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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

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31-2012

B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization ASSOCIATION OF THE GRADUATES OF THE UNITED STATES MILITARY ACADEMY		D Employer identification number 14-1260763		
	Doing Business As WEST POINT ASSOC OF GRADUATES				
	Number and street (or P O box if mail is not delivered to street address) BLDG 698 HERBERT HALL MILLS RD		Room/suite		
	City or town, state or country, and ZIP + 4 WEST POINT, NY 10996		E Telephone number (845) 446-1500		
			G Gross receipts \$ 176,240,037		
		F Name and address of principal officer ROBERT L MCCLURE BLDG 698 HERBERT HALL MILLS RD WEST POINT,NY 10996		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)	
				H(c) Group exemption number ▶	
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀(Insert no) ☐ 4947(a)(1) or ☐ 527					
J Website: ▶ WWW.WESTPOINTAOG.ORG					

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶	L Year of formation 1869	M State of legal domicile NY
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Part I

Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities FURTHERING THE IDEALS AND WELFARE OF THE USMA AND SUPPORTING AND SERVING ITS GRADUATES		
	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	16
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	14
	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	96
	6	Total number of volunteers (estimate if necessary)	6	114
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	121,054
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	-63,333
	Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year
9		Program service revenue (Part VIII, line 2g)	36,185,601	47,719,258
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,802,254	1,578,148
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	6,450,890	11,448,508
12		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,564,876	1,569,132
			46,003,621	62,315,046
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	12,789,286	17,629,425
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	6,426,414	6,639,637
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	251,809	501,854
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶6,184,300		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	4,257,584	4,721,613
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	23,725,093	29,492,529
	19	Revenue less expenses Subtract line 18 from line 12	22,278,528	32,822,517
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	245,694,257	288,926,254
	21	Total liabilities (Part X, line 26)	11,676,757	16,135,163
	22	Net assets or fund balances Subtract line 21 from line 20	234,017,500	272,791,091

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here	*****			2013-08-01	
	Signature of officer			Date	
Paid Preparer Use Only	CARL P MOCCIA VP/CFO				
	Type or print name and title				
	Prnt/Type preparer's name JULIUS GREEN CPA		Preparer's signature		Date
	Firm's name ▶ PARENTEBEARD LLC		Check ☐ if self-employed		PTIN P00350393
	Firm's address ▶ 1650 MARKET STREET SUITE 4500 PHILADELPHIA, PA 19103		Firm's EIN ▶ 23-2932984		Phone no (215) 972-0701

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

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization’s mission

THE ASSOCIATION IS AN ORGANIZATION DEDICATED TO FURTHERING THE IDEALS AND PROMOTING THE WELFARE OF THE UNITED STATES MILITARY ACADEMY AND SERVING ITS GRADUATES

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

☒

No

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

☒

No

If “Yes,” describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations 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 \$ 18,489,475 including grants of \$ 17,629,425) (Revenue \$)

FUND RAISING, EDUCATIONAL AND HISTORICAL PROVIDES THE STRUCTURE NECESSARY TO ENCOURAGE AND SECURE PRIVATE FINANCIAL SUPPORT FROM INDIVIDUALS, FOUNDATIONS AND CORPORATIONS FOR THE "MARGIN OF EXCELLENCE" THE MARGIN OF EXCELLENCE PROVIDES AN ARRAY OF DIVERSE OPPORTUNITIES THAT ADD RICHNESS TO THE CADET EXPERIENCE AND BETTER PREPARES THEM TO BE THE BROAD-MINDED, ETHICAL LEADERS UPON WHOM WE ALL DEPEND EDUCATIONAL AND HISTORICAL COMPRISES ACTIVITIES FOR THE DISSEMINATION OF INFORMATION ON THE HISTORY, OBJECTIVES AND METHODS OF THE UNITED STATES MILITARY ACADEMY TO INCLUDE THE ENCOURAGEMENT OF THE STUDY OF MILITARY SCIENCE AND LEADERSHIP AND TO ENHANCE THE IMAGE OF THE UNITED STATES MILITARY ACADEMY

4b

(Code) (Expenses \$ 2,778,209 including grants of \$) (Revenue \$ 2,135,404)

ALUMNI SERVICES ENCOMPASSES ACTIVITIES AND SERVICES PROVIDED FOR GRADUATES INCLUDING THE MAINTENANCE OF DETAILED BIOGRAPHICAL AND HISTORICAL RECORDS ON GRADUATES OF THE UNITED STATES MILITARY ACADEMY AND INCLUDES THE OPERATIONS OF THE GIFT SHOP

4c

(Code) (Expenses \$ 1,142,389 including grants of \$) (Revenue \$ 65,732)

PUBLICATIONS DISSEMINATES INFORMATION ON THE HISTORY, ACTIVITIES, OBJECTIVES AND METHODS OF THE UNITED STATES MILITARY ACADEMY THROUGH VARIOUS PUBLICATIONS

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses

22,410,073

Form 990 (2012)

Part IV

Checklist of Required Schedules

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

Part IV

Checklist of Required Schedules (continued)

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

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	50
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2a	96
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	Yes
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	No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b	
c	Enter the amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI

Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	16	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
1b	Enter the number of voting members included in line 1a, above, who are independent	14	
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	Yes
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	Yes
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	a The governing body?	8a	Yes
8b	b Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
10b	b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
12b	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
12c	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	a The organization's CEO, Executive Director, or top management official	15a	Yes
15b	b Other officers or key employees of the organization	15b	Yes
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
16b	b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	AL, AK, AZ, AR, CA, CO, DC, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☒ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	THE ORGANIZATION BUILDING 698 HERBERT HALL MILLS RD WEST POINT, NY (845) 446-1500

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

List all of the organization's **current** key employees, if any See instructions for definition of "key employee "

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

List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JODIE K GLORE CHAIRMAN	12 00 0 00	X						0	0	0
(2) HERMAN E BULLS VICE CHAIRMAN	12 00 0 00	X						0	0	0
(3) D DAVID HOSTLER DIRECTOR	7 00 0 00	X						0	0	0
(4) STANLEY J SHIPLEY DIRECTOR	7 00 0 00	X						0	0	0
(5) DARCY G ANDERSON DIRECTOR	7 00 0 00	X						0	0	0
(6) JOSEPH E DEFRANCISCO DIRECTOR	7 00 0 00	X						0	0	0
(7) GEORGE H GILMORE JR DIRECTOR	7 00 0 00	X						0	0	0
(8) LAWRENCE R ADAIR DIRECTOR	7 00 0 00	X						0	0	0
(9) ELLEN W HOULIHAN DIRECTOR	7 00 0 00	X						0	0	0
(10) LARRY R JORDAN DIRECTOR	7 00 0 00	X						0	0	0
(11) ROBERT D WEISS DIRECTOR	7 00 0 00	X						0	0	0
(12) FRANK B JANOSKI DIRECTOR	7 00 0 00	X						0	0	0
(13) REBECCA S HALSTEAD DIRECTOR	7 00 0 00	X						0	0	0
(14) JAMES Z WARTSKI DIRECTOR	7 00 0 00	X						0	0	0
(15) JOHN M ROBB DIRECTOR	7 00 0 00	X						0	0	0
(16) WILLIAM D ROGERS DIRECTOR	7 00 0 00	X						0	0	0
(17) ROBERT L MCCLURE PRESIDENT & CEO	40 00 0 00			X				278,603	0	18,118

Part VII

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) CARL MOCCIA VICE PRESIDENT & CFO	40 00 0 00			X				174,883	0	25,528
(19) JOHN CALABRO VICE PRESIDENT & COO	40 00 0 00			X				167,356	0	13,278
(20) JAMES JOHNSTON VICE PRESIDENT FOR ALUMNI SUPPORT	40 00 0 00			X				117,143	0	9,273
(21) KRISTIN SORENSON VICE PRESIDENT OF DEVELOPMENT	40 00 0 00				X			224,537	0	22,299
(22) WILLIS FREED LOWREY MAJOR GIFT OFFICER	40 00 0 00					X		125,900	0	9,667
(23) JOHN D SMITH CONTROLLER	40 00 0 00					X		124,360	0	5,029
(24) MICHAEL WHITE MAJOR GIFT OFFICER	40 00 0 00					X		111,244	0	11,457
(25) LISA BENITEZ SENIOR DIRECTOR OF DEVELOPMENT	40 00 0 00					X		107,533	0	7,892
(26) NORMA HEIM VICE PRESIDENT FOR COMM & MARKETING	40 00 0 00					X		102,842	0	10,958
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								1,534,401	0	133,499

2

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization▶10

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

Section B. Independent Contractors

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.		
	(A) Name and business address	(B) Description of services	(C) Compensation
	IRON SWORD ENTERPRISES LLC 84 OLD ROUTE 9W NEW WINDSOR NY 12553	ENGINEERING/CONSTRUCTION	1,092,246
	MARK B THOMPSON ASSOCIATES LLC 502 SOUTH 24TH ST PHILADELPHIA PA 19146	ARCHITECTURE	733,764
	ADVANTAGE PLUS CONSULTING PO BOX 746 WEST CALDWELL NJ 07006	PHONE-A-THON	547,252
	STEVE FELDMAN DESIGN LLC 4195 ST ELMO AVE SUITE 304 BETHESDA MD 20814	BUILDING DESIGN	281,357
	ELM PRESS 16 TREMCO DRIVE TERRYVILLE CT 06786	PRINTING/MAILING	264,370
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶19		

Part VIII

Statement of Revenue

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

				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	47,719,258			
	g	Noncash contributions included in lines 1a-1f \$		3,798,575			
	h	Total. Add lines 1a-1f			47,719,258		
Program Service Revenue	2a	ALUMNI SERVICES	Business Code				
			561520	615,545	585,865	29,680	
	b	ALUMNI EVENTS	900099	556,946	556,946		
	c	PUBLICATION SALES	511190	205,900	65,732	140,168	
	d	MISCELLANEOUS	900099	174,101	222,895	-48,794	
	e	SPONSORSHIPS	900099	25,656	25,656		
	f	All other program service revenue					
	g	Total. Add lines 2a-2f			1,578,148		
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		2,547,229			2,547,229
	4	Income from investment of tax-exempt bond proceeds . . .					
	5	Royalties		825,090			825,090
	6a	(i) Real					
		(ii) Personal					
	b						
	c						
	d	Net rental income or (loss)					
	7a	(i) Securities					
		(ii) Other					
	b						
	c						
d	Net gain or (loss)		8,901,279			8,901,279	
8a							
b							
c	Net income or (loss) from fundraising events . . .						
9a							
b							
c	Net income or (loss) from gaming activities . . .						
10a							
b							
c							
11a							
b							
c							
d							
e							
12							
11a							
b							
c							
d							
e							
12							

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).

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

☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	17,380,739	17,380,739		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	217,124	217,124		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	31,562	31,562		
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	1,051,019	326,827	238,678	485,514
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.	4,674,121	1,577,671	768,654	2,327,796
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	218,034	82,415	34,420	101,199
9	Other employee benefits.	251,115	91,858	41,052	118,205
10	Payroll taxes.	445,348	155,955	83,347	206,046
11	Fees for services (non-employees):				
a	Management.	10,312			10,312
b	Legal.	313,112	7,711	6,395	299,006
c	Accounting.	30,872	30,872		
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.	501,854			501,854
f	Investment management fees.	146,044		146,044	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	289,486	86,422	126,738	76,326
12	Advertising and promotion.	22,052	16,872	1,000	4,180
13	Office expenses.	869,433	361,564	177,252	330,617
14	Information technology.	420,374	101,152	218,346	100,876
15	Royalties.				
16	Occupancy.	78,264	22,780	55,484	
17	Travel.	64,693	29,615	34,850	228
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	841,154	640,612	70,355	130,187
20	Interest.				
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	278,362	19,722	258,640	
23	Insurance.	47,131		46,581	550
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O).				
a	REIMBURSABLE EXPENSE	805,949	794,802	11,147	
b	CULTIVATION	283,284	10,275	8,572	264,437
c	MANUFACTURING & DISTRIB	140,586	140,586		
d	STATE UBI TAX	250	250		
e	All other expenses	80,255	282,687	-1,429,399	1,226,967
25	Total functional expenses. Add lines 1 through 24e.	29,492,529	22,410,073	898,156	6,184,300
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			3,964,736	1	5,509,599
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			23,400,683	3	29,824,938
	4	Accounts receivable, net			49,508	4	27,130
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			294,553	8	358,475
	9	Prepaid expenses and deferred charges			91,641	9	295,021
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	10,076,542	5,567,917	10c	5,327,006
	b	Less accumulated depreciation	10b	4,749,536			
	11	Investments—publicly traded securities			165,495,994	11	191,059,436
	12	Investments—other securities See Part IV, line 11			23,069,454	12	28,896,088
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			23,759,771	15	27,628,561
16	Total assets. Add lines 1 through 15 (must equal line 34)			245,694,257	16	288,926,254	
Liabilities	17	Accounts payable and accrued expenses			988,393	17	1,361,396
	18	Grants payable			1,578,398	18	5,653,745
	19	Deferred revenue			3,153,028	19	3,212,953
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D				21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			5,956,938	25	5,907,069
	26	Total liabilities. Add lines 17 through 25			11,676,757	26	16,135,163
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			19,514,947	27	21,683,928
	28	Temporarily restricted net assets			114,883,900	28	138,776,107
	29	Permanently restricted net assets			99,618,653	29	112,331,056
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			234,017,500	33	272,791,091
	34	Total liabilities and net assets/fund balances			245,694,257	34	288,926,254

Part XI

Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	62,315,046
2	Total expenses (must equal Part IX, column (A), line 25)	2	29,492,529
3	Revenue less expenses Subtract line 2 from line 1	3	32,822,517
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	234,017,500
5	Net unrealized gains (losses) on investments	5	7,743,007
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-1,791,933
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	272,791,091

Part XII

Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2a	No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2b	Yes
2c	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	2c	Yes
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?	3a	No
3b	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	3b	

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization ASSOCIATION OF THE GRADUATES OF THE UNITED STATES MILITARY ACADEMY	Employer identification number 14-1260763
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Part I

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

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

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Non-functionally integrated
- e

☐

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

☐

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

☐

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

(i)

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

(ii)

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

(iii)

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

h

☐

Provide the following information about the supported organization(s)

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

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

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

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2012

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	23,505,955	22,217,988	34,749,738	36,185,601	47,719,258	164,378,540
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	23,505,955	22,217,988	34,749,738	36,185,601	47,719,258	164,378,540
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						6,858,815
6 Public support. Subtract line 5 from line 4						157,519,725

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	23,505,955	22,217,988	34,749,738	36,185,601	47,719,258	164,378,540
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,410,526	3,859,638	4,288,650	3,993,839	3,372,319	21,924,972
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support (Add lines 7 through 10)						186,303,512
12 Gross receipts from related activities, etc (see instructions)					12	15,113,434
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	84 550 %
15 Public support percentage for 2011 Schedule A, Part II, line 14	15	79 860 %
16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶		
b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶		

Part IIISupport Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

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

Facts And Circumstances Test

Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
ASSOCIATION OF THE GRADUATES OF THE
UNITED STATES MILITARY ACADEMY

Employer identification number

14-1260763

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? ☐ Yes ☐ 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? ☐ Yes ☐ No	

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

1

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

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

☐ Protection of natural habitat ☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

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

3

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

4

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

5

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

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

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

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

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

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

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b

Assets included in Form 990, Part X ▶ \$ _____

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

Cat No 52283D

Schedule D (Form 990) 2012

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 XIII
- 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 XIII and complete the following table

	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 XIII Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	122,298,344	144,817,084	121,695,482	101,170,198	136,756,995
b Contributions	6,248,646	6,321,338	11,274,580	3,203,089	5,182,955
c Net investment earnings, gains, and losses	12,894,906	-906,437	13,994,672	17,854,153	-36,378,104
d Grants or scholarships	1,210,278	766,179	2,168,076	1,087,312	2,908,960
e Other expenditures for facilities and programs	-3,466,451	27,164,962	-25,426	-561,704	1,473,944
f Administrative expenses	2,500	2,500	5,000	6,350	8,744
g End of year balance	143,695,569	122,298,344	144,817,084	121,695,482	101,170,198

- 2

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

a

Board designated or quasi-endowment

4 650 %

b

Permanent endowment

78 170 %

c

Temporarily restricted endowment

17 180 %

The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a

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

(i) unrelated organizations

3a(i)

☐ Yes

☐ No

(ii) related organizations

3a(ii)

☐ Yes

☐ No
- b

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

☐ Yes

☐ No

4

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

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		9,496,352	4,281,485	5,214,867
c Leasehold improvements				
d Equipment		267,415	253,641	13,774
e Other		312,775	214,410	98,365
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				5,327,006

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return						
1	Total revenue, gains, and other support per audited financial statements	1	70,745,420			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	2e	7,596,963			
a	Net unrealized gains on investments				2a	7,743,007
b	Donated services and use of facilities				2b	
c	Recoveries of prior year grants				2c	
d	Other (Describe in Part XIII)				2d	-146,044
e	Add lines 2a through 2d	2e	7,596,963			
3	Subtract line 2e from line 1	3	63,148,457			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	4c	-833,411			
a	Investment expenses not included on Form 990, Part VIII, line 7b				4a	
b	Other (Describe in Part XIII)				4b	-833,411
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	62,315,046			
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return						
1	Total expenses and losses per audited financial statements	1	31,971,829			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	2e	3,127,198			
a	Donated services and use of facilities				2a	
b	Prior year adjustments				2b	
c	Other losses				2c	
d	Other (Describe in Part XIII)				2d	3,127,198
e	Add lines 2a through 2d	2e	3,127,198			
3	Subtract line 2e from line 1	3	28,844,631			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :	4c	647,898			
a	Investment expenses not included on Form 990, Part VIII, line 7b				4a	
b	Other (Describe in Part XIII)				4b	647,898
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	29,492,529			

Part XIII 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, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE ENDOWMENTS ARE USED IN FURTHERING THE IDEALS AND PROMOTING THE WELFARE OF THE UNITED STATES MILITARY ACADEMY AND ITS GRADUATES. IN PREVIOUS YEARS, CERTAIN FUNDS WERE INCLUDED AS QUASI-ENDOWMENTS OF APPROXIMATELY \$30,654,568. AFTER RE-EXAMINING THE DONORS' INTENT, WE EXCLUDED THESE FROM THE ENDOWMENT FUND BALANCE. AN ADJUSTMENT WAS MADE TO RESTATE THE REPORTED FUND BALANCE IN 2011. PART V, LINE 1E THIS REPRESENTS TRANSFERS OF TEMPORARILY RESTRICTED GIFTS TO PERMANENTLY RESTRICTED ENDOWMENTS TO COMPLY WITH THE DONOR'S INTENT.
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	EFFECTIVE JANUARY 1, 2009, THE ASSOCIATION ADOPTED GUIDANCE ISSUED BY THE FASB REGARDING ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. THE INCOME TAX POSITIONS TAKEN BY THE ASSOCIATION FOR ANY YEARS OPEN UNDER THE VARIOUS STATUTES OF LIMITATIONS ARE THAT THE ASSOCIATION CONTINUES TO BE EXEMPT FROM INCOME TAXES AND THAT THE ASSOCIATION EARNS REVENUES FROM CERTAIN ACTIVITIES WHICH ARE CONSIDERED UNRELATED BUSINESS TAXABLE INCOME UNDER THE INTERNAL REVENUE CODE. IN BOTH 2012 AND 2011, HOWEVER, UNRELATED BUSINESS INCOME (NET OF APPLICABLE EXPENSES) RESULTED IN NO MATERIAL TAX EXPENSE. THE ADOPTION OF THIS GUIDANCE DID NOT IMPACT THE ASSOCIATION'S FINANCIAL POSITION OR RESULTS OF OPERATIONS. THE ASSOCIATION BELIEVES THAT THERE ARE NO OTHER TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD SIGNIFICANTLY INCREASE OR DECREASE UNRECOGNIZED TAX EXPENSES OR BENEFITS WITHIN 12 MONTHS OF THE REPORTING DATE. NONE OF THE ASSOCIATION'S FEDERAL OR STATE INCOME TAX RETURNS IS CURRENTLY UNDER EXAMINATION BY THE INTERNAL REVENUE SERVICE ("IRS") OR STATE AUTHORITIES. HOWEVER, FISCAL YEARS 2009 AND LATER REMAIN SUBJECT TO EXAMINATION BY THE IRS AND NEW YORK STATE.
PART XI, LINE 2D - OTHER ADJUSTMENTS		INVESTMENT EXPENSES NETTED WITH REVENUE ON FINANCIAL STATEMENTS -146,044
PART XI, LINE 4B - OTHER ADJUSTMENTS		COSTS OF GOODS SOLD -784,617. UBI LOSS FROM PARTNERSHIP INVESTMENTS NOT RECORDED ON BOOKS - 48,794
PART XII, LINE 2D - OTHER ADJUSTMENTS		COST OF GOODS SOLD 784,617. PROVISION FOR UNCOLLECTIBLE PLEDGES 2,342,581
PART XII, LINE 4B - OTHER ADJUSTMENTS		INVESTMENT EXPENSES NETTED WITH REVENUE ON FINANCIAL STATEMENTS 146,044. PHONOTHON EXPENSE NOT RECORDED ON BOOKS 501,854

For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Cat No 50082W** **Schedule F (Form 990) 2012**

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

[illegible]

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

3 Enter total number of other organizations or entities ►

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☒ Yes ☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*

☐ Yes ☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☒ Yes ☐ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☐ Yes ☒ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☐ Yes ☒ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*

☐ Yes ☒ No

Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

[illegible]

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization ASSOCIATION OF THE GRADUATES OF THE UNITED STATES MILITARY ACADEMY	Employer identification number 14-1260763
--	--

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

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

a ☒ Mail solicitations	e ☒ Solicitation of non-government grants
b ☐ Internet and email solicitations	f ☐ Solicitation of government grants
c ☒ Phone solicitations	g ☐ Special fundraising events
d ☒ In-person solicitations	
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☒ Yes ☐ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
ADVANTAGE (AFRC INC) 208 PASSAIC AVENUE FAIRFIELD, NJ 07004	PHONE & MAIL		No	1,310,873	501,854	809,019
Total ▶				1,310,873	501,854	809,019

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

AL, AK, AZ, CA, CO, DC, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col (c))
		(event type)	(event type)	(total number)	
Revenue	1	Gross receipts			
	2	Less Contributions . . .			
	3	Gross income (line 1 minus line 2)			
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 ▶			

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))
Direct Expenses	1	Gross revenue			
	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses . . .			
	6	Volunteer labor	☐ Yes ☐ No	☐ Yes ☐ No	
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶			

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

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a	
b An outside facility	13b	

14 Enter 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? ☐ Yes ☐ No

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

c If "Yes," enter name and address 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? ☐ Yes ☐ No

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

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation
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Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization
ASSOCIATION OF THE GRADUATES OF THE
UNITED STATES MILITARY ACADEMY

Employer identification number
14-1260763

Part I

General Information on Grants and Assistance

1

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

☒ Yes☐ No

2

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

Part II

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902		3,608,803	110,643	COST	EQUIPMENT/TRAVEL	CADET ACTIVITIES
(2) UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902			13,662	FMV	TECHNOLOGY/BOOKS	CADET ACTIVITIES
(3) UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902		1,510,838	45,725	FMV	MANUALS/DISPLAY	CADET EDUCATION
(4) UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902		4,066,819	2,500	COST	200 MEALS @ HV BB CLASSIC	CADET FACILITIES
(5) UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902			26,500	FMV	PISTOLS/SITE PREP	CADET FACILITIES
(6) UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902		360,206		COST		MEMORIAL PROJECTS
(7) UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902		7,510,646	53,390	COST	TRAVEL/TRAINING/EQUIPMENT	MISCELLANEOUS USMA ASSISTANCE
(8) UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902			27,781	FMV	USE OF PLANE	MISCELLANEOUS USMA ASSISTANCE
(9) UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902			27,476	FMV	IPADS/LAPTOPS	MISCELLANEOUS USMA ASSISTANCE
(10) UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902			15,750	FMV	PHOTO/EQUIPMENT	MISCELLANEOUS USMA ASSISTANCE

2

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

1

3

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

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIPS	43	217,124	0		

Part IV

Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE ASSOCIATION PROVIDES GRANTS TO THE UNITED STATES MILITARY ACADEMY ("USMA") SINCE THE USMA IS A FEDERAL GOVERNMENT INSTITUTION, THE ASSOCIATION RELIES ON USMA TO MONITOR THE USE OF THESE GRANT FUNDS CERTAIN SCHOLARSHIPS (PRIMARILY PREP SCHOOLS) ARE PROVIDED TO CAREFULLY SELECTED AND HIGHLY MOTIVATED YOUNG PEOPLE SEEKING ADMISSION TO USMA FURTHER, OTHER GRANTS ARE AWARDED TO CAPTAINS AND MAJORS IN THE REGULAR ARMY FOR ADVANCED EDUCATION, LANGUAGE SKILLS, AND CULTURAL IMMERSION NECESSARY FOR UNDERSTANDING AND COMBATING INTERNATIONAL TERRORISM

Software ID:

Software Version:

EIN: 14-1260763

Name: ASSOCIATION OF THE GRADUATES OF THE UNITED STATES MILITARY ACADEMY

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902		3,608,803	110,643	COST	EQUIPMENT/TRAVEL	CADET ACTIVITIES
UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902			13,662	FMV	TECHNOLOGY/BOOKS	CADET ACTIVITIES
UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902		1,510,838	45,725	FMV	MANUALS/DISPLAY	CADET EDUCATION
UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902		4,066,819	2,500	COST	200 MEALS @ HV BB CLASSIC	CADET FACILITIES
UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902			26,500	FMV	PISTOLS/SITE PREP	CADET FACILITIES
UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902		360,206		COST		MEMORIAL PROJECTS
UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902		7,510,646	53,390	COST	TRAVEL/TRAINING/EQUIPMENT	MISCELLANEOUS USMA ASSISTANCE
UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902			27,781	FMV	USE OF PLANE	MISCELLANEOUS USMA ASSISTANCE
UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902			27,476	FMV	IPADS/LAPTOPS	MISCELLANEOUS USMA ASSISTANCE
UNITED STATES MILITARY ACADEMY WEST POINT WEST POINT,NY 10996	14-1364902			15,750	FMV	PHOTO/EQUIPMENT	MISCELLANEOUS USMA ASSISTANCE

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2012

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization
ASSOCIATION OF THE GRADUATES OF THE UNITED STATES MILITARY ACADEMY

Employer identification number
14-1260763

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☒ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☒ Compensation committee ☒ Independent compensation consultant ☐ Form 990 of other organizations ☒ Written employment contract ☒ Compensation survey or study ☒ 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 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? b Any related organization? If "Yes," to line 5a or 5b, describe in Part III		No
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		No
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	Yes	
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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)ROBERT L MCCLURE PRESIDENT & CEO	(i)	228,603	50,000	0	17,250	868	296,721	0
	(ii)	0	0	0	0	0	0	0
(2)CARL MOCCIA VICE PRESIDENT & CFO	(i)	170,883	4,000	0	13,732	11,796	200,411	0
	(ii)	0	0	0	0	0	0	0
(3)JOHN CALABRO VICE PRESIDENT & COO	(i)	163,356	4,000	0	12,229	1,049	180,634	0
	(ii)	0	0	0	0	0	0	0
(4)KRISTIN SORENSON VICE PRESIDENT OF DEVELOPMENT	(i)	222,537	2,000	0	11,602	10,697	246,836	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	WPAOG PAYS SOCIAL CLUB MEMBERSHIP DUES FOR THE PRESIDENT & CEO TO ATTEND BUSINESS FUNCTIONS. WPAOG REQUIRES THE MEMBERSHIP SO THAT IT MAY USE THE CLUB'S FACILITIES FOR BUSINESS MEETINGS. THESE BENEFITS ARE NOT INCLUDED IN TAXABLE COMPENSATION SINCE THEY ARE BUSINESS RELATED.
	PART I, LINE 4B	THE ASSOCIATION HAS ARRANGEMENTS WITH ITS EXECUTIVE OFFICERS WHEREBY SPECIFIED AMOUNTS OF THEIR COMPENSATION ARE DEFERRED. THESE AMOUNTS ARE INVESTED ON BEHALF OF THE EXECUTIVES AND ARE PAYABLE UPON THEIR RETIREMENT. NO AMOUNTS WERE PAID OR VESTED TO THE OFFICERS DURING 2012.
	PART I, LINE 7	THE BOARD HAS THE AUTHORITY TO AWARD THE EXECUTIVE OFFICER WITH A BONUS WHICH IS DEPENDENT UPON PERFORMANCE. THE AMOUNT OF THE BONUS TO BE AWARDED IS DECIDED BY THE BOARD, ALTHOUGH THE AMOUNT CANNOT BE ABOVE A SPECIFIC THRESHOLD. THE EXECUTIVE OFFICER AWARDS NOMINAL BONUSES TO THE OTHER OFFICERS AND EMPLOYEES BASED UPON MERIT.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
ASSOCIATION OF THE GRADUATES OF THE UNITED STATES MILITARY ACADEMY

Employer identification number
14-1260763

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		34,425	FAIR VALUE
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	110	3,475,148	FAIR VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles	X	2	9,000	FAIR VALUE
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (TRAINING ITEMS)	X	9	155,853	ESTIMATED VALUE
26 Other ► (TRAVEL/ENTERTAINMENT)	X	4	10,680	ESTIMATED VALUE
27 Other ► (USE OF PLANE)	X	1	27,781	FAIR VALUE
28 Other ► (TECHNOLOGY)	X	12	85,688	FAIR VALUE

29

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

0

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

Yes

No

b

If "Yes," describe the arrangement in Part II

31

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

31

Yes

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

No

b

If "Yes," describe in Part II

33

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

Part II

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

Identifier	Return Reference	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTORS	PART I, COLUMN (B)	THE NUMBER OF CONTRIBUTIONS REPORTED IN PART I, COLUMN (B) IS BASED ON THE NUMBER OF DONORS PER CATEGORY OF GIFT

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization ASSOCIATION OF THE GRADUATES OF THE UNITED STATES MILITARY ACADEMY	Employer identification number 14-1260763
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Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 2	BOARD MEMBERS HERMAN E. BULLS AND DARCY G. ANDERSON HAVE A BUSINESS RELATIONSHIP

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	ALL LIVING GRADUATES OF THE UNITED STATES MILITARY ACADEMY IN GOOD STANDING QUALIFY AS MEMBERS OF THE ASSOCIATION THE MEMBERSHIP BODY PRESENTLY EXCEEDS 49,000 IN NUMBER

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	MEMBERS NOMINATE AND ELECT THE CHAIRMAN, VICE-CHAIRMAN AND THE DIRECTORS OF THE BOARD, ALL OF WHOM CONSTITUTE THE BOARD OF DIRECTORS OF THE ASSOCIATION, AS WELL AS RATIFYING BY-LAW CHANGES

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7B	APPROPRIATIONS FROM THE CORPUS OF THE ENDOWMENT REQUIRE APPROVAL OF THE MEMBERSHIP

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE ACCOUNTING STAFF PREPARES THE INITIAL SCHEDULES TO BE USED BY THE OUTSIDE CPA FIRM FOR PREPARATION OF THE RETURN. THE DRAFTS ARE THEN REVIEWED BY THE ACCOUNTING STAFF AND THE CFO BEFORE A "FINAL" DRAFT IS SENT TO THE AUDIT & COMPLIANCE COMMITTEE OF THE BOARD OF DIRECTORS. THIS COMMITTEE HOLDS A SEPARATE MEETING WITH THE CPA FIRM AND THE CFO TO REVIEW THE ENTIRE DOCUMENT. ONCE REVIEWED AND AGREED, THE FORM 990 IS SENT TO THE ENTIRE BOARD OF DIRECTORS FOR THEIR REVIEW AND APPROVAL. SUBSEQUENTLY, THE AUDIT COMMITTEE REPORTS THE REVIEW PROCESS TO THE FULL BOARD, NOTING ITS AGREEMENT WITH THE DOCUMENT AND ASKS IF THERE ARE ANY QUESTIONS PERTAINING TO THE DOCUMENT THAT WAS DISTRIBUTED TO EACH PERSON. A RESOLUTION IS THEN PASSED TO ACCEPT THE 990. FORM 990 IS FILED WITH THE IRS AFTER THIS PROCESS HAS TAKEN PLACE AND THE 990 HAS BEEN ACCEPTED BY THE BOARD.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THERE IS A WRITTEN CONFLICT OF INTEREST POLICY APPLICABLE TO ALL BOARD MEMBERS, VOLUNTEERS AND STAFF. THE POLICY DOCUMENTATION IS DISTRIBUTED ANNUALLY TO EACH PERSON, INCLUDING NEW HIRES UPON HIRING. INDIVIDUALS ARE REQUIRED TO RETURN AN ACKNOWLEDGEMENT OF THEIR ACCEPTANCE AND ADHERENCE PROMPTLY TO THE SECRETARY OF THE ORGANIZATION. SITUATIONS INVOLVING ANY POSSIBILITY OF CONFLICT ARE REVIEWED BY THE ETHICS COMMITTEE TO ENSURE THAT ANY RELATED ISSUES ARE PROPERLY DEALT WITH. ANYONE WITH A CONFLICT OF INTEREST MUST RECUSE THEMSELVES FROM PARTICIPATING IN DISCUSSIONS BY THE ETHICS COMMITTEE, AND BOARD OF DIRECTORS REGARDING THE MATTER, AS WELL AS FROM ANY RELATED VOTE.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	IN 2011 AND 2008, WEST POINT ASSOCIATION OF GRADUATES ("WPAOG") UTILIZED AN OUTSIDE HUMAN RESOURCES/COMPENSATION CONSULTANT TO REVIEW SALARIES AND PROVIDE FEEDBACK RELATING TO THEIR APPROPRIATENESS RELATIVE TO OUR PARTICULAR MARKET THIS CONSULTANT ALSO REVIEWED THE SALARIES OF THE PRESIDENT, VICE PRESIDENTS, OTHER OFFICERS AND MOST EMPLOYEES TO ENSURE THAT THEY WERE WITHIN LEVELS CONSISTENT WITH THE MARKET OUR COMPENSATION COMMITTEE ALSO REVIEWS THESE SALARIES TO ENSURE THAT THEY ARE REASONABLE AND IN-LINE WITH THE RELATED MARKET THE COMPENSATION COMMITTEE IS COMPRISED OF INDEPENDENT BOARD MEMBERS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	WPAOG'S FINANCIAL STATEMENTS (ANNUAL AUDIT REPORT) AND BY LAWS ARE AVAILABLE ON OUR WEBSITE FOR PUBLIC VIEWING, AND OUR CONFLICT OF INTEREST POLICY IS POSTED TO THE INTERNAL SECTION FOR EMPLOYEES ONLY THE CONFLICT OF INTEREST POLICY WOULD BE MADE AVAILABLE TO THE PUBLIC UPON REQUEST

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	UBI LOSS FROM PARTNERSHIP INVESTMENTS NOT RECORDED ON BOOKS 48,794 PROVISION FOR UNCOLLECTIBLE PLEDGES -2,342,581 PHONOTHON EXPENSE NOT RECORDED ON BOOKS 501,854

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
ASSOCIATION OF THE GRADUATES OF THE UNITED STATES MILITARY ACADEMY

Employer identification number
14-1260763

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) LGL REAL ESTATE FOUNDATION LLC BLDG 698 HERBERT HALL MILLS ROAD WEST POINT, NY 10996 13-4265639	REAL ESTATE HOLDING	NY	0	0	ASSOCIATION OF THE GRADUATES OF THE UNITED STATES MILITARY ACADEMY

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part III

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

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

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

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

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b

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

c

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

d

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

e

Loans or loan guarantees by related organization(s)

f

Dividends from related organization(s)

g

Sale of assets to related organization(s)

h

Purchase of assets from related organization(s)

i

Exchange of assets with related organization(s)

j

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

k

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

l

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

m

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

n

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

o

Sharing of paid employees with related organization(s)

p

Reimbursement paid to related organization(s) for expenses

q

Reimbursement paid by related organization(s) for expenses

r

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

s

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

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

1s

2

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

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Schedule R (Form 990) 2012

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

[illegible]

Part VII **Supplemental Information**

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

Identifier	Return Reference	Explanation
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Software ID:
Software Version:
EIN: 14-1260763
Name: ASSOCIATION OF THE GRADUATES OF THE
UNITED STATES MILITARY ACADEMY