, and ending **June 30**, 20**10** . . . . .

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

<b>3a</b> 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.	<b>3a</b>	\$	0
<b>b</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.	<b>3b</b>	\$	0
<b>c Balance Due.</b> 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.	<b>3c</b>	\$	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.

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **▶**

**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.** Only file the original (no copies needed).

<b>Type or print</b>  File by the extended due date for filing your return. See instructions	Name of exempt organization	Employer identification number
	Alumni Association of the University of Michigan	23-7206591
	Number, street, and room or suite no. If a P.O. box, see instructions.	
	200 Fletcher Street	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	Ann Arbor, MI 48109-1007	

Enter the Return code for the return that this application is for (file a separate application for each return)

**0 1**

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**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 **▶ Gerald J. Sigler**  
Telephone No. **▶ 734-763-5055** FAX No. **▶ 734-763-6934**
- 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.

- 4 I request an additional 3-month extension of time until **May 15**, 20 **11**.
- 5 For calendar year **2009**, or other tax year beginning **July 1**, 20 **09**, and ending **June 30**, 20 **10**.
- 6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return  
☐ Change in accounting period
- 7 State in detail why you need the extension **We are unable to accumulate the information necessary to accurately prepare and file our return on a timely basis.**

<b>8a</b> 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.	<b>8a</b>	\$
<b>b</b> 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.	<b>8b</b>	\$
<b>c Balance due.</b> Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>8c</b>	\$

**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 **▶**

*[Handwritten Signature]*

Title **▶** Sr. VP. & CFO

Date **▶**

*2/1/11*