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420739 12/19/2013 12 22 PM

Department of the Treasury

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

Open to Public

intern	al Revenue			il entrents	Inspection	
<u>A</u>	For the	2012 calendar year, or tax year beginning $07/01/12$, and ending $06/30$	/13		 	_
B (Check if app			D Emplo	yer identification number	
	Address cha	nge Alumni Assoc of Univ of Michigan		I		
\Box	Name chang	Doing Business As	.,		7206591	
\equiv	nıtıal return	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Teleph	one number	
\equiv		200 Fletcher Street	_L			_
<u></u>	Terminated	City, town or post office, state, and ZIP code				
	Amended re	um Ann Arbor MI 48109-1007		G Gross reco	eipts\$ 16,989,96	8
\square	Application i	F Name and address of principal officer	H(a) Is this a g	roup return for	affiliates? Yes X	No
					5. F.	
			H(b) Are all at		~	No
			If "No	o," attach a list	t (see instructions)	
	Tax-exemp		_			
<u>J</u>	Website [.]		H(c) Group ex			_
	Form of org		Year of formation 1	.897	M State of legal domicile M	<u> </u>
_P	art I	Summary				
		efly describe the organization's mission or most significant activities:				
e		See Schedule O				
an						
ern		_				
ò	2 C	eck this box ▶ ☐ if the organization discontinued its operations or disposed of more than	25% of its net as	sets		
∞ ∞	3 N	mber of voting members of the governing body (Part VI, line 1a)		3	20	
1014 Activities & Governance	4 N	mber of independent voting members of the governing body (Part VI, line 1b)		4	20	
iviti	5 To	tal number of individuals employed in calendar year 2012 (Part V, line 2a)		5	0	
Acti	6 To	tal number of volunteers (estimate if necessary)		6	2200	
4	7a To	tal unrelated business revenue from Part VIII, column (C), line-12		7a	594,06	7
01	b Ne	t unrelated business taxable income from Form 990-T, line 34.		7b	-97,12	4
			Prior Ye		Current Year	_
e	8 C	intributions and grants (Part VIII, line 1h)		5,411	5,095,57	
eur.		ogram service revenue (Part VIII, line 2g)		0,652	7,685,25	
AN 1 5		restment income (Part VIII, column (A), lines 3, 4, and 7d)		7,364	3,570,29	
ш	11 O	her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,665	565,45	
α	12 To	tal revenue – add lines 8 through 11 (must equal Part VIII-column (A); line (2)	16,12		16,916,57	
Expense ANNED	13 G	ants and similar amounts paid (Part IX, column (A), lines 1–3)	67	4,074	423,35	6
Ž	14 Be	nefits paid to or for members (Part IX, column (A), line 4)				0
es/		laries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	5,65	3,086	6,383,76	
SE	16 a Pr	ofessional fundraising fees (Part IX, column (A), line 11e)				0
, X		tal fundraising expenses (Part IX, column (D), line 25) ▶ 480,071				_
ш	17 Of	her expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		3,365	6,081,15	
	18 To	tal expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	11,71		12,888,27	
	19 R	venue less expenses Subtract line 18 from line 12		8,567	4,028,29	7
Net Assets or Fund Balances		tel consts (Post V. Los 40)	Beginning of Cu		End of Year	F
Ssel	20 To	tal assets (Part X, line 16)	93,22		98,226,97	
Ind	21 To	tal liabilities (Part X, line 26)	13,36 79,86		10,968,55	
		t assets or fund balances Subtract line 21 from line 20	13,80	3,740	87,258,41	<u>-</u>
	art II	Signature Block				
		ties of perjury, I declare that I have examined this return, including accompanying schedules and state, , and complete. Declaration of preparer (other than officer) is based on all information of which prepare			nowledge and belief, it is	
	10, 00,100				12/19/12	—
e:~	_	Signature of officer		Date	141413	—
Sig			or VP/CF			
He	re	Gerald J. Sigler Seni Type or print name and title	OL VP/CF	<u>, </u>		—
		Print/Type preparer's name Preparer's signature	Date	01:1	ıf PTIN	_
Paid	- 1	Tillut Type preparer's name Freparer's signature		Check	□"	
_	,,,,,	Alumni Aggog of II of Mighigan		/13 self-em	ipioyed	_
•	Only	Alumni Assoc. of U of Michigan		rm's EIN ▶	 	—
Jac	· 1	200 Fletcher St			734-615-312) <i>E</i>
<u> </u>		description of the return with the research was about 2 (see a test and a tes	<u></u>	Phone no		_
		discuss this return with the preparer shown above? (see instructions)		-	Yes N Form 990 (20	0
DAA	raperwo	k Reduction Act Notice, see the separate instructions			70 Form 990 (20	л2)

	Alumni Assoc of t		206591	Page 2
	Statement of Program Serv	ice Accomplishments a response to any question in this Par	+ 111	X
	cribe the organization's mission:	s a response to any question in this Fai	t III	
See Sch	edule O			
				
	anization undertake any significant 990 or 990-EZ?	program services during the year which were no	t listed on the	Yes X No
•	scribe these new services on Sche	dule O		163 ZZ NO
	anization cease conducting, or mak	e significant changes in how it conducts, any pro	ogram	
services?	scnbe these changes on Schedule	0		Yes X No
		ocomplishments for each of its three largest prog	gram services, as measured by	
expenses \$	Section 501(c)(3) and 501(c)(4) org	anizations are required to report the amount of g		
the total exp	penses, and revenue, if any, for each	ch program service reported		
4a (Code) (Expenses \$	including grants of \$) (Revenue \$)
See Sta	tement 10		, ,	,
4b (Code:) (Expenses \$	including grants of \$) (Revenue \$	
(0000.) (Exponess \$\psi\$	morating grante or \$) (November 4	,
4c (Code) (Expenses \$	unalluding grants of \$	\ (Payanya ¢	
4c (Code) (Expenses ϕ	including grants of \$) (Revenue \$,
<u> </u>				
4d Other progra (Expenses	am services (Describe in Schedule \$ 11,900,433 inclu	· · · · · · · · · · · · · · · · · · ·	Revenue \$,
		1,900,433	zevenne ø	,
DAA				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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	<u> </u>	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		77
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	ا ا		х
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
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		X
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	X	
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
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		Х
С	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		X
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	أبينا		v
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e	^	
'	the organization's separate of 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		X
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	- 111		- 21
Lu	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	120		
-	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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		X
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	1		
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
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		X
8	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	X	
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	.		v
.n -	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	\dashv	X
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 990 (2012) Alumni Assoc of Univ of Michigan 23-7206591 Part IV Checklist of Required Schedules (continued)

	officering of required contentions (bottemace)			
24	Dd the entered to the first 000 of the day o	\dashv	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States	- 1		<u> </u>
		22	x	
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	ļ		
		23	x	
24a				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
		24a		X
b		24b		
С				
		24c		
d	F	24d	İ	
25a	- · · · · · · · · · · · · · · · · · · ·		ĺ	
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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?	1		
	If "Yes," complete Schedule L, Part I	25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		_X_
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<u> </u>
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):		- 1	
а		28a		<u> </u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
		28b		<u> </u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			v
•		28c		$\frac{\mathbf{x}}{\mathbf{x}}$
29 ^^		29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			v
24		30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	l	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		
-	· · · · · · · · · · · · · · · · · · ·	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
-		33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
		34		X
35a		35a		<u>x</u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
		36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	\Box		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		<u> </u>
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		<u> </u>

Pa		Check if Schedule O contains a response to any question in this Part V					
		Oneon il 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	37			<u> </u>
b	Enter the	number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	3	╛		
c	Did the or	rganization comply with backup withholding rules for reportable payments to vendors and					
	reportable	e gaming (gambling) winnings to prize winners?			1c	X	ļ
2a	Enter the	number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statement	its, filed for the calendar year ending with or within the year covered by this return	_2a		_		
b		one is reported on line 2a, did the organization file all required federal employment tax retuined federal employment tax returned federal employment tax retuined federal employment tax returned federal employment tax retu			2b		ļ
		ne sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
3a		rganization have unrelated business gross income of \$1,000 or more during the year?			3a_	X	_
b		nas it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	X	
4a		ne during the calendar year, did the organization have an interest in, or a signature or other		ту			
		nancial account in a foreign country (such as a bank account, securities account, or other fin	anciai		4a		x
b	account)?	enter the name of the foreign country			40		
Б		uctions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial	Accou	nts			
5a		organization a party to a prohibited tax shelter transaction at any time during the tax year?	7,0000	110	5a		x
b		exable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?		5b		X
c	=	b line 5a or 5b, did the organization file Form 8886-T?			5c		
6a		organization have annual gross receipts that are normally greater than \$100,000, and did the	ie				
	organizati	ion solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," d	did the organization include with every solicitation an express statement that such contribution	ons or				
	gifts were	e not tax deductible?			6b		
7	Organiza	tions that may receive deductible contributions under section 170(c).					
а	Did the or	rganization receive a payment in excess of \$75 made partly as a contribution and partly for	goods				
		ces provided to the payor?			7a	<u> </u>	├
b		did the organization notify the donor of the value of the goods or services provided?			7b	<u> </u>	├ ──
C		rganization sell, exchange, or otherwise dispose of tangible personal property for which it was	as		1_		
	•	to file Form 8282?	1		7c	ļ	
d	· ·	ndicate the number of Forms 8282 filed during the year	7d	2		1	1
e		rganization receive any funds, directly or indirectly, to pay premiums on a personal benefit o		•	7e 7f		
f		rganization, during the year, pay premiums, directly or indirectly, on a personal benefit contr anization received a contribution of qualified intellectual property, did the organization file Fo		10 as required?	7g		<u> </u>
g h	=	anization received a contribution of qualified intellection property, did the organization file Fig.			79 7h		
8	_	ing organizations maintaining donor advised funds and section 509(a)(3) supporting	10011 111	3 4 7 51111 7 500 5	···		
•	•	tions. Did the supporting organization, or a donor advised fund maintained by a sponsoring					
	_	ion, have excess business holdings at any time during the year?			8		[
9	=	ing organizations maintaining donor advised funds.					
а	-	rganization make any taxable distributions under section 4966?			9a		
b	Did the or	rganization make a distribution to a donor, donor advisor, or related person?			9b_		
10	Section 5	501(c)(7) organizations. Enter					
а	Initiation for	fees and capital contributions included on Part VIII, line 12	10a		4		
b	Gross rec	ceipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		4		
11	Section 5	501(c)(12) organizations. Enter:	, ,				
а		come from members or shareholders	11a		4		
b		come from other sources (Do not net amounts due or paid to other sources					
	-	mounts due or received from them)	11b		┦		
12a		4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		,	12a	ļ	
ь 42		enter the amount of tax-exempt interest received or accrued during the year	12b		-		
13		501(c)(29) qualified nonprofit health insurance issuers.			12-	 	
а	_	anization licensed to issue qualified health plans in more than one state?			13a		
L		e the instructions for additional information the organization must report on Schedule O					
b		amount of reserves the organization is required to maintain by the states in which ization is licensed to issue qualified health plans	13b				
С	•	amount of reserves on hand	13c		1		
14a		rganization receive any payments for indoor tanning services during the tax year?	اعوب		14a	l	x
b		has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	e O		14b	1	
DAA	, 501_11		·			m 99	0 (2012)

Form 990 (2012) Alumni Assoc of Univ of Michigan 23-7206591 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. 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 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. 20 Enter the number of voting members included in line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 X 3 Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 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 Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a X Each committee with authority to act on behalf of the governing body? **8b** Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a 10a Did the organization have local chapters, branches, or affiliates? 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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X 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 X 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? X 13 13 X 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X 15a X Other officers or key employees of the organization 15b 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 X with a taxable entity during the year? 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ None 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X 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. ▶ Gerald J. Sigler 200 Fletcher Street

Ann Arbor

Form 990 (2012) Alumni	Assoc	of [Univ	of	Michiga	an 23-7206591	Page '
Part VII	Compensat	ion of Off	icers, l	Directo	rs,	Trustees, K	ey Employees, Highest Compensate	Employees, and
	Independen	it Contrac	tors					
	Check if Sch	nedule O c	ontains	a resp	ons	e to any que	estion 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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers, key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee (A) (F) Name and Title Average Position Reportable Reportable Estimated hours per (do not check more than one compensation compensation from amount of box, unless person is both an week from related other officer and a director/trustee) (list any the organizations compensation (W-2/1099-MISC) hours for organization from the related (W-2/1099-MISC) lighest compensated imployee stitutional trustee organization director organizations employee and related below dotted organizations line) (1) See attached list of Board Directors 0.00 0.00 X 0 0 0 (2) Steve C. Grafton 50.00 X President 0.00 315,500 0 50,669 (3) Gerald J. Sigler 50.00 Sr VP/CFO 0.00 X 0 215,633 43,541 (4) Barbara Scott 50.00 0.00 X 158,573 0 37,949 (5) David Schueler 50.00 X VP Program Delivery 0.00 0 119,043 34,047 (6) Mitch Rosenwasser 50.00 Camp Director 0.00 X 0 113,185 20,385 (7) (8) (9) (10)(11)DAA

Form 990 (2012)

Pa	rt VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)				
	(A) Name and title	(B) Average hours per week (list any hours for	ofi	x, unle ficer a	Pos check ess pe nd a d	rson i irecto	than o	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	co	(F) Estima amoun othe mpens from t	ted t of r ation	
		related organizations below dotted line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		8	rganiza and rela rganiza	ated	
(12)														
(13)														
(14)	-													
(15)														
(16)														
(17)														-
(18)														
(19)		-												
1b c	Sub-total Total from continuation she	ets to Part VII.	Sect	ion .	Α	J		>	921,934			1	86,	591
<u>d</u>	Total (add lines 1b and 1c)							<u> </u>	921,934	·		1	86,	591
2	Total number of individuals (in reportable compensation from	the organization	imite n ▶	7	tnos	e iis	itea a	NOGE	/e) who received more than				V	N.
3	Did the organization list any for								loyee, or highest compensa	ated		2	Yes	No X
4	employee on line 1a? If "Yes, For any individual listed on lin organization and related organ	e 1a, is the sum	of re	eport	able	com	pen:	satio				4	x	
5	individual Did any person listed on line of the services rendered to the office of th									r ındıvıdual		5		x
	cion B. Independent Contractor Complete this table for your fi				ındo	2000	lont :	oont	reators that recoved more	than \$100,000 of	_			
1	compensation from the organ	ization Report of	omp	ensa	ation	for t	he c	alen	dar year ending with or with	nin the organization's tax y	<u>rear</u>		(C) empensa	
	Name and	(A) d business address	_					<u> </u>	Descrip	(B) otion of services			mperisa:	tion
								\vdash					-	
								\vdash						
								-						
											\longrightarrow			
	Total number of independent								se listed above) who					
	received more than \$100,000	of compensation	n fro	m th	e org	aniz	ation	<u> </u>			L		<u>99</u> () (201)

Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII. (D) Revenue excluded from tax (C) Unrelated (A) Total revenue exempt function business revenue under sections 512, 513, or 514 revenue 1a Federated campaigns 1a 3,559,441 1b b Membership dues 809,596 c Fundraising events 1c 1d d Related organizations 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 726,534 Noncash contributions included in lines 1a-1f 5,095,571 h Total. Add lines 1a-1f Program Service Revenue Busn Code 7,091,185 7,091,185 2a See Statement 5-Related 561520 391,845 391,845 b Alumni Travel Program 202,222 202,222 See Statement 5-Exempt f All other program service revenue 7,685,252 ▶ g Total. Add lines 2a-2f Investment income (including dividends, interest, 204,351 3,365,946 3,570,297 and other similar amounts) Income from investment of tax-exempt bond proceeds ▶ Rovalties (ı) Real (ii) Personal 6a Gross rents **b** Less rental exps c Rental inc or (loss) \blacktriangleright Net rental income or (loss) 7a Gross amount from (i) Securities (II) Other sales of assets other than inventor **b** Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) 549,814 See Part IV. line 18 **b** Less direct expenses 549,814 c Net income or (loss) from fundraising events \blacktriangleright 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less 89,034 returns and allowances 73,394 b b Less: cost of goods sold 15,640 15,640 ▶ c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a b d All other revenue Total. Add lines 11a-11d 3,365,946 594,067 16,916,574 7,311,176 Total revenue. See instructions

Statement of Functional Expenses

	on 501(c)(3) and 501(c)(4) organizations must con Check if Schedule O contains a respon	mplete all columns Ali oth		olete column (A)	П
	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and			3	
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				····
	the U.S See Part IV, line 22	423,356	423,356		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	315,500	173,525	126,200	15,775
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	4 000 000	4 105 004	000	016 402
7	Other salaries and wages	4,320,307	4,105,084	800	216,423
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	1 251 604	1 020 027	78,214	10 612
9	Other employee benefits	1,351,694	1,232,837	22,779	40,643 12,039
10	Payroll taxes	396,263	361,445	22,119	12,039
11	Fees for services (non-employees):				
a	Management				
	Legal	127,344	114,296	8,401	2,647
	Accounting	12//311	114,290	0,101	2,017
	Lobbying Professional fundraising services See Part IV, line 17				
e f	Investment management fees				
g					
9	(A) amount, list line 11g expenses on Schedule O)	1			
12	Advertising and promotion	498,173	416,685	498	81,990
13	Office expenses	694,073	685,854	5,552	1,667
14	Information technology	254,806	226,675	22,423	5,708
15	Royalties				
16	Occupancy				
17	Travel	2,601,440	2,277,284	224,181	99,975
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	790,199	774,406	12,589	3,204
23	Insurance	11,129	10,217	912	0
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)		-10 -00		
а	Exp alloc - Utilities	519,583	519,583		· · · · · · · · · · · · · · · · · · ·
b	Exp alloc-scholarship	5,224	000 004	5,224	
С	Exp alloc - Misc	289,934	289,934		<u>. </u>
d	Exp alloc - Prop Tax	243,517	243,517		
e	· •	45,735	45,735	507,773	480,071
25		12,888,277	11,900,433	501,113	400,0/1
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)				

Pa	art X					
		Check if Schedule O contains a response to any	question in this Part X			
				(A)		(B)
П		0		Beginning of year		End of year
	1	Cash—non-interest bearing		377,363	1	409,358
	2	Savings and temporary cash investments		420 124	2	200 022
	3	Pledges and grants receivable, net	-	420,134	3	299,032
	4	Accounts receivable, net		379,716	4	372,671
	5	Loans and other receivables from current and former of	· · ·			
		trustees, key employees, and highest compensated em	ployees.		_	
	_	Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified per	· · · · · · · · · · · · · · · · · · ·			
		4958(f)(1)), persons described in section 4958(c)(3)(B),				
		sponsoring organizations of section 501(c)(9) voluntary				
2	7	organizations (see instructions) Complete Part II of Sci	nedule L		6	
SIBSSE	7	Notes and loans receivable, net	}	218,098	7	146 656
`	8	Inventories for sale or use		109,733	8	146,656 198,042
	9	Prepaid expenses and deferred charges	, , <u> </u>	109,733	9	130,042
	Tua	Land, buildings, and equipment cost or	10 506 307			
ŀ		other basis Complete Part VI of Schedule D	10a 18,586,307 10b 9,947,004	8,857,579	40-	0 630 303
		Less accumulated depreciation	10b 9,947,004	82,862,617	_	8,639,303 88,161,913
1	11	Investments—publicly traded securities	-	02,002,01/	11	00,101,913
-1	12	Investments—other securities See Part IV, line 11	ŀ		12	
ı	13	Investments—program-related See Part IV, line 11	H		13	
	14	Intangible assets	ŀ		14	
	15	Other assets See Part IV, line 11	, <u>,</u> ,	93,225,240	15	98,226,975
+	16	Total assets. Add lines 1 through 15 (must equal line 3	(4)	2,999,820	16 17	2,527,066
	17 18	Accounts payable and accrued expenses	-	2,333,020	18	2,321,000
		Grants payable Deferred revenue	-		19	
	19		-		20	
	20	Tax-exempt bond liabilities	of Sahadula D			
	21	Escrow or custodial account liability Complete Part IV			21	
	22	Loans and other payables to current and former officers				
LIADIMES		trustees, key employees, highest compensated employ	ees, and			
	23	disqualified persons Complete Part II of Schedule L	d		22 23	
1		Secured mortgages and notes payable to unrelated thir	· '		24	
-		Unsecured notes and loans payable to unrelated third p	F	·		
-	25	Other liabilities (including federal income tax, payables parties, and other liabilities not included on lines 17-24)	T .			
-		of Schedule D	. Complete Fart A	10,361,674	25	8,441,492
-	26		-	13,361,494	26	10,968,558
┪	20	Total liabilities. Add lines 17 through 25	k here X and	13,301,434	-20	10,300,330
ا ۾		Organizations that follow SFAS 117 (ASC 958), chec complete lines 27 through 29, and lines 33 and 34.	A HEICE AN ANU			
net Assets of Fully Balances	27	Unrestricted net assets	1	77,897,087	27	85,291,758
8	28	Temporarily restricted net assets	ŀ	,,,057,001	28	00,201,100
3		Permanently restricted net assets	ŀ	1,966,659	29	1,966,659
5	_3	Organizations that do not follow SFAS 117 (ASC 95)	B), check here ▶ ☐ and	<u> </u>	23	<u> </u>
5		complete lines 30 through 34.	o, shock here P and			
<u> </u>	30	Capital stock or trust principal, or current funds	1	j	30	
		Paid-in or capital surplus, or land, building, or equipmer	ht fund		31	
		Retained earnings, endowment, accumulated income, or			32	. = .
<i>:</i>		Total net assets or fund balances	or other lunus	79,863,746	33	87,258,417
١-	33					

Form **990** (2012)

om	1990 (2012) Alumni Assoc of Univ of Michigan 23-7206591				Pag	ge 12
Pa	rt 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	16	5,9:	L6,	<u> 574</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	12	2,8	38,	<u> 277</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	4	4,028,297		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	79	9,80	53,	746
5	Net unrealized gains (losses) on investments	5				
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		3,30	56,	374
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	87	7,2	58,	417
Pa	nt 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 X 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?			2a		Х
	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					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	ĺ
	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					1
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight					
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in					
	Schedule O					
За	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		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		
				For	m 99 0	(2012)

SCHEDULE A (Form 990 or 990-EZ)

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.

Quality Quento Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

Name	of the	organization	Alumni Assoc	of Universe Migh	hiaan						6591		
				of Univ of Mich			thic no	rt \ Co					
	art I			Status (All organizations				ii (.) Se	e insu	uctioi	15.		
	$\overline{}$			e it is (For lines 1 through 11, c									
1	\equiv			ociation of churches described i	n section	י)(מ)טירי ו	i)(A)(i).						
2	<u> </u>		cribed in section 170(b)(1)(41 470	/L.\/4\/.A\/	••••						
3	H	•	·	ce organization described in sec								_	
4				d in conjunction with a hospital d	iescribea	in sectio	מ)טיר ח)(1)(Α)(ι	II). Ente	er the no	ospitai s nami	е,	
_	77	city, and state											
5	X		on operated for the benefit on the benefit on the benefit of the b	of a college or university owned of a	or operate	ed by a g	overnme	entai uni	aescrii	bea in			
6				overnmental unit described in se	ection 17	'0(b)(1)(A)(v).						
7	П	An organizati	on that normally receives a	substantial part of its support fro	m a gove	ernmental	unit or f	from the	genera	l public	;		
	ш	described in	section 170(b)(1)(A)(vi). (C	omplete Part II)	_					-			
8				70(b)(1)(A)(vi). (Complete Part	II.)								
9) more than 33 1/3% of its supp		contributi	ons, mei	mbershi	p fees,	and gro	ss		
		_	-	npt functions—subject to certain									
				nd unrelated business taxable in									
				0, 1975. See section 509(a)(2).				,					
10			•	exclusively to test for public safe	-								
11	\square			exclusively for the benefit of, to p					out the	Э			
• •		_		ed organizations described in se)		
				he type of supporting organization									
		a Type		c Type III-Functions			d			on-funct	ionally integr	ated	
6			<u> </u>	anization is not controlled direct			ı						
·				er than one or more publicly sup									
		or section 50									•		
f				rmination from the IRS that it is	a Type I.	Type II.	or Type	III suppo	orting				
•			check this box		,,,,,	, ,		• • •	Ů				
		•		tion accepted any gift or contribi	ution from	anv of th	ne						اا
g		following per		, 3		•							
		• .		ontrols, either alone or together v	with perso	nns descr	nbed in (u) and				Yes	No
			w, the governing body of the		,			,			11g(ı)	T -	
		` '	member of a person describ	· · ·							11g(ii		
				described in (i) or (ii) above?							11g(ii		
h				he supported organization(s)							<u> </u>	н	
	i) Name	of supported	(II) EIN	(III) Type of organization	(iv) Is the (organization	(v) Did v	ou notify	(vi)	ls the	(vii) Amount	of mone	tarv
•		anization	(11/ 2.11	(described on lines 1–9		sted in your	the organ	nization in	organizat	ion in col	sup	port	•
				above or IRC section	governing	document?	col (i)	of your port?	(i) organı U	zed in the S ?			
				(see instructions))	Yes	No	Yes	No	Yes	No			
(A)													
(~)													
(B)												-	
ω,					1								
(C)			-										
(0)							1						
(D)													
(E)													
		_											
							1	1	1				

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

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.)

Sec	tion A. Public Support							
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 201	2	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	4,382,210	6,283,831	4,339,172	4,925,411	5,09	5,571	25,026,195
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	359,361	405,063	388,919	317,033		3,102	1,813,478
4	Total. Add lines 1 through 3	4,741,571	6,688,894	4,728,091	5,242,444	5,43	8,673	26,839,673
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)							2,340,762
6	Public support. Subtract line 5 from line 4							24,498,911
	tion B. Total Support				· · · · · · · · · · · · · · · · · · ·			
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20°		(f) Total
7	Amounts from line 4	4,741,571	6,688,894	4,728,091	5,242,444	5,43	8,673	26,839,673
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,088,986	3,153,894	3,266,974	3,327,566	3,57	0,297	16,407,717
9	Net income from unrelated business activities, whether or not the business is regularly carried on					10	4,098	104,098
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)				216,178	20	2,222	418,400
11	Total support. Add lines 7 through 10							43,769,888
12	Gross receipts from related activities, etc	(see instructions)					12	7,979,651
13	First five years. If the Form 990 is for the	•	, second, third, for	urth, or fifth tax yea	ar as a section 501	(c)(3)		
	organization, check this box and stop her	•	, ,	•				▶ 🗍
Sec	tion C. Computation of Public Su		age					
14	Public support percentage for 2012 (line 6	, column (f) divided	by line 11, colum	n (f))			14	55.97%
15	Public support percentage from 2011 Sch						15	53.19%
16a	33 1/3% support test-2012. If the organ	ization did not ched	ck the box on line	13, and line 14 is 3	33 1/3% or more, c	heck this		
	box and stop here. The organization qual	ifies as a publicly s	upported organiza	tion				► X
b	33 1/3% support test-2011. If the organ	zation did not ched	ck a box on line 13	or 16a, and line 1	5 is 33 1/3% or mo	ore,		
	check this box and stop here. The organiz	zation qualifies as a	a publicly supporte	ed organization				▶ ∐
17a	10%-facts-and-circumstances test—201	2. If the organization	on did not check a	box on line 13, 16	Sa, or 16b, and line	14 is		
	10% or more, and if the organization meet	ts the "facts-and-cir	cumstances" test,	check this box an	d stop here . Expla	aın in		
	Part IV how the organization meets the "fa organization	icts-and-circumstar	nces" test. The org	ganization qualifies	as a publicly supp	oorted		▶ □
b	10%-facts-and-circumstances test—201	1. If the organization	on did not check a	box on line 13, 16	6a, 16b, or 17a, and	d line		
	15 is 10% or more, and if the organization	meets the "facts-a	nd-circumstances	" test, check this b	ox and stop here.			
	Explain in Part IV how the organization me	eets the "facts-and-	circumstances" te	st The organizatio	on qualifies as a pu	iblicly		
	supported organization							▶ ∐
18	Private foundation. If the organization did	d not check a box o	on line 13, 16a, 16	b, 17a, or 17b, che	eck this box and se	ee		
	instructions							▶ ∐

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below please complete Part II.)

S^~	tion A. Public Support	quality under th	ie lesis listeu t	below, please co	ompiete Part ii	1			
	idar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	, 1	(f) Tota	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	(α) 2000	(5) 2009	(6) 20 10	<u>(u)</u> 2011	(e) 2014	-	(1) 10(3	
2	grants ") 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								
S00	line 6) tion B. Total Support						1	·	
	idar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	, 1	(f) Tota	
9	Amounts from line 6	(a) 2000	(b) 2003	(6) 2010	(d) 2011	(6) 2012	-	(1) 10ta	
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								
С	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 firs	t, second third fo	urth, or fifth tax vea	r as a section 501	(c)(3)			
	organization, check this box and stop here	-				\-/\-/			
Sec	tion C. Computation of Public Sເ	ipport Percen	tage						
15	Public support percentage for 2012 (line 8		•	nn (f))		-7	15		%
16	Public support percentage from 2011 School				· · · · · · · · · · · · · · · · · · ·		16		%
	tion D. Computation of Investme						,_ I		
17	Investment income percentage for 2012 (li			, column (f))		}	17		<u>%</u>
18	Investment income percentage from 2011			14 and line 45 :-	mara than 22 4/21) ondina	18		%
19a	33 1/3% support tests—2012. If the organization is not more than 33 1/3%, check this bound is supported to the support tests—2012.							ı	▶┌
ь	33 1/3% support tests—2011. If the organ		=				and	•	- L
-	line 18 is not more than 33 1/3%, check th							ı	▶ ┌
20	Private foundation. If the organization do	=	-		• • •			l	

Schedule A (Form 990 or 990-EZ) 2012 Alumni Assoc of Univ of Michigan

23-7206591

Page 4

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)

Part II, Line 10 - Other Income Detail

Other income

\$ 216,178

Supplemental Information

Other Fundraising events

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

2012
Open to Public Inspection

lame of the organization

Employer identification number

Name	of the organization		Employer ide	ntification number
Δ	lumni Assoc of Univ of Michigan		23-72	06591
	Organizations Maintaining Donor Advised Fu organization answered "Yes" to Form 990, Part I			
	0.90	(a) Donor advised funds	(b) F	unds 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 the	at the assets held in donor advised		
	funds are the organization's property, subject to the organization's exc	clusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in			
	only for charitable purposes and not for the benefit of the donor or dor	nor advisor, or for any other purpose		
	conferring impermissible private benefit?			Yes No
Pa	art II Conservation Easements. Complete if the organized	anization answered "Yes" to Form	990, Part	IV, line 7
1	Purpose(s) of conservation easements held by the organization (chec	k all that apply).		
	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically im	portant land	area
	Protection of natural habitat	Preservation of a certified historic	c structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified cons	ervation contribution in the form of a conse	ervation	
	easement on the last day of the tax year			
				eld at the End of the Tax Year
а	Total number of conservation easements		2a	
b	3		2b	
С		• •	2c	
d	Number of conservation easements included in (c) acquired after 8/17	7/06, and not on a		
_	historic structure listed in the National Register	the state of the s		<u> </u>
3	Number of conservation easements modified, transferred, released, e	extinguished, or terminated by the organiza	tion during t	ne
	tax year ▶	In and and Section 1		
4	Number of states where property subject to conservation easement is			
5	Does the organization have a written policy regarding the periodic mo- violations, and enforcement of the conservation easements it holds?	nitoring, inspection, handling of		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcement of the conservation easements it holds?	roing conservation easements during the v	ear	103 NO
U	Stan and volunteer flours devoted to monitoring, inspecting, and emol	reing conservation casements during the y	Cai	
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 easen	nents in its revenue and expense statemer	nt, and	
	balance sheet, and include, if applicable, the text of the footnote to the	e organization's financial statements that d	escribes the	
	organization's accounting for conservation easements			
P;	Organizations Maintaining Collections of Art		Similar A	ssets.
	Complete if the organization answered "Yes" to			-1
1a	If the organization elected, as permitted under SFAS 116 (ASC 958),		_	et
	works of art, historical treasures, or other similar assets held for public		erance or	
L	public service, provide, in Part XIII, the text of the footnote to its finance. If the organization elected as permitted under SEAS 116 (ASC 958).		nce sheet	
D	If the organization elected, as permitted under SFAS 116 (ASC 958), works of art, historical treasures, or other similar assets held for public	•		
	public service, provide the following amounts relating to these items.	Combiner, education, or research in fullin	cianos ui	
	(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	or other similar assets for financial dain, are	ovide the	₹
2	following amounts required to be reported under SFAS 116 (ASC 958		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
2	Revenues included in Form 990, Part VIII, line 1	, reading to tribus rains.	•	\$
	Assets included in Form 990, Part X		•	· \$

			v of Michig		7206591	Page 2
Pa	art III Organizations Maintainin					(continued)
3	Using the organization's acquisition, access collection items (check all that apply)	sion, and other records	s, check any of the follo	owing that are a sig	nificant use of its	
а	Public exhibition	d∏ı	oan or exchange prog	rams		
b	H		Other			
C	Preservation for future generations					
4	Provide a description of the organization's of	collections and explain	how they further the o	rganization's exem	ot purpose in Part	
-	XIII				· •	
5	During the year, did the organization solicit	or receive donations of	of art. historical treasure	es, or other similar		
	assets to be sold to raise funds rather than					Yes No
Pε	art IV Escrow and Custodial Ar				d "Yes" to Form 99	0, Part IV,
	line 9, or reported an amou	int on Form 990, F	Part X, line 21.			
1a	Is the organization an agent, trustee, custo		·	other assets not		
	included on Form 990, Part X?					Yes No
b	If "Yes," explain the arrangement in Part XI	II and complete the fol	lowing table			
	•					Amount
С	Beginning balance				1c	
d	Additions during the year				1d	
е	Distributions during the year				1e	
f	Ending balance				1f_	
2a	Did the organization include an amount on	Form 990, Part X, line	21?		- · · · -	Yes No
	If "Yes," explain the arrangement in Part XI			ovided in Part XIII		
	art V Endowment Funds. Com				0, Part IV, line 10.	
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	76,302,240	76,496,197	64,136,07	9 59,995,924	1
	Contributions	3,500,000	2,000,000	1,500,11	.0 1,242,442	2
c	Net investment earnings, gains, and					
	losses	3,366,373	11,934,399	11,934,36	3,606,45	2
d	Grants or scholarships					
е	Other expenditures for facilities and					
	programs					
f	Administrative expenses					
g	End of year balance	88,161,913	82,862,617	76,496,19	64,136,07	9
2	Provide the estimated percentage of the cu	rrent year end balance	e (line 1g, column (a)) l	held as.		
а	Board designated or quasi-endowment	97.75%				
b	Permanent endowment ▶ 2.25 %					
С	Temporanly restricted endowment ▶	%				
	The percentages in lines 2a, 2b, and 2c sho	ould equal 100%				
3a	Are there endowment funds not in the poss	ession of the organiza	tion that are held and	administered for the	•	
	organization by					Yes No
	(i) unrelated organizations					3a(i) X
	(ii) related organizations					3a(ii) X
b	If "Yes" to 3a(II), are the related organization	ns listed as required o	n Schedule R?			3b X
4	Describe in Part XIII the intended uses of the	ne organization's endo	wment funds			
Pa	art VI Land, Buildings, and Equ	uipment. See For	m 990, Part X, line	10.		
	Description of property	(a) Cost or other b	asis (b) Cost or of	ther basis	c) Accumulated	(d) Book value
		(investment)	(othe		depreciation	
1a	Land		43	31,259		431,259
b	Buildings					
С	Leasehold improvements					
d	Equipment					
	Other				9,947,004	8,208,044
Tota	II. Add lines 1a through 1e (Column (d) mus	t equal Form 990, Part	X, column (B), line 10	(c).)		8,639,303
					Soho	tule D (Form 990) 2012

Sche	dule D (Form 990) 2012 Alumni Assoc of Univ of Mich	nigan	23-7206591	<u>-</u>	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Staten	nents With	Revenue per Retu	ırn	
1	Total revenue, gains, and other support per audited financial statements			1	16,916,574
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a		1	
b	Donated services and use of facilities	2b			
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
е	Add lines 2a through 2d	-		2e	
3	Subtract line 2e from line 1			3	16,916,574
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		T T		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		ļ	
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	16,916,574
Pε	art XII Reconciliation of Expenses per Audited Financial State	ments With	Expenses per Re	eturn	1
1	Total expenses and losses per audited financial statements			1	12,888,277
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			1	
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c		- 1	
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	12,888,277
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		["		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-	
b	Other (Describe in Part XIII)	4b			
C	Add lines 4a and 4b			4c	
5	Total expenses, Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	12.888.277

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.

Part XIII - Supplemental Financial Information

Part XIV - Supplemental Financial Information

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

Schedule D (Form 990) 2012 Alumni Assoc of Univ of Michigan 23-7206591

Part XIII Supplemental Information (continued)

Page 5

Department of the Treasury

Total

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

See separate instructions.

OMB No 1545-0047

Open to Public

Internal Revenue Service Employer identification number Name of the organization Alumni Assoc of Univ of Michigan 23-7206591 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Solicitation of non-government grants Mail solicitations Solicitation of government grants Internet and email solicitations b Special fundraising events Phone solicitations In-person solicitations d 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? 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. (iii) Did fund-(v) Amount paid to (vi) Amount paid to raiser have (i) Name and address of individual (or retained by) (or retained by) (IV) Gross receipts custody or (ii) Activity from activity fundraiser listed in organization or entity (fundraiser) control of contributions' col (i) No Yes 2 3 6

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

Alumni Assoc of Univ of Michigan Schedule G (Form 990 or 990-EZ) 2012 23-7206591 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 See Schedule 2 990PtVIII1c (add col (a) through None col (c)) (event type) (event type) (total number) 809,596 549,814 1,359,410 1 Gross receipts 809,896 809,896 2 Less: Contributions 3 Gross income (line 1 minus 549,814 549,814 line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 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 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more Part III than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/instant (d) Total gaming (add Revenue (c) Other gaming (a) Bingo bingo/progressive bingo col (a) through col (c)) 1 Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses % Yes % Yes % Yes 6 Volunteer labor No No No 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities Yes No a Is the organization licensed to operate gaming activities in each of these states? b If "No," explain Yes No 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," explain

Sche	dule G (Form 990 or 990-EZ) 2012 Alumni Assoc of Univ of Michigan	23-720659)1 Pa	age 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity			
	formed to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity operated in			
а	The organization's facility	13a		<u>%</u>
b	An outside facility	13b		<u>%</u>
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 ▶ \$			
С	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.			
а	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 to be distributed to other exempt organizations or			
	spent in the organization's own exempt activities during the tax year ▶ \$			
Par	Supplemental Information. Complete this part to provide the explanations requi			
	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as appli	cable. Also complet	te this	
	part to provide any additional information (see instructions).			

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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States

▶ Attach to Form 990.

OMB No 1545-0047 2012

Open to Public Inspection

. ₽ □ Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, (h) Purpose of grant or assistance **Employer Identification number** X Yes 23-7206591 non-cash assistance (g) Description of Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable Alumni Assoc of Univ of Michigan General Information on Grants and Assistance (p) EIN Enter total number of other organizations listed in the line 1 table the selection criteria used to award the grants or assistance? (a) Name and address of organization or government Part # Part ~ Ξ 3 ල 3 **②** 9 8 8 6

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

Schedule I (Form 990) (2012)

	duals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22	
23-7206591	. Complete if the organization ansv	
Univ of Michigan	uals in the United States	ce is needed.
Alumni Assoc of Un	Grants and Other Assistance to Individ	Part III can be duplicated if additional spac
Alumni	Other Assis	oe duplicated
Schedule I (Form 990) (2012) 🚺	Grants and	Part III can t
Schedule I (I	Part III	

	(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)	(e) Method of valuation (book, (f) Description of non-cash assistance FMV, appraisal, other)
1 Schol	Scholarships		423,356		PV 4 years	•
7						
m						
4						
ro 						
မှ						
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.	plete this part to prov	de the information re	equired in Part I, line	2, Part III, column (b), and	any other additional

Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds

Funds are transferred to the student's University of Michigan account and

are applied against tuition and fees.

Schedule I (Form 990) (2012)

SCHEDULE J (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest

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

Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

► Attach to Form 990.

► See separate instructions.

Open to Public

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Alumni Assoc of Univ of Michigan

Employer identification number 23 - 7206591

۲a	art t 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 indemnification and gross-up payments Discretionary spending account Tax indemnification and gross-up payments Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2		
3	Indicate which, if any, of the following the filing organization uses 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 X Compensation committee Independent compensation consultant Compensation survey or study Form 990 of other organizations X 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		
а	Receive a severance payment or change-of-control payment?	—	X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	₩	Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	 	X
	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III		
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any		
	compensation contingent on the revenues of:		
а	The organization?	 	X
b	Any related organization?	ــــــ	X
	If "Yes" to line 5a or 5b, describe in Part III		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any		
	compensation contingent on the net earnings of		v
	The organization? Any related organization? 6b	+	X
D	Any related organization? If "Yes" to line 6a or 6b, describe in Part III	+	
7		1	
•	payments not described in lines 5 and 6? If "Yes," describe in Part III		x
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject	1	
-	to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe		
	ın Part III	\perp	X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?		

Page 2

Schedule J (Form 990) 2012

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23-7206591 Alumni Assoc of Univ of Michigan

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

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, Section A, line 1a, applicable column (D) and (E) amounts for that individual 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

(B) Breakdown		of W-2 and/or 1099-MISC compensation	SC compensation	-MISC compensation (C) Returnment and (D) Nontaxable (E	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(II) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)–(D)	reported as deferred in • prior Form 990
Steve C. Grafton	() 315,500	0	0	0	50,669	366,169	0
1 President	(n)	0	0	0	0	0	0
Sigler	(1) 215,633	0	0	0	43,541	259,174	0
2 Sr VP/CFO	(n)	0	0	0	0	0	0
cott	(1) 158,573	0	0	0	37,949	196,522	0
	<u>. (ii)</u>	0	0	0	0	0	0
rid Schueler	(1) 119,043	0	0	0	34,047	153,090	0
4 VP Program Delivery		0	0		0	0	0
	(i)						
)	(E)						
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						S	Schedule J (Form 990) 2012

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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. Supplemental Information Part ⊞

Schedule J (Form 990) 2012 Alumni Assoc of Univ of Michigan

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Schedule J (Form 990) 2012

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 990-EZ 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

Alumni Assoc of Univ of Michigan

Employer identification number 23 – 7206591

Form 990 - Organization's Mission or Most Significant Activities

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

Form 990, Part III, Line 4d - All Other Accomplishment none

Form 990, Part VI, Line 9 - Officers Who Cannot Be Reached See attached list of Board Directors

Form 990, Part VI, Line 10b - Policies and Procedures Governing Chapters

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

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

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

Alumni Assoc of Univ of Michigan

Employer identification number 23 - 7206591

A.Each Director will review the Policy and will be asked to disclose any personal Business Relationship or Financial or Other Interest, or that of a Related Individual, that the Director knows could reasonably give rise to an actual or potential conflict of interest with the Alumni Association. Each Director shall acknowledge annually, by affixing his or her signature to the attached Certificate of Compliance, that he or she is acting in accordance with the letter and spirit of this Policy and has made all disclosures required under the terms of the Policy.

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

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

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

Name of the organization

Alumni Assoc of Univ of Michigan

Employer identification number 23 - 7206591

- 1.If the Alumni Association is considering a pending or imminent
 Transaction that involves a conflict of interest disclosed by a Director,
 the Officers shall work with the President and Counsel to investigate
 alternatives to the Transaction. They shall review appropriate comparable
 data and determine whether a more advantageous Transaction can be obtained
 with reasonable efforts by the Alumni Association.
- If the Transaction in question arises from a conflict with any Officer, that Officer shall recuse him or herself; the most senior Officer remaining shall appoint a disinterested Director to replace the recused Officer in considering alternative Transactions.
- 2.If it is determined that a more advantageous Transaction cannot be obtained with reasonable efforts by the Alumni Association, then the Officers shall determine, with the approval of a majority of disinterested Directors in Executive Session,
- -a. whether the Transaction is in the Alumni Association's best interest and for its own benefit,
- -b. whether the Transaction is fair and reasonable to the Alumni Association, and
- -c. whether to enter into the Transaction in conformity with such determination in a. and b. above.
- 3. The Officers shall keep minutes of their meeting. The minutes shall reflect the discussion of the conflict and Transaction, the nature of data reviewed, the record of votes taken, and any action the Officers agree to take on the conflict and Transaction. The Officers shall make those minutes available at the Alumni Association for review, but not copying or removal, by other Directors.
- E.If two or more disinterested Directors disagree with the Officers' action

Name of the organization

Alumni Assoc of Univ of Michigan

Employer identification number 23 - 7206591

taken on a particular conflict, they may request that the Board meet in Executive Session to review and reconsider the Officers' action and may request a vote to reverse the Officers' action. Reversal shall require the approval of a majority of disinterested Directors in Executive Session. F.Any Director who has or may have a conflict of interest shall not participate or use any personal influence in the discussion of the matter involving the conflict and shall not make any recommendations regarding the matter. The Director shall formally recuse him or herself for the record and shall not be present when the matter is discussed and voted on. G.Any Director, who is uncertain whether he or she has a conflict of interest or who desires assistance in interpreting this Policy, may seek advice from the Chair. If any Director perceives the existence of a potential or actual conflict of interest involving another Director, he or she shall immediately notify the Chair. If it is the Chair whom a Director suspects of a conflict of interest, that Director shall notify the next ranking Officer.

- H.If, for purposes of subparagraph G, it is the Chair who is uncertain whether he or she has a potential conflict of interest, then he or she may seek advice from the other Officers.
- I.All candidates for membership on the Board shall be advised of and acknowledge this Policy prior to the commencement of their service on the Board.
- B.Disclosing, Evaluating, and Managing Potential Conflicts of Interest and Conflicts of Commitment
- 1. Identify and disclose potential conflicts of interest and conflicts of commitment

Whenever a potential conflict of interest or conflict of commitment exists

for a staff member, he or she must promptly disclose it using the following guidelines:

- a. The staff member must evaluate his/her conflict using the criteria below.
- 1. Work for Pay: Disclose the nature of the work and time commitment; do not need to disclose the specific employer unless it is a university unit or an AAUM business partner/vendor.
- 2. Volunteering: Need to disclose only if it is for a university unit or for a AAUM business partner/vendor
- 3.Conflicts of commitment can occur in many situations, whether you work for pay, are volunteering or are facing some significant situation in your personal life. The expectation is you will disclose this if/when it might impact your availability for work or your performance.
- b. The staff member must discuss the conflict and his/her evaluation of it to his/her supervisor or the Human Resources Manager
- c.If it is determined that a conflict of interest or a conflict of commitment may exist, the conflict must be disclosed in writing to the President and CEO of the Alumni Association (in the case of a potential conflict involving the President/CEO, he/she must disclose it, in writing, to the Chair of the Board of Directors of the Alumni Association). If it is determined that a conflict does not exist, no further disclosure is necessary, however the staff member should periodically re-evaluate as circumstances and relationships evolve.
- 2. Evaluating disclosures of potential conflicts of interest or conflicts of commitment

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

relevant to evaluating the potential conflict of interest or conflict of commitment.

As needed, the President/CEO will consult with the Chair of the Board of Directors of the Alumni Association and/or legal counsel.

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

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

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

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

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation

Market change \$ 3,366,373

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

LIST OF STATEMENTS ATTACHED

Statement 1 Part VIII, Line 1 (f) – All Other Contributions

Statement 2 Part VIII, Line 8 (a) - (c) - Fundraising Events

opportunities for alumni interchange and intellectual stimulation through seminars with U-M faculty in educational and social settings.

Statement 3 Part I, Line 22 - Other Changes in Fund Balance

Statement 4 Part IX, Line 24 - Other Expenses

Part VIII, Line 2 - Analysis of Income Producing

Activities

Statement 5

Statement 6 Part X - Balance Sheet Detail

Part IV - Note Regarding Deferred Charges and Deferred

Revenue

Statement 7

Statement 8 Schedule A, Part II, Section A Line 3 - Services Received

from a Governmental Unit

Part III, Organization's Primary Exempt Purpose

Statement 9

Statement 10 Part III (A-D), Statement of Program Service

Accomplishments

Customer ID	Constituent Salutation 3	Gift Date	x Deductible Amo: Designation Site Name
7770000091	Washington, DC Club	07/04/16	\$7,000 00 LEAD Scholars
	Janey and Melvin Lack Charitable Fund	07/11/16	\$10,000 00 LEAD Scholars
	Johnson & Johnson Family of Companies	07/24/16	\$6,000 00 LEAD Scholars
9990123079	Johnson & Johnson Family of Companies	07/24/16	\$6,000 00 LEAD Scholars
8186801	Janet E Perry	08/02/16	\$5,850 00 Alumni Association - Camps
3257629	Mrs Deborah L Nemesi	08/10/16	\$5,000 00 LEAD Scholars
9990123268	Richman Family Foundation	09/12/16	\$25,000 00 LEAD Scholars
3257629	Mrs Deborah L Nemesi	09/13/16	\$15,000 00 LEAD Scholars
3631473	Mary M Johnson, M D.	09/18/16	\$20,000 00 LEAD Scholars
9990123360	Lili and Jon Bosse Fund	09/26/16	\$15,000 00 LEAD Scholars
8115971	Li Li Leung	10/18/16	\$5,000 00 Alumni Association
3790733	Mrs Kımberly O Flesner, P E	10/20/16	\$5,000 00 LEAD Scholars
8939581	Mr. Glenn Jaffe	10/23/16	\$10,064 03 LEAD Scholars
3655945	Michael C Keller	10/23/16	\$5,000 00 Alumni Association - Camps
11527661	Kristin A Wikol	10/31/16	\$5,000 00 Alumni Association - Camps
9990123546	Marine Charitable Foundation	11/01/16	\$10,000 00 LEAD Scholars
8600438	Tom A Wikol	11/02/16	\$5,000 00 Alumni Association - Camps
326926	Richard R Roemer	11/30/16	\$7,428 69 Alumni Association
9990123079	Johnson & Johnson Family of Companies	12/01/16	\$6,150 00 LEAD Scholars
7011741	Kerry A Galvin	12/06/16	\$10,000 00 LEAD Scholars
1594655	Charles E Sweet	12/08/16	\$12,846.00 Alumni Association - Camps
8765534	Leigh A Gustafson	12/12/16	\$7,500 00 Alumni Association - Camps
8789274	Mr Robert Goldstein	12/14/16	\$20,000 00 LEAD Scholars
3907533	David S Evans	12/15/16	\$40,848 85 Alumni Association - Camps
3907533	David S Evans	12/15/16	\$30,711 36 Alumni Association - Camps
3907533	David S Evans	12/15/16	•
	David S Evans	12/15/16	•
3907533	David S Evans	12/15/16	\$15,519 93 Alumni Association - Camps
	Mark E Ferguson	12/17/16	\$5,000 00 LEAD Scholars
206659	Patricia J LaCrosse	12/19/16	•
	Robert O McPhilimy	12/20/16	•
	Thomas H Zurbuchen	12/25/16	
	Henry A Shevitz	12/27/16	
	John C Higgins	12/29/16	
	Ms Ann Marie Lipinski	01/01/17	
	Broderick D Johnson	01/01/17	
	Eric R Arnson	01/01/17	
	Charles Newman	01/10/17	
	Ernest J Newborn II	01/16/17	
	Samuel L Chappell	01/18/17	
	Hymowitz Family Foundation	01/18/17	•
	Hymowitz Family Foundation	01/18/17	
	Eric and Melissa Haas Charitable Fund	01/26/17	•
	Jason L Peltz	01/29/17	
	Bastian Family Charitable Foundation	02/20/17	\$5,000 00 Alumni Association
	VanderVoort Family Fund of The Chicago	02/20/17	•
	Mrs Noelle Hicks	03/07/17	
	Levi Strauss Foundation	03/15/17	•
	Battle Creek Community Foundation	03/16/17	
	Mr. Robert Matza	04/02/17	
	Mr Frederick L C Lui	05/02/17	
	Robert L McMasters	05/07/17	•
	Robert L. McMasters	05/07/17	
	Michael C Keller	06/05/17	\$8,400 00 Alumni Association - Camps
	Confidence Foundation	06/15/17	
11811522	Nancy N Stanley	06/18/17 06/19/17	\$28,334 70 Alumni Association \$5,000 00 Alumni Association - Camps
	•		•
	Eric P Spaly	06/21/17	\$5,000 00 Alumni Association - Camps
	Kelley V Rea	06/22/17	
	Mary M Johnson, M D Washington, DC Club	06/28/17	\$10,000 00 LEAD Scholars
///0000091	Washington, DC Club	06/30/17	\$6,500 00 LEAD Scholars

PART	VIII,	LINES	8	(a)	-	(c)
FUND	RAISI	NG EV	Έ۱	NTS		

STATEMENT 2

Gross Income

Sale of University of Michigan it \$\sumsymbol{2549,814}\$

opportunities for alumni interchange and intellectual stimulation through seminars with U-M faculty in educational and social settings.

PART I, LINE 22 OTHER CHANGES IN FUND BALANCE

STATEMENT 3

6/30/2012 The other changes in fund balance consists of the following:

6/30/2013

Funds received during the fiscal year for life

memberships in The Alumni Association

of The University of Michigan

\$1,354,067

\$925,576

Funds received during the fiscal year for Alumni gifts and

Bequests to The Alumni Association of The University

opportunitie of Michigan

Unrealized gain on investments

recorded at market value (loss)

.

3,366,373.00

(2,193,956.00)

(\$1,268,380) \$4,720,440

Source: Audited Financials

PART IX, LINE 24 OTHER EXPENSES

STATEMENT 4

		6/30/2013		
	<u>Total</u>	Program Services	Management and General	Fundraising
Scholarship	5,224		5,224	0
Bowl Tour	0	0		0
Utilities	519,583	519,583		0
Property Taxes	243,517	243,517		0
Rental of Horses	45,735	45,735		0
Miscellaneous	289,934	289,934		0
TOTAL	\$1,103,993	\$1,098,76 <u>9</u>	<u>\$5,224</u>	0.00

STATEMENT 5

ANALYSIS OF INCOME PRODUCING ACTIVITIES

	6/30 Unrelated <u>Income</u>	0/12 Related Income	6, Unrelated Income	/30/13 Related Income
"Michigan Alumnus" Advertising	216,178	0.00	202,222	
Program Fees	0.00	108,538		113,737
opportunities for alumni interchange and	374,831	0 00	391,845	
Insurance Surplus Refund	0 00	-	0	0
Program Sponsorship		62,270		96,236
Bowl Tour	0.00	85,541 00	0	45,549
Credit Card Program	0.00	3,209,375		3,282,122
Horseback Riding Rentals	0.00	14,566		14,323
Michigania	0 00	3,195,836		3,461,811
Miscellaneous Alumni Programs	0 00	103,517		77,407
TOTAL	591,009	6,779,643	594,067	7,091,185
Memo - Part VIII Line 2 Program Service Revenue				
	Unrelated Exempt	374,831 216,178		391,845 202,222
	•			
	Related	<u>6,779,643</u>		<u>7,091,185</u>
		7,370,652		7,685,252

PART X
STATEMENT 6
BALANCE SHEET DETAIL

INVESTMENTS - SECURITIES, LINE 11	6/30/2012	6/30/2013
Equity in investment funds of The University of Michigan Total Investments - Securities	82,862,617	88,161,913
LAND, BUILDINGS, AND EQUIPMENT.		
LINE 10 a-b		
opportunities for alumni interchange and intellectual stimulation through seminars	ellectual stimulatior	through seminars
Michigania Property	12,698,753	12,773,529
Equipment and office fixtures	5,315,630	5,812,778
Total	18,014,383	18,586,307
Less: Accumulated Depreciation	(9, 156, 804)	(9,947,004)
Net	8,857,579	8,639,303

OTHER LIABILITIES, LINE 25

2,390,044	3,385,714	2,638,951	26.783	8,441,492
2,311,578	5,360,481	3,247,017	717,787	11,131,858
Unearned memberships	Deferred revenue	Deferred revenue - Michigania see	statement / Class and other deposits	

Source Audited Financials

Camp Michigania, the Association's educational center located on Walloon Lake with satellite camps in New York and California, was previously reported on an October 31 year end, such that fees received and expenses incurred related to future periods were deferred at June 30. During 2013 Michigania's year end was changed to June 30 for financial reporting purposed and prior year amounts were reclassified to conform with current year presentation. The below table references the adjustments made to June 30, 2012 reported balances.

	Previously Reported 2012 Balances	Adjustments	Adjusted 2012 Balances
Revenues	\$15,235,356	\$238,097	\$15,473,453
Expenses	11,742,163	545,809	12,287,972
Deferred charges	2,023,736	-1,914,003	109,733
Deferred revenue	8,607,498	-770,184	7,837,314
Beginning Net Assets	78,782,752	-836,107	77,946,645
Unrestricted Net	79,040,906	-1,143,819	77,897,087

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

<u>Total</u>	1,243,556.00 557,563.00	1,801,119.00
<u>2006</u>	221,647.00 103,237.00	324,884.00
2007	231,022.00 <u>91,870.00</u>	322,892,00
2008	255,753.00 103,608.00	359,361,00
2009	253,567.00 151,496.00	405,063,00
2011	281,567.00 107,352.00	388,919.00
2012	254,906.00 62,127.00	317,033.00
2013	opportunities for alumni interchange and ir 279,477.00 Utilities	Total 343,102.00

LEAD Scholars from Alumni Council

343,102

FOR THE YEAR ENDED	JUNE	30,	2011
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STATEMENT 9

PART III

ORGANIZATION'S PRIMARY EXEMPT PURPOSE

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

\$1,900,559

298,458

10,229,507

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS (4A-D) PART III

	6/30/2012	012	06/9	6/30/2013
	Expense	Revenue	Expense	Revenue
Coordination of a nationwide network of alumni volunteers who support the university by recruiting academically gifted students and raising funds for student scholarships.	\$1,616,179	\$2,013,518	\$1,418,780	\$1,900,5
Publications and electronic newsletters to keep alumni informed about current activities at U-M and highlighting the fundraising	1,362,481	278,448	1,716,117	298,45
Membership benefits and services, including coordination and sponsorship of programming to enrich the lives of U-M alumni and students, including career networking and job search assistance, online networking, reunions and special events.	4,741,149	9,542,379	5,063,254	10,229,50
Programs that offer alumni (and their families) unique opportunities for alumni interchange and intellectual stimulation through seminars with U-M faculty in educational and social settings.	3,192,475	4,294,747	3,692,064	4,488,05
Total	\$10,912,284	\$16,129,092	\$11,890,215	\$16,916,57

4,488,050

\$16,916,574

AAUM Board of Directors 2013-14

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