			** PUBLIC DISCLOSURE COPY **			
	0		Return of Organization Exempt Fi	rom lr	ncome Tax	OMB No. 1545-0047
For	mУ	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue C			¹⁵⁾ 2016
		of the Treasury	Do not enter social security numbers on this form as			Open to Public
		enue Service	Information about Form 990 and its instructions is a	at <u>www.irs</u>	s.gov/form990.	Inspection
Α	For th	e 2016 calend	ar year, or tax year beginning and ei	nding		
В	Check if	C Name of	organization		D Employer identifi	cation number
	applicab	ASSOCI	ATION OF THE GRADUATES OF THE			
	Addre chang Name	ge UNITED	STATES MILITARY ACADEMY			
	chang	ge Doing bi	ISINESS AS WEST POINT ASSOC. OF GRADUATES		14-12	260763
	return	Number	· · · · · · · · · · · · · · · · · · ·	Room/suite	E Telephone number	
	Final return termir		98, HERBERT HALL, MILLS RD		845-44	
r	ated Amen	City or t	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	186,921,347.
	return Applic	N WEST P	OINT, NY 10996		H(a) Is this a group re	
	_ tion pendi	I F Name a	nd address of principal officer: TODD A. BROWNE		for subordinates	
				507	H(b) Are all subordinates in	
		empt status:	X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or STPOINTAOG.ORG	527		list. (see instructions)
_		f organization:			H(c) Group exemption	I State of legal domicile: ^{NY}
	art I	Summary		L real (State of legal domicile, 11
<u> </u>			e the organization's mission or most significant activities: FURTHERI	ING THE	TDEALS AND	· · · · · · · · · · · · · · · · · · ·
e	'		THE USMA AND SUPPORTING AND SERVING ITS GRADUATES.			
Governance	2	Check this box	· · · · · · · · · · · · · · · · · · ·	d of more t	than 25% of its net ass	ets
veri					3	17
ĝ			ependent voting members of the governing body (Part VI, line 1b)			17
ళ			of individuals employed in calendar year 2016 (Part V, line 2a)			126
itie			of volunteers (estimate if necessary)			70
Activities &			business revenue from Part VIII, column (C), line 12			363,378.
Ā			ousiness taxable income from Form 990-T, line 34			175,348.
					Prior Year	Current Year
e	8	Contributions	and grants (Part VIII, line 1h)		Prior Year 37,668,915.	Current Year 39,550,040.
enue	9	Program servic	e revenue (Part VIII, line 2g)			
sevenue	9 10	Program servic Investment inc	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d)		37,668,915. 2,644,213. 6,843,241.	39,550,040. 1,283,372. 6,464,808.
Revenue	9 10 11	Program servic Investment inc Other revenue	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		37,668,915. 2,644,213. 6,843,241. 1,468,880.	39,550,040. 1,283,372. 6,464,808. 1,504,280.
Revenue	9 10 11 12	Program servic Investment inc Other revenue Total revenue	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12)		37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249.	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500.
Revenue	9 10 11 12 13	Program service Investment inco Other revenue Total revenue Grants and sin	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) illar amounts paid (Part IX, column (A), lines 1-3)	······	37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578.	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662.
Revenue	9 10 11 <u>12</u> 13 14	Program servic Investment inc Other revenue Total revenue Grants and sin Benefits paid t	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) illar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4)	······	37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578. 0.	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0.
	9 10 11 12 13 14 15	Program servic Investment inc Other revenue Total revenue Grants and sim Benefits paid t Salaries, other	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) illar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10)		37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578. 0. 8,583,217.	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0. 9,007,145.
enses Revenue	9 10 11 12 13 14 15 16a	Program service Investment inco Other revenue Total revenue Grants and sim Benefits paid t Salaries, other Professional fu	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) illar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10) ndraising fees (Part IX, column (A), line 11e)		37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578. 0.	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0.
benses	9 10 11 12 13 14 15 16a b	Program service Investment inco Other revenue Total revenue Grants and sim Benefits paid t Salaries, other Professional fu Total fundraisin	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) illar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10) indraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25)		37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578. 0. 8,583,217. 511,484.	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0. 9,007,145. 270,000.
	9 10 11 12 13 14 15 16a b 17	Program service Investment inco Other revenue Total revenue - Grants and sim Benefits paid t Salaries, other Professional fu Total fundraisin Other expense	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) illar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10) ndraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) (Part IX, column (A), lines 11a-11d, 11f-24e)		37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578. 0. 8,583,217. 511,484. 6,070,912.	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0. 9,007,145. 270,000. 4,919,431.
benses	9 10 11 12 13 14 15 16a b 17 18	Program service Investment inco Other revenue Total revenue Grants and sim Benefits paid t Salaries, other Professional fu Total fundraisii Other expense Total expenses	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) iilar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10) ndraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) $7,074,71$ s (Part IX, column (A), lines 11a-11d, 11f-24e) . Add lines 13-17 (must equal Part IX, column (A), line 25)		37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578. 0. 8,583,217. 511,484. 6,070,912. 38,402,191.	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0. 9,007,145. 270,000. 4,919,431. 56,355,238.
Expenses	9 10 11 12 13 14 15 16a b 17 18	Program service Investment inco Other revenue Total revenue Grants and sim Benefits paid t Salaries, other Professional fu Total fundraisii Other expense Total expenses	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) illar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10) ndraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) (Part IX, column (A), lines 11a-11d, 11f-24e)		37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578. 0. 8,583,217. 511,484. 6,070,912. 38,402,191. 10,223,058.	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0. 9,007,145. 270,000. 4,919,431. 56,355,238. -7,552,738.
or Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Program servic Investment inc Other revenue Total revenue Grants and sim Benefits paid t Salaries, other Professional fu Total fundraisi Other expenses Revenue less of	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) iilar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10) indraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) ▶ 7,074,71 s (Part IX, column (A), lines 11a-11d, 11f-24e) . Add lines 13-17 (must equal Part IX, column (A), line 25) xpenses. Subtract line 18 from line 12	L7. Beg	37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578. 0. 8,583,217. 511,484. 6,070,912. 38,402,191. 10,223,058. inning of Current Year	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0. 9,007,145. 270,000. 4,919,431. 56,355,238. -7,552,738. End of Year
or Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Program servic Investment inc Other revenue Grants and sim Benefits paid t Salaries, other Professional fu Total fundraisi Other expenses Revenue less e Total assets (P	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) illar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10) indraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) ▶ 7,074,71 s (Part IX, column (A), lines 11a-11d, 11f-24e) . Add lines 13-17 (must equal Part IX, column (A), line 25) xpenses. Subtract line 18 from line 12 art X, line 16)	L7. Beg	37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578. 0. 8,583,217. 511,484. 6,070,912. 38,402,191. 10,223,058. inning of Current Year 375,310,970.	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0. 9,007,145. 270,000. 4,919,431. 56,355,238. -7,552,738. End of Year 390,819,768.
or Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Program servic Investment inc Other revenue Grants and sim Benefits paid t Salaries, other Professional fu Total fundraisi Other expenses Revenue less of Total assets (P Total liabilities	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) iilar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10) ndraising fees (Part IX, column (A), line 11e) g expenses (Part IX, column (D), line 25) ▶ 7,074,71 s (Part IX, column (A), lines 11a-11d, 11f-24e) 	L7. Beg	37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578. 0. 8,583,217. 511,484. 6,070,912. 38,402,191. 10,223,058. inning of Current Year 375,310,970. 25,306,579.	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0. 9,007,145. 270,000. 4,919,431. 56,355,238. -7,552,738. End of Year
Uet Assets or Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Program servic Investment inc Other revenue Grants and sim Benefits paid t Salaries, other Professional fu Total fundraisi Other expenses Revenue less of Total assets (P Total liabilities Net assets of f	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) iilar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10) indraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) ▶ 7,074,71 s (Part IX, column (A), lines 11a-11d, 11f-24e) . Add lines 13-17 (must equal Part IX, column (A), line 25) xpenses. Subtract line 18 from line 12 art X, line 16) (Part X, line 26) und balances. Subtract line 21 from line 20	L7. Beg	37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578. 0. 8,583,217. 511,484. 6,070,912. 38,402,191. 10,223,058. inning of Current Year 375,310,970.	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0. 9,007,145. 270,000. 4,919,431. 56,355,238. -7,552,738. End of Year 390,819,768. 36,620,885.
Ust Assets or Expenses	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 rt II	Program servic Investment inc Other revenue Grants and sim Benefits paid t Salaries, other Professional fu Total fundraisii Other expenses Revenue less of Total assets (P Total liabilities Net assets or f Signature	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) illar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10) ndraising fees (Part IX, column (A), line 11e) g expenses (Part IX, column (D), line 25) ▶ 7,074,71 s (Part IX, column (A), lines 11a-11d, 11f-24e) . Add lines 13-17 (must equal Part IX, column (A), line 25) xpenses. Subtract line 18 from line 12 art X, line 16) (Part X, line 26) und balances. Subtract line 21 from line 20 Block		37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578. 0. 8,583,217. 511,484. 6,070,912. 38,402,191. 10,223,058. inning of Current Year 375,310,970. 25,306,579. 350,004,391.	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0. 9,007,145. 270,000. 4,919,431. 56,355,238. -7,552,738. End of Year 390,819,768. 36,620,885. 354,198,883.
Der Der Assets or Expenses	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 rt II 22 rt Fenal	Program service Investment inco Other revenue Grants and sim Benefits paid t Salaries, other Professional fu Total fundraisii Other expenses Revenue less c Total assets (P Total liabilities Net assets or fin Signature Ities of perjury, I	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) iilar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10) indraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) ▶ 7,074,71 s (Part IX, column (A), lines 11a-11d, 11f-24e) . Add lines 13-17 (must equal Part IX, column (A), line 25) xpenses. Subtract line 18 from line 12 art X, line 16) (Part X, line 26) und balances. Subtract line 21 from line 20		37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578. 0. 8,583,217. 511,484. 6,070,912. 38,402,191. 10,223,058. inning of Current Year 375,310,970. 25,306,579. 350,004,391.	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0. 9,007,145. 270,000. 4,919,431. 56,355,238. -7,552,738. End of Year 390,819,768. 36,620,885. 354,198,883.
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Der Und Assets or Expenses	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 rt II correc	Program service Investment inco Other revenue Grants and sim Benefits paid t Salaries, other Professional fu Total fundraisii Other expenses Revenue less c Total assets (P Total liabilities Net assets or fin Signature Ities of perjury, I	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) illar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10) ndraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) ▶ 7,074,71 s (Part IX, column (A), lines 11a-11d, 11f-24e) . Add lines 13-17 (must equal Part IX, column (A), line 25) xpenses. Subtract line 18 from line 12 art X, line 16) (Part X, line 26) Ind balances. Subtract line 21 from line 20 Block declare that I have examined this return, including accompanying schedules ar Declaration of preparer (other than officer) is pased on all information of which		37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578. 0. 8,583,217. 511,484. 6,070,912. 38,402,191. 10,223,058. inning of Current Year 375,310,970. 25,306,579. 350,004,391.	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0. 9,007,145. 270,000. 4,919,431. 56,355,238. -7,552,738. End of Year 390,819,768. 36,620,885. 354,198,883.
ap C And Assets or Expenses	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 rt II 22 rt II correc	Program service Investment inco Other revenue Grants and sim Benefits paid t Salaries, other Professional fu Total fundraisin Other expenses Revenue less of Total assets or ff Signature Ities of perjury, I st, and complete.	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) add lines 8 through 11 (must equal Part VIII, column (A), line 12) add lines 8 through 11 (must equal Part VIII, column (A), line 12) or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10) ndraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) ▶ 7, 074, 71 s (Part IX, column (A), lines 11a-11d, 11f-24e) Add lines 13-17 (must equal Part IX, column (A), line 25) xpenses. Subtract line 18 from line 12 art X, line 16) (Part X, line 26) and balances. Subtract line 21 from line 20 Block declare that I have examined this return, including accompanying schedules ar Declaration of preparer (other than officer) is pased on all information of which of officer ANZINO, VP/CFO		37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578. 0. 8,583,217. 511,484. 6,070,912. 38,402,191. 10,223,058. inning of Current Year 375,310,970. 25,306,579. 350,004,391. its, and to the best of my as any knowledge. 8/28	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0. 9,007,145. 270,000. 4,919,431. 56,355,238. -7,552,738. End of Year 390,819,768. 36,620,885. 354,198,883.
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Jan Contraction Sector of Expenses	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 rt II 22 rt II r pena correc	Program servic Investment inc Other revenue Grants and sim Benefits paid t Salaries, other Professional fu Total fundraisi Other expenses Revenue less of Total assets (P Total liabilities Net assets or ff Signature Ities of perjury, I st, and complete. JOHN FF Type or pp Print/Type prepu	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) illar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10) indraising fees (Part IX, column (D), line 25) ▶ 7, 074, 71 s (Part IX, column (A), lines 11a-11d, 11f-24e) . Add lines 13-17 (must equal Part IX, column (A), line 25) xpenses. Subtract line 18 from line 12 art X, line 16) (Part X, line 26) und balances. Subtract line 21 from line 20 Block declare that 1 have examined his return including accompanying schedules ar Declaration of preparer (other than officer) is pased on all information of which of officer ANZINO, VP/CFO int name and title rer's name Preparer's signature		37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578. 0. 8,583,217. 511,484. 6,070,912. 38,402,191. 10,223,058. inning of Current Year 375,310,970. 25,306,579. 350,004,391. its, and to the best of my as any knowledge. 8/28	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0. 9,007,145. 270,000. 4,919,431. 56,355,238. -7,552,738. End of Year 390,819,768. 36,620,885. 354,198,883.
Jan Contraction Sector of Expenses	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 rt II correc	Program servic Investment inc Other revenue Grants and sim Benefits paid t Salaries, other Professional fu Total fundraisi Other expenses Revenue less of Total assets (P Total liabilities Net assets or ff Signature Ities of perjury, I st, and complete. JOHN FF Type or pp Print/Type prepr JULIUS C. G	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) iilar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10) indraising fees (Part IX, column (D), line 25) ▶ 7, 074, 71 s (Part IX, column (A), lines 11a-11d, 11f-24e) . Add lines 13-17 (must equal Part IX, column (A), line 25) xpenses. Subtract line 18 from line 12 art X, line 16) (Part X, line 26) und balances. Subtract line 21 from line 20 Block declare that 1 have examined his return, including accompanying schedules ar Declaration of preparer (other than officer) is pased on all information of which of officer ANZ INO, VP/CFO int name and title arer's name REEN, CPA		37, 668, 915. 2, 644, 213. 6, 843, 241. 1, 468, 880. 48, 625, 249. 23, 236, 578. 0. 8, 583, 217. 511, 484. 6, 070, 912. 38, 402, 191. 10, 223, 058. inning of Current Year 375, 310, 970. 25, 306, 579. 350, 004, 391. its, and to the best of my as any knowledge. 8/28 Date	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0. 9,007,145. 270,000. 4,919,431. 56,355,238. -7,552,738. End of Year 390,819,768. 36,620,885. 354,198,883. knowledge and belief, it is // ``
Part A State of Contract A State A State of Contract A State A State A State A State A	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 rt II r penal correc	Program servic Investment inc Other revenue Grants and sim Benefits paid t Salaries, other Professional fu Total fundraisi Other expenses Revenue less of Total assets (P Total liabilities Net assets or ff Signature Ities of perjury, I st, and complete.	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) add lines 8 through 11 (must equal Part VIII, column (A), line 12) illar amounts paid (Part IX, column (A), lines 1-3) o or for members (Part IX, column (A), line 4) compensation, employee benefits (Part IX, column (A), lines 5-10) indraising fees (Part IX, column (D), line 25) ▶ 7, 074, 71 s (Part IX, column (A), lines 11a-11d, 11f-24e) . Add lines 13-17 (must equal Part IX, column (A), line 25) xpenses. Subtract line 18 from line 12 art X, line 16) (Part X, line 26) und balances. Subtract line 21 from line 20 Block declare that 1 have examined his return including accompanying schedules ar Declaration of preparer (other than officer) is pased on all information of which of officer ANZINO, VP/CFO int name and title rer's name Preparer's signature		37,668,915. 2,644,213. 6,843,241. 1,468,880. 48,625,249. 23,236,578. 0. 8,583,217. 511,484. 6,070,912. 38,402,191. 10,223,058. inning of Current Year 375,310,970. 25,306,579. 350,004,391. its, and to the best of my as any knowledge. Date Check if	39,550,040. 1,283,372. 6,464,808. 1,504,280. 48,802,500. 42,158,662. 0. 9,007,145. 270,000. 4,919,431. 56,355,238. -7,552,738. End of Year 390,819,768. 36,620,885. 354,198,883. knowledge and belief, it is

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

 632001
 11-11-16
 LHA
 For Paperwork Reduction Act Notice, see the separate instructions.

PHILADELPHIA, PA 19103-7341

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X Yes No Form **990** (2016)

Phone no.215.972.0701

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	ASSOCIATION OF THE GRADUATES OF THE		
Form	n 990 (2016) UNITED STATES MILITARY ACADEMY	14-1260763	Page 2
	rt III Statement of Program Service Accomplishments		, ugo
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		·····
-	THE ASSOCIATION IS AN ORGANIZATION DEDICATED TO FURTHERING THE IDEALS		
	AND PROMOTING THE WELFARE OF THE UNITED STATES MILITARY ACADEMY AND		
	SERVING ITS GRADUATES.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
2			s X No
	prior Form 990 or 990-EZ?	re	
•	If "Yes," describe these new services on Schedule O.		V
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Ye	es 🔼 No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expense	S.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe	ers, the total expenses,	and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$42,332,392. including grants of \$42,158,662.) (Reve	nue \$)
	EDUCATIONAL AND HISTORICAL: PROVIDES, TO THE UNITED STATES MILITARY		
	ACADEMY, PRIVATE FINANCIAL SUPPORT FROM INDIVIDUALS, FOUNDATIONS AND		
	CORPORATIONS FOR THE "MARGIN OF EXCELLENCE". THE MARGIN OF EXCELLENCE		
	PROVIDES AN ARRAY OF DIVERSE OPPORTUNITIES THAT ADD RICHNESS TO THE		
	CADET EXPERIENCE AND BETTER PREPARES THEM TO BE THE BROAD-MINDED,		
	ETHICAL LEADERS UPON WHOM WE ALL DEPEND. EDUCATIONAL AND HISTORICAL		
	ALSO COMPRISES ACTIVITIES FOR THE DISSEMINATION OF INFORMATION ON THE		
	HISTORY, OBJECTIVES AND METHODS OF THE UNITED STATES MILITARY ACADEMY		
	TO INCLUDE THE ENCOURAGEMENT OF THE STUDY OF MILITARY SCIENCE AND		
	LEADERSHIP AND TO ENHANCE ITS IMAGE. ALSO INCLUDES CONSTRUCTION AND		
	MAINTENANCE SERVICES FOR STATE-OF-THE-ART FACILITIES TO SUPPORT CADET		
	ATHLETICS AND CLUBS AND ENHANCE THE NATIONAL LANDMARK.		
4b		enue\$1,9	34 742)
40	ALUMNI SERVICES: ENCOMPASSES ACTIVITIES AND SERVICES PROVIDED FOR	nue \$)
	GRADUATES INCLUDING SUPPORT TO THE UNITED STATES MILITARY ACADEMY		
	ALUMNI CLASSES AND SOCIETIES, GRADUATE EVENTS, CAREER SERVICES, THE		
	MAINTENANCE OF DETAILED BIOGRAPHICAL AND HISTORICAL RECORDS ON		
	GRADUATES OF THE UNITED STATES MILITARY ACADEMY AND INCLUDES THE		
	OPERATIONS OF THE GIFT SHOP.		
	OPERATIONS OF THE GIFT SHOP.		
4c	(Code:) (Expenses \$1,129,740. including grants of \$0. (Reve	nue \$2	232,439.)
	COMMUNICATIONS: DISSEMINATES INFORMATION ON THE CURRENT AND HISTORICAL		
	ACTIVITIES, OBJECTIVES AND METHODS OF THE UNITED STATES MILITARY		
	ACADEMY TO GRADUATES AND OTHERS THROUGH VARIOUS PUBLICATIONS AND MEDIA		
	TO ENHANCE THE IMAGE OF THE UNITED STATES MILITARY ACADEMY.		
A!	Other pressure convince (Describe in Cohertuite O)		
40	Other program services (Describe in Schedule O.)	1	
-	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 45,582,354.		000 (22.10)

Form	990 (2016) UNITED STATES MILITARY ACADEMY 14-126076	3	Р	age 3
Pa	t 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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
•	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	<u> </u>		
-				x
_	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	_		x
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
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,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u>x</u>
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	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, 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,			
u		11a	х	
h	Part VI			<u> </u>
U		11b	х	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	├──
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			1
	If "Yes," and if 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		X
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			1
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? 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 other assistance to			<u> </u>
10		16	х	1
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV			├──
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		v	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X	├──
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G. Part III	19		X

Form **990** (2016)

	ASSOCIATION OF THE GRADUATES OF THE			
	990 (2016) UNITED STATES MILITARY ACADEMY 14-12	50763	Р	_{age} 4
Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
		23	х	
24-2	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	25		
240				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		x
	Schedule K. If "No", go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction 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? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
_		00-		х
	A current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	<u>28a</u>		x
	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>			
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV			<u>x</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	Х	<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?			x
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
2	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
26	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization			
36				x
~-	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			Ţ
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
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	X 990	
		— • • • • • •	uuri	

Form **990** (2016)

Form	990 (2016) UNITED STATES MILITARY ACADEMY		14-126076	3	Р	age 5
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	53			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable	gaming			
	(gambling) winnings to prize winners?			1c	х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	126			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?		2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction					
3a				3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other					
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)'	?	4a		X
b	If "Yes," enter the name of the foreign country:					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?		5b		X
с	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	e organiz	zation solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or g	ifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices pro	vided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Х	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as requir	ed			
	to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 8899	as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file a	a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	d by the				
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		<u> </u>
b				9b		-
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1 1		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			40		
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c				X
				14a		<u> </u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedul	eO		14b		

Form	990	(2016)
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ASSOCIATION	OF	THE	GRADUATES	OF	THE

Form	990 (2016) UNITED STATES MILITARY ACADEMY 14-126076	3	P	age 6
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	No" re		
	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 or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year 1a17			
	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.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 17			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
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	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	-	v	
a	The governing body?	<u>8a</u>	X X	
b	Each committee with authority to act on behalf of the governing body?	8b	<u> </u>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9		
	This section B requests information about policies not required by the internal Revenue Code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
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	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			77
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	104		
Sec	exempt status with respect to such arrangements?	16b		
17	List the states with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID			
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) as	ailable	<u>,</u>	
10	for public inspection. Indicate how you made these available. Check all that apply.	anabit	•	
	X Own website X 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	financi	al	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	JOHN FRANZINO, VP/CFO - 845-446-1500			

BUILDING 698, HERBERT HALL, MILLS RD, WEST POINT, NY 10996

Form 990 (14-1260763	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Co	ompensated	
	Employees, and Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Comple	te 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."

ASSOCIATION OF THE GRADUATES OF THE

• 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 organization compensated any current officer, director, or trustee.

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	(1)-		Pos	itior			Reportable	Reportable	Estimated
	hours per	box	, unle	ss pei	rson i	than o s both	n an	compensation	compensation	amount of
	week		cer ar T	nd a d	irecto	or/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dir	e.			ated		organization	(W-2/1099-MISC)	from the
	related	Istee	truste		Ð	bens		(W-2/1099-MISC)		organization
	organizations	ual tru	ional		ploye	t com				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) LARRY R. JORDAN	12.00			0	$ \ge $	Ξω	<u> </u>			
CHAIRMAN		х		x				٥.	0.	0.
(2) ELLEN W. HOULIHAN	12.00									
VICE CHAIRMAN		х		х				٥.	0.	0.
(3) STANLEY J. SHIPLEY	7.00									
DIRECTOR		Х						0.	0.	0.
(4) JEFFREY A. SORENSON	7.00									
DIRECTOR		Х						0.	0.	0.
(5) CLYDE A. SELLECK	7.00									
DIRECTOR		Х						0.	0.	0.
(6) DARCY G. ANDERSON	7.00									
DIRECTOR		Х						0.	0.	0.
(7) HERMAN E. BULLS	7.00									
DIRECTOR		Х						0.	0.	0.
(8) JOHN M. ROBB	7.00									
DIRECTOR		Х						0.	0.	0.
(9) JOSEPH E. DEFRANCISCO	7.00									
DIRECTOR		Х						0.	0.	0.
(10) GEORGE H. GILMORE, JR.	7.00									
DIRECTOR		Х						0.	0.	0.
(11) JAMES A. HOFFMAN	7.00									
DIRECTOR		Х						0.	0.	0.
(12) WILLIAM D. ROGERS	7.00									
DIRECTOR		Х						0.	0.	0.
(13) DEIRDRE P. DIXON	7.00									
DIRECTOR		Х						0.	0.	0.
(14) JOHN H. NORTHROP	7.00									
DIRECTOR		X						0.	0.	0.
(15) KIM M. CAMPBELL	7.00									
DIRECTOR		Х						0.	0.	0.
(16) JAMES Z. WARTSKI	7.00									
DIRECTOR	ļ	Х						0.	0.	0.
(17) CHARLES C. CORRELL	7.00									
DIRECTOR		Х						0.	0.	0.

(B)

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

(C)

(D)

UNITED STATES MILITARY ACADEMY

Name and title 18) ROBERT L. MCCLURE PRESIDENT & CEO (UNTIL 6/30/16) 19) TODD BROWNE PP/COO - PRESIDENT/CEO (AS OF 7/1/16) 20) DARWIN HAINES VICE PRESIDENT & COO (AS OF 12/5/16) 21) CARL MOCCIA VICE PRESIDENT & CFO 22) JAMES JOHNSTON CORPORATE SECRETARY 23) KRISTIN SORENSON VICE PRESIDENT OF DEVELOPMENT	Average hours per week (list any hours for related	box offic	not cl , unles cer an	heck ss per	rson i	than c s both	an	Reportable compensation	Reportable compensation		stimate nount	
PRESIDENT & CEO (UNTIL 6/30/16) 19) TODD BROWNE P/COO - PRESIDENT/CEO (AS OF 7/1/16) 20) DARWIN HAINES VICE PRESIDENT & COO (AS OF 12/5/16) 21) CARL MOCCIA VICE PRESIDENT & CFO 22) JAMES JOHNSTON CORPORATE SECRETARY 23) KRISTIN SORENSON VICE PRESIDENT OF DEVELOPMENT	hours for	irector					,	from	from related	1	other	01
PRESIDENT & CEO (UNTIL 6/30/16) 19) TODD BROWNE P/COO - PRESIDENT/CEO (AS OF 7/1/16) 20) DARWIN HAINES VICE PRESIDENT & COO (AS OF 12/5/16) 21) CARL MOCCIA VICE PRESIDENT & CFO 22) JAMES JOHNSTON CORPORATE SECRETARY 23) KRISTIN SORENSON VICE PRESIDENT OF DEVELOPMENT	organizations below line)	ndividual trustee or director	Institutional trustee	Officer	Key em ployee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	fr org and	pensa rom the janizati d relate anizatio	e tion ted
PRESIDENT & CEO (UNTIL 6/30/16) 19) TODD BROWNE P/COO - PRESIDENT/CEO (AS OF 7/1/16) 20) DARWIN HAINES VICE PRESIDENT & COO (AS OF 12/5/16) 21) CARL MOCCIA VICE PRESIDENT & CFO 22) JAMES JOHNSTON CORPORATE SECRETARY 23) KRISTIN SORENSON VICE PRESIDENT OF DEVELOPMENT	40.00	-	드	9	Ϋ́	er Hi	2					
19) TODD BROWNE P/COO - PRESIDENT/CEO (AS OF 7/1/16 20) DARWIN HAINES VICE PRESIDENT & COO (AS OF 12/5/16) 21) CARL MOCCIA VICE PRESIDENT & CFO 22) JAMES JOHNSTON CORPORATE SECRETARY 23) KRISTIN SORENSON VICE PRESIDENT OF DEVELOPMENT	10.00			x				248,995.	0.		10	993.
PP/COO - PRESIDENT/CEO (AS OF 7/1/16) 20) DARWIN HAINES YICE PRESIDENT & COO (AS OF 12/5/16) 21) CARL MOCCIA YICE PRESIDENT & CFO 22) JAMES JOHNSTON CORPORATE SECRETARY 23) KRISTIN SORENSON YICE PRESIDENT OF DEVELOPMENT	40.00								••		,	
20) DARWIN HAINES VICE PRESIDENT & COO (AS OF 12/5/16) 21) CARL MOCCIA VICE PRESIDENT & CFO 22) JAMES JOHNSTON CORPORATE SECRETARY 23) KRISTIN SORENSON VICE PRESIDENT OF DEVELOPMENT				x				244,667.	0.		20,	075.
21) CARL MOCCIA VICE PRESIDENT & CFO 22) JAMES JOHNSTON CORPORATE SECRETARY 23) KRISTIN SORENSON VICE PRESIDENT OF DEVELOPMENT	40.00							,				-
VICE PRESIDENT & CFO 22) JAMES JOHNSTON CORPORATE SECRETARY 23) KRISTIN SORENSON VICE PRESIDENT OF DEVELOPMENT				x				7,703.	0.			Ο.
22) JAMES JOHNSTON CORPORATE SECRETARY 23) KRISTIN SORENSON VICE PRESIDENT OF DEVELOPMENT	40.00											
CORPORATE SECRETARY 23) KRISTIN SORENSON VICE PRESIDENT OF DEVELOPMENT				х				197,380.	0.		27,	809.
23) KRISTIN SORENSON VICE PRESIDENT OF DEVELOPMENT	40.00											
VICE PRESIDENT OF DEVELOPMENT				х				140,112.	0.		11,	515.
	40.00											
					Х			216,818.	0.		24,	805.
24) EUGENE CORRIGAN	40.00											
RESIDENT/COO WP ATHLETICS LLC						х		300,000.	0.			٥.
25) MICHAEL WHITE	40.00											
NAJOR GIFT OFFICER						х		144,848.	0.		23,	093.
26) RICHARD HUH	40.00											
VICE PRESIDENT, ALUMNI SUPPORT						х		126,829.	0.		23,	261.
1b Sub-total							▶	1,627,352.	0.	<u> </u>	141,	
c Total from continuation sheets to Part V							▶	241,877.	0.	<u> </u>	,	603.
d Total (add lines 1b and 1c)								1,869,229.	0.		162,	154.
2 Total number of individuals (including but r compensation from the organization	not limited to th	ose	liste	d ab	ove) wh	o reo	ceived more than \$100,0	000 of reportable			16
* *											Yes	No
3 Did the organization list any former officer	, director, or tru	ustee	e, ke	y en	nplo	yee,	or h	ighest compensated em	ployee on			
line 1a? If "Yes," complete Schedule J for s	such individual									3		х
4 For any individual listed on line 1a, is the s												

rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors

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Form 990 (2016)

(A)

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services

(A) Name and business address	(B) Description of services	(C) Compensation
THE PIKE COMPANY		
ONE CIRCLE STREET, ROCHESTER, NY 14607	CONSTRUCTION	8,110,991.
CONSIGLI CONSTRUCTION, NY LLC, 199 WEST		
ROAD, SUITE 100, PLEASANT VALLEY, NY 12569	CONSTRUCTION	3,001,757.
STEVE FELDMAN DESIGN, LLC, 4915 ST. ELMO		
AVE, SUITE 304, BETHESDA , MD 20814	DESIGN DEVELOPMENT	799,503.
WHISPERING PINES DEVELOPMENT CORP		
PO BOX 716, VAILS GATE, NY 12584	CONSTRUCTION	774,378.
BLACKBAUD, INC.	SOFTWARE IMPLEMENTATION,	
PO BOX 930256, ATLANTA , GA 31193	CONSULTING	475,092.
2 Total number of independent contractors (including but not limited	to those listed above) who received more than	
\$100,000 of compensation from the organization	23	

SEE PART VII, SECTION A CONTINUATION SHEETS

Page 8

(F)

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14-1260763

(E)

ASSOCIATION	OF	THE	GRADUATES	OF	THE
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ASSOCIATION (Form 990 UNITED STATES					THE				14-12607	163
					ad L	liab	oot (Componented Employe		05
			yee			iighe	est			(E)
(A) Name and title	(B) Average hours per	(cł	heck	Pos	C) ition that		ly)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key em ployee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(27) ELIZABETH A. BARRETT	40.00							101 (72)		0 744
VICE PRESIDENT OF COMMUNICATIONS (28) LISA BENITEZ	40.00					X		121,673.	0.	8,744.
SENIOR DIRECTOR ANNUAL GIVING	40.00					x		120,204.	0.	11,859.
						~		120,204.		11,000.
Total to Part VII, Section A, line 1c	I	I	<u>I</u>	I	<u> </u>	L		241,877.		20,603.

		<u>20</u> 10/	STATES MILIT.				14-126076	3 Page
art	VII	Statement of Rever	nue					
_		Check if Schedule O cont	ains a response	or note to any line				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue exclude from tax under sections 512 - 514
ts	1 a	Federated campaigns	1a					
and Other Similar Amounts	b	Membership dues	1b					
Am	с	Fundraising events	1c					
ar I	d	Related organizations	1d					
imi	е	Government grants (contribut	ions) 1e					
r S	f	All other contributions, gifts, gran	its, and					
Othe		similar amounts not included abo	ve 1f	39,550,040.				
p	g	Noncash contributions included in lines		6,502,950.	20 550 040			
ar	h	Total. Add lines 1a-1f		>	39,550,040.			
	_	ALUMNI SERVICES		Business Code 561520	585,531.	559,726.	25,805.	
		PUBLICATION SALES		511190	232,439.	101,713.	130,726.	
ne	b c	ALUMNI EVENTS		900099	192,013.	192,013.	130,720.	
ven	C d		REDIT CARD PROCESSING			190,889.		
Revenue	u A	SPONSORSHIPS		900099 900099	190,889. 82,500.	82,500.		
	f	All other program service reve	enue		-,			
		Total. Add lines 2a-2f			1,283,372.			
	3	Investment income (including						
		other similar amounts)			4,196,312.		206,847.	3,989,46
	4	Income from investment of tax						
	5	Royalties	<u></u>	►	620,472.			620,47
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
	С	Rental income or (loss)						
	d			🕨				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	139,410,914.					
	b	Less: cost or other basis	127 142 410					
	_	and sales expenses	137,142,418.					
		Gain or (loss)			2,268,496.			2,268,49
		Net gain or (loss) Gross income from fundraisin			2,200,490.			2,200,45
	0 a	including \$	of					
		contributions reported on line						
D	L	Part IV, line 18 Less: direct expenses						
5		Net income or (loss) from func						
		Gross income from gaming ac	-					
	<i>-</i> u	Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gam						
1		Gross sales of inventory, less	•					
		and allowances						
	b	Less: cost of goods sold		976,429.				
	с	Net income or (loss) from sale	s of inventory	►	883,808.	883,808.		
		Miscellaneous Revenu	e	Business Code				
1	1 a							
	b							
	С							
	d	All other revenue		►				
	•							

Form 990 (2016) UNITED STATES MILIT.
Part IX Statement of Functional Expenses UNITED STATES MILITARY ACADEMY

_	Check if Schedule O contains a respons	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	41,397,002.	41,397,002.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	658,177.	658,177.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	103,483.	103,483.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1,166,125.		650,476.	515,649
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	6,407,603.	1,778,228.	1,242,128.	3,387,247
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	305,090.	77,791.	72,655.	154,644
9	Other employee benefits	526,163.	136,241.	92,644.	297,278
0	Payroll taxes	602,164.	158,648.	157,049.	286,467
1	Fees for services (non-employees):				
а	Management	10,300.			10,300
b		86,420.		67,629.	18,791
с		49,020.		49,020.	
d					
е		270,000.			270,000
f	Investment management fees	240,744.		240,744.	
g					
	column (A) amount, list line 11g expenses on Sch 0.)	280,783.	20,825.	175,297.	84,661
2	Advertising and promotion	6,753.	3,085.	375.	3,293
3	Office expenses	1,171,155.	411,540.	155,139.	604,476
4	Information technology	511,818.	72,523.	356,548.	82,747
5	Royalties				
6	Occupancy	104,387.	20,509.	83,878.	
7	Travel	114,439.	27,447.	86,992.	
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	1,024,272.	214,356.	118,078.	691,838
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	549,052.		549,052.	
3	Insurance	63,576.		63,576.	
4	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 0.)				
а	DONOR CULTIVATION	399,831.	3,069.	32,196.	364,566
a b	MANUFACTURING & DISTRIB	137,226.	137,226.	· - , · ·	
c	REIMBURSED COSTS	71,400.	71,400.		
d	STATE UNRELATED BUSINES	250.	,	250.	
	All other expenses	98,005.	290,804.	-495,559.	302,760
е 5	Total functional expenses. Add lines 1 through 24e	56,355,238.	45,582,354.	3,698,167.	7,074,717
	Joint costs. Complete this line only if the organization				,,,,,,,,,,
6					
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

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		2016) UNITED STATES MILITA Balance Sheet	RY ACA	DEMY		14-	1260763 Page 1
ai t 7	^	Check if Schedule O contains a response or no	te to anv	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			7,412,821.	1	5,173,882
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			22,519,737.	3	20,160,863
	4	Accounts receivable, net			19,833.	4	24,963
		Loans and other receivables from current and for					
		trustees, key employees, and highest compensation					
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqual					
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sec					
		employees' beneficiary organizations (see instr).		6			
	7	Notes and loans receivable, net				7	
2 8		Inventories for sale or use			387,857.	8	406,660
	9	B			184,366.	9	97,422
		Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	13,121,240.			
	b	Less: accumulated depreciation		5,911,940.	7,247,946.	10c	7,209,300
1		Investments - publicly traded securities	257,893,378.	11	284,039,885		
12		Investments - other securities. See Part IV, line	52,514,098.	12	52,765,298		
1:		Investments - program-related. See Part IV, line	, ,	13	, ,		
14		Intangible assets				14	
1		Other assets. See Part IV, line 11			27,130,934.	15	20,941,495
16		Total assets. Add lines 1 through 15 (must equ			375,310,970.	16	390,819,768
17		Accounts payable and accrued expenses		1,892,719.	17	2,523,542	
18		Grants payable			12,729,369.	18	22,464,15
19		Deferred revenue			3,417,416.	19	4,202,024
20		Tax-exempt bond liabilities				20	
2		Escrow or custodial account liability. Complete				21	
		Loans and other payables to current and former					
	_	key employees, highest compensated employee					
			-			22	
<u>ة</u> 2	3	Secured mortgages and notes payable to unrela				23	
24		Unsecured notes and loans payable to unrelate		· · · · · · · · · · · · · · · · · · ·		24	
2		Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on line					
		Schedule D			7,267,075.	25	7,431,163
26	6			Γ	25,306,579.	26	36,620,885
		Organizations that follow SFAS 117 (ASC 958	3), check	here 🕨 🗴 and			
,		complete lines 27 through 29, and lines 33 ar					
2 27	7	Unrestricted net assets			29,451,514.	27	36,158,947
28	8				164,452,161.	28	147,520,914
29	9	Permanently restricted net assets	156,100,716.	29	170,519,022		
		Organizations that do not follow SFAS 117 (A					
5		and complete lines 30 through 34.	-				
2 30	0	Capital stock or trust principal, or current funds				30	
8 3.	1	Paid-in or capital surplus, or land, building, or e				31	
32	2	Retained earnings, endowment, accumulated in				32	
3		Total net assets or fund balances			350,004,391.	33	354,198,883
1.0	4				375,310,970.	34	390,819,768

Form 990 (2016)

Form 300 (2016) UNITED STATES MILITARY ACADEMY 14-1260763 Page 12 Part XI Reconciliation of Net Assets X Check if Schedule O contains a response or note to any line in this Part XI X X 1 Total revenue (must equal Part XII, column (A), line 12) 1 48, 802, 500, 2 56, 355, 238, 3 2 Total revenue (must equal Part X, Column (A), line 25) 3 3 7, 552, 738, 3 3 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 350, 004, 331, 4 4 Hassets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 350, 004, 331, 5 5 Donated services and use of facilities 6 7 7 7 7 8 9 Other changes in net assets or fund balances (explain in Schedule O) 9 1,101,247, 10 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 354, 198, 883. Part XIII Financial Statements and Reporting 7 7 7 7 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 7 7		ASSOCIATION OF THE GRADUATES OF THE							
Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI X 1 Total expenses (must equal Part VIII, column (A), line 22) 1 48,802,500. 2 56,255,238. 2 56,255,238. 3 Revenue less expenses. Subtract line 2 from line 1 3 3 3 7.7,552,738. 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 350,004,331. 5 Net unrealized gains (losses) on investments 5 10,645,983. 6 Other changes in net assets or fund balances (explain in Schedule O) 9 1,101,247. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 354,198,883. Part XII Financial Statements and Reporting	Form	990 (2016) UNITED STATES MILITARY ACADEMY	14-12607	63	Pa	_{ge} 12			
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c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c X If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X 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 V		consolidated basis, or both:							
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. 3a X 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit 3a X 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 X									
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	С								
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit 3a X Act and OMB Circular A-133? 3a X 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 3b		review, or compilation of its financial statements and selection of an independent accountant?		2c	X				
Act and OMB Circular A-133? 3a X 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 X		If the organization changed either its oversight process or selection process during the tax year, explain in Scher	dule O.						
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits. or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit						
or audits, explain why in Schedule O and describe any steps taken to undergo such audits		Act and OMB Circular A-133?		3a		X			
	b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit						
		or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b					

Form **990** (2016)

SC	HEC	DULE A		Dublic Che	vrity Statua an		lie Gr	unnort		OMB No. 1545-0047			
(Fo	rm 99	90 or 990-EZ)			arity Status an Inization is a section 501					2016			
				• •	947(a)(1) nonexempt cha			or a section		2010			
		of the Treasury nue Service		►	Attach to Form 990 or F	orm 990-	EZ.			Open to Public			
					(Form 990 or 990-EZ) and i	ts instructi	ons is at N	/ww.irs.gov/fc	r	Inspection identification number			
Nam		the organization		D STATES MILITA	RADUATES OF THE					14-1260763			
Pa	rt I	Reason			(All organizations must co	omnlete th	is nart) Se	e instruction		14-1200705			
					(For lines 1 through 12, c								
1			•		ion of churches described			1)(A)(i)					
2	\square				(Attach Schedule E (Forn			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
3	\square				anization described in s			ii).					
4		•	•		onjunction with a hospital			•)(iii). Enter	the hospital's name,			
		city, and state	e:										
5		An organizati	on operated fo	or the benefit of a co	ollege or university owned	l or operat	ed by a go	overnmental u	nit describe	ed in			
		section 170	(b)(1)(A)(iv). ((Complete Part II.)									
6													
7	X	0		•	antial part of its support fi	rom a gove	ernmental	unit or from th	ne general j	oublic described in			
~		•		Complete Part II.)									
8 9				•)(1)(A)(vi). (Complete Par d in section 170(b)(1)(A)(,	od in coniu	unction with a	land grant	collogo			
9		•	•	•	culture (see instructions).				•	•			
		university:		grant concyc or agri			name, eny	, and state of	the conege				
10			on that norma	ally receives: (1) mor	e than 33 1/3% of its sup	port from a	contributio	ns, membersl	nip fees, an	d gross receipts from			
					ect to certain exceptions,								
		income and u	inrelated busii	ness taxable income	e (less section 511 tax) fro	om busines	sses acqui	red by the org	anization a	after June 30, 1975.			
		See section	509(a)(2). (Co	mplete Part III.)									
11	Щ	An organizati	on organized	and operated exclus	sively to test for public sa	fety. See	section 50	09(a)(4).					
12		-	-	-	sively for the benefit of, to	-			•				
				-	ed in section 509(a)(1) o					Check the box in			
		-	•	• •	of supporting organization		-		-	aivina			
а					supervised, or controlled egularly appoint or elect a	• • • •	-						
			-	complete Part IV, S		i majority c				pporting			
b				•	d or controlled in connect	tion with it	s supporte	ed organizatio	n(s), by hav	ving			
					ganization vested in the s								
		organizatio	n(s). You mus	st complete Part IV	, Sections A and C.								
с		Type III fur	nctionally inte	egrated. A supporti	ng organization operated	in connect	tion with, a	and functiona	lly integrate	ed with,			
			•	. , .	s). You must complete I								
d			-		porting organization oper				•	. ,			
			,	0 0	ization generally must sat	,		•	l an attentiv	/eness			
•		-			mplete Part IV, Sections written determination fro								
е			0		onally integrated supporti			турет, туре	п, туре п				
f	Ente	er the number (-										
g			• •	n about the support									
		(i) Name of suppo	orted	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the organized (iv) is the organized (iv) (iv) is the organized (iv) (iv) (iv) (iv) (iv) (iv) (iv) (iv)	anization listed ing document?	(v) Amount o	-	(vi) Amount of other			
		organization			above (see instructions))	Yes	No	support (see in	nstructions)	support (see instructions)			
_													
<u>Tota</u>	I												

ASSOCIATION OF	THE	GRADUATES	OF	THE
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Schedule A (Form 990 or 990-EZ) 2016 UNITED STATES MILITARY ACADEMY

Part II

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

fails to qualify under the tests listed below, please complete Part III.) Section A Public Support

Se	ction A. Public Support												
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total						
	Gifts, grants, contributions, and												
	membership fees received. (Do not												
	include any "unusual grants.")	47,719,258.	42,981,943.	40,673,658.	37,668,915.	39,550,040.	208,593,814.						
2	Tax revenues levied for the organ-												
	ization's benefit and either paid to												
	or expended on its behalf												
3	The value of services or facilities												
	furnished by a governmental unit to												
	the organization without charge												
4	Total. Add lines 1 through 3	47,719,258.	42,981,943.	40,673,658.	37,668,915.	39,550,040.	208,593,814.						
5	The portion of total contributions		· ·	· ·									
Ū	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)						9,988,702.						
6	····												
	6 Public support. Subtract line 5 from line 4. 198,605,112. Section B. Total Support 198,605,112.												
	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total						
	Amounts from line 4	47,719,258.	42,981,943.	40,673,658.	37,668,915.	39,550,040.	208,593,814.						
	Gross income from interest,												
0	dividends, payments received on												
	securities loans, rents, royalties												
	and income from similar sources	3,372,319.	3,287,146.	3,447,104.	5,246,190.	4,609,937.	19,962,696.						
9	Net income from unrelated business	5,572,515.	5,207,210.	5,117,101.	3,210,190.	1,005,557.	13,302,030.						
9													
	activities, whether or not the			293,203.	111,870.	174,160.	579,233.						
40	business is regularly carried on			233,203.	111,070.	1/4,100.	375,233.						
10	Other income. Do not include gain												
	or loss from the sale of capital												
	assets (Explain in Part VI.)						220 125 742						
	Total support. Add lines 7 through 10		```				229,135,743.						
	Gross receipts from related activities,	•	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				16,759,664.						
13	First five years. If the Form 990 is for	-			•								
Sec	organization, check this box and stor ction C. Computation of Publi	o here	centade										
				(n)			86,68 %						
	Public support percentage for 2016 (I		•			14	,,,						
15	Public support percentage from 2015					15	/0						
168	33 1/3% support test - 2016. If the c												
	stop here. The organization qualifies		-										
C	33 1/3% support test - 2015. If the c												
	and stop here. The organization qual												
17a	10% -facts-and-circumstances test												
	and if the organization meets the "fac					-							
	meets the "facts-and-circumstances"	-											
b	10% -facts-and-circumstances test	-											
	more, and if the organization meets the						e						
	organization meets the "facts-and-circ		•	-									
18	Private foundation. If the organization	on did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	s ▶						
					Sche	dule A (Form 990	or 990-E7) 2016						

Schedule A (Form 990 or 990-EZ) 2016

14-1260763

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A Public Support

Section A. Fublic Support						
Calendar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	6 (f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, 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 bus- iness under section 513						
4 Tax revenues levied for the organ- ization'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 disgualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	6 (f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 						
 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 						
14 First five years. If the Form 990 is for	the organization'	s first, second, thin	d, fourth or fifth te	- ax year as a section	n 501(c)(3) orc	anization
ale a statistic te sur an at a term te sure	•			2		
Section C. Computation of Public						
15 Public support percentage for 2016 (lin			olumn (f))		15	%
16 Public support percentage from 2015					16	%
Section D. Computation of Invest						/0
17 Investment income percentage for 20			e 13. column (f)		17	%
					18	%
18 Investment income percentage from 2 19a 33 1/3% support tests - 2016. If the			on line 14 and line			
more than 33 1/3%, check this box an						
b 33 1/3% support tests - 2015. If the	organization did r	not check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3	3%, and
line 18 is not more than 33 1/3%, chec	k this box and s	top here. The orga	anization qualifies	as a publicly supp	orted organiza	ation
20 Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	nis box and see ins	structions	

Schedule A (Form 990 or 990-EZ) 2016 UNITED STATES MILITARY ACADEMY

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes No

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and *if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If* "Yes." *complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in Part VI.*
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in Part VI.*
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Schedule A (Form 990 or 990-EZ) 2016 UNITED STATES MILITARY ACADEMY
Part IV Supporting Organizations (continued)

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	Supporting Organizations (continuea)			• •
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations		I	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The organization satisfied the Activities Test. <i>Complete line 2 below.</i>			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instru	ictions		
2	Activities Test. Answer (a) and (b) below.		Yes	No
– a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
-	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
~	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	20		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b		Ja		
U	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
	en to supported organizations in res, describent rait vi the role played by the organization in this regard.	50		

Schedule A (Form 990 or 990-EZ) 2016

	ASSOCIA	ATION	OF	THE	GRAI	DUATES	OF	THE
Schedule A (Form 990 or 990-EZ) 2016	UNITED	STATE	S 1	MILIJ	ARY	ACADE	ſΥ	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 1 2 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 5 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 **3** Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, 4 4 see instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 6 Multiply line 5 by .035 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount **Current Year** 1 Adjusted net income for prior year (from Section A, line 8, Column A) 1 Enter 85% of line 1 2 2 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Enter greater of line 2 or line 3 4 4 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2016

	ASSOCIATION OF THE			
Sche	dule A (Form 990 or 990-EZ) 2016 UNITED STATES MILIT.	ARY ACADEMY		14-1260763 Page 7
Par			nizations (continued)	
Secti	on D - Distributions		(continuou)	Current Year
	Amounts paid to supported organizations to accomplish exe		1	
2	Amounts paid to perform activity that directly furthers exemp			
_	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	
4	Amounts paid to acquire exempt-use assets		5	
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			+
8	¥	a organization is reasonaive		+
0	Distributions to attentive supported organizations to which th	te organization is responsive		
	(provide details in Part VI). See instructions			+
9	Distributable amount for 2016 from Section C, line 6			+
10	Line 8 amount divided by Line 9 amount	<i>"</i>	()	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
-	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
a				
 b				
	From 2013			
	From 2014			
	From 2015			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
<u> </u>	Carryover from 2011 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j and 4c			
8	Breakdown of line 7:			
a				
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
e	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

Schedule A	(Form 990 or 990-EZ) 2016 UNITED STATES MILITARY ACADEMY	14-1260763	Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 11 Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lin line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; F Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any ad (See instructions.)	nes 1 and 2; Part IV, Section Part V, Section B, line 1e; Pa	ıC,

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

 Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 . OMB No. 1545-0047

2016

Employer identification number

Name of the organization						
	ASSOCIATI	ON OF	THE	GRADUATES	OF	THE
	UNITED ST	ATES	MILIT	TARY ACADEN	ſΥ	

14-1260763

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(³) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

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

General Rule

Schedule B

(Form 990 990-F7

Department of the Treasury

Organization type (check one):

Internal Revenue Service

or 990-PF)

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year exclusively religious is charitable, etc., be successful to the parts unless to the parts unless the total contributions totaling \$5,000 or more during the year exclusively religious, charitable, etc., be successful to the parts unless to the parts unless the total contributions totaling \$5,000 or more during the year exclusively religious, charitable, etc., be successful to the parts unless to the parts unless to the parts unless the total contributions totaling \$5,000 or more during the year exclusively religious, charitable, etc., be successful to the parts unless to the parts unless to the parts unless the total contributions total to the parts unless to the parts unless the total to the parts unless the total tota

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of org	ganization ION OF THE GRADUATES OF THE		Employer identification number
	TATES MILITARY ACADEMY		14-1260763
Part I	Contributors (See instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
1		\$1,136,	000. Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
2		\$4,000,	000. Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
3		\$904,	497. Person Payroll Moncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
4		\$1,767,	485. Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
5		\$1,179,	450. Person X Payroll Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) 1s Type of contribution
6		\$1,059,	Person X Payroll

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

	TATES MILITARY ACADEMY	1	1-1260763
art II	Noncash Property (See instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
3	19,465 SHARES DUPONT FABROS TECH		
		\$894,497.	06/23/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
3	314 SHARES CBRE GROUP		
		\$10,000.	12/19/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
6	19,000 SHARES US CONCRETE		
		\$1,034,360.	03/15/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

14-1260763

Employer identification number

\$

Schedule B	(Form 990, 990-EZ, or 990-PF) (2016)			Page 4
Name of orga	anization		Employ	ver identification number
ASSOCIATI	ION OF THE GRADUATES OF THE			
	TATES MILITARY ACADEMY			4-1260763
Part III	Exclusively religious, charitable, etc., contr the year from any one contributor. Complete c completing Part III, enter the total of exclusively religious	olumns (a) through (e) and the follow	ng line entry. For organizations	total more than \$1,000 for
	Use duplicate copies of Part III if additiona	Il space is needed.	· · ·	
(a) No. from Part I	(b) Purpose of gift	(b) Purpose of gift (c) Use of gift		of how gift is held
			_	
-		(e) Transfer of gift		
	Transferee's name, address, ar	Id ZIP + 4	Relationship of transferor	to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description	of how gift is held
-		(e) Transfer of gift		
_	Transferee's name, address, ar		Relationship of transferor	to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description	of how gift is held
	 Transferee's name, address, ar	(e) Transfer of gift		
			Relationship of transferor	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description	of how gift is held
		(e) Transfer of gift		
-	Transferee's name, address, ar	ud ZIP + 4	Relationship of transferor	to transferee

	n 990) Complete if the or	cal Financial Statements ganization answered "Yes" on Form 990, 0, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		OMB No. 1545-0047		
	ment of the Treasury	Attach to Form 990.		Open to Public Inspection		
		orm 990) and its instructions is at <u>www.irs.g</u>		90.		
Nam	e of the organization ASSOCIATION OF THE GRADUAT UNITED STATES MILITARY ACA		En	nployer identification number 14-1260763		
Pa			Accou			
	organization answered "Yes" on Form 990, Part IV, li					
		(a) Donor advised funds	(b) Fu	inds and other accounts		
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	-				
	are the organization's property, subject to the organization's			Yes No		
6	Did the organization inform all grantees, donors, and donor					
	for charitable purposes and not for the benefit of the donor					
Pa			N/ 1500	Yes No		
			iv, line i	1		
1	Purpose(s) of conservation easements held by the organizat			ortant land area		
	Protection of natural habitat	Preservation of a certifie				
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qual	lified conservation contribution in the form of a	conserv	ation easement on the last		
_	day of the tax year.			Held at the End of the Tax Year		
а	Total number of conservation easements		2a			
b						
с	Number of conservation easements on a certified historic st					
d	Number of conservation easements included in (c) acquired					
	listed in the National Register2d					
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the org	janizatior	n during the tax		
	year					
4	Number of states where property subject to conservation ea					
5	Does the organization have a written policy regarding the pe					
•	violations, and enforcement of the conservation easements					
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing conserv	ation eas	sements during the year		
7	Amount of expenses insurred in menitoring inspecting her	adling of violations, and enforcing concervation		nto during the year		
'	Amount of expenses incurred in monitoring, inspecting, han \$		easeme	his during the year		
8	Does each conservation easement reported on line 2(d) abo	ove satisfy the requirements of section 170(h)(4)(B)(i)			
Ũ				Yes No		
9	In Part XIII, describe how the organization reports conservat			······ — —		
	include, if applicable, the text of the footnote to the organization	-				
	conservation easements.					
Pa	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or Othe	r Simila	ar Assets.		
	Complete if the organization answered "Yes" on Forr	m 990, Part IV, line 8.				
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue statement	and bala	ance sheet works of art,		
	historical treasures, or other similar assets held for public ex	xhibition, education, or research in furtherance	of public	service, provide, in Part XIII,		
	the text of the footnote to its financial statements that descri	ribes these items.				
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statement and	d balance	e sheet works of art, historical		
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of public	service,	provide the following amounts		
	relating to these items:			•		
	(i) Revenue included on Form 990, Part VIII, line 1			\$		
_				\$		
2	If the organization received or held works of art, historical tr		in, provic	de		
	the following amounts required to be reported under SFAS		⊾	٠		
a L	Revenue included on Form 990, Part VIII, line 1			φ		
	Assets included in Form 990, Part X		🕨	· ·		
∟⊓А	A For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2016					

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

	ASSOCIATION	I OF THE GRADUAT	ES OF THE						
Sche		ES MILITARY ACA					260763	Р	age 2
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Ot	her Sin	nilar Asse	ts _{(conti}	nued)	
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that are	a signific	ant use of its	collection	items	6
	(check all that apply):								
а	Public exhibition	d	Loan or excl	nange programs					
b	Scholarly research	е	Other						
с	Preservation for future generations								
4	Provide a description of the organization's co	ellections and explain	how they further th	e organization's (exempt p	urpose in Pa	rt XIII.		
5	During the year, did the organization solicit o								
	to be sold to raise funds rather than to be ma		•			Г	Yes		No
Par	t IV Escrow and Custodial Arrang						/, line 9, or		
	reported an amount on Form 990, Par		0			,	, ,		
1a	Is the organization an agent, trustee, custodia	an or other intermedia	ary for contributions	or other assets	not incluc	led			
	on Form 990, Part X?					_	Yes		No
b	If "Yes," explain the arrangement in Part XIII a								
			g		Г		Amour	t	
с	Beginning balance					1c		-	
	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1f			
	Did the organization include an amount on Fo					<u>п</u>	Yes		No
	If "Yes," explain the arrangement in Part XIII.				-	L			
Par									
		(a) Current year	(b) Prior year	(c) Two years ba		nree years bac	k (e) Fou	r voare	hack
10	Paginning of year balance	207,742,285.	198,523,726.	184,055,44		6,017,738			344.
-	Beginning of year balance	8,311,499.	11,324,199.	10,219,11		8,428,890			976.
b	Contributions	10,353,793.	-2,364,732.	7,477,81		6,860,015			906.
c	Net investment earnings, gains, and losses	4,976,656.	4,289,226.						
d	Grants or scholarships	4,970,030.	4,209,220.	4,369,05	·/•	4,028,408	. 2	,439,	271.
е	Other expenditures for facilities	F 474 0F4	4 550 010	1 1 4 2 0 1	_	C 770 711	-	000	202
	and programs		-4,550,818.			6,779,711			283.
f	Administrative expenses	2,500.	2,500.	2,50		,			500.
g	End of year balance	226,902,675.	207,742,285.	198,523,72	6. IS	4,055,446	. 146	,017,	738.
2	Provide the estimated percentage of the curr	•) held as:					
а	Board designated or quasi-endowment	4.59	_%						
b	Permanent endowment 75.15	%							
С	Temporarily restricted endowment	20.26 %							
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.							
3a	Are there endowment funds not in the posses	ssion of the organizat	tion that are held an	d administered fo	or the org	anization			
	by:							Yes	No
	(i) unrelated organizations						. 3a(i)		X
	1 1 1 1 1 1								х
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R?				3b		
4	Describe in Part XIII the intended uses of the	organization's endov	vment funds.						
Par	t VI Land, Buildings, and Equipm								
	Complete if the organization answered	d "Yes" on Form 990,	, Part IV, line 11a. S	ee Form 990, Pai	t X, line 1	0.			
	Description of property	(a) Cost or ot	her (b) Cost	or other (c) Accum	ulated	(d) Boo	k valu	e
		basis (investm	• • •		, deprecia				
1a	Land								
	Buildings		11	,273,612.	5,3	56,170.	5	,917,	442.
	Leasehold improvements			.	,				
	Equipment			956,851.	2	48,452.		708	399.
	Other			890,777.		07,318.			459.
				• • •		.,		200	

7,209,300. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Schedule D (Form 990) 2016

ASSOCIATION	OF	THE	GRADUATES	OF	THE
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UNITED STATES MILITARY ACADEMY

Schedule D (Form 990) 2016 Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests	48,161,343.	END-OF-YEAR MARKET VALUE
(3) Other		
(A) OTHER INVESTMENTS	4,603,955.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total (Col (b) must equal Form 990 Part X col (B) line 12)	52,765,298.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) SPLIT INTEREST TRUSTS	20,941,495.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990. Part X. col. (B) line 15.)	20,941,495.

Other Liabilities. Part X

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	DEFERRED COMPENSATION	615,603.
(3)	REMAINDER TRUSTS	4,345,997.
(4)	DUE TO CLASSES	2,469,563.
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	7,431,163.

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 🕨

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

	ASSOCIATION OF THE GRADUATES OF THE				
Sche	dule D (Form 990) 2016 UNITED STATES MILITARY ACADEMY			14-126	0763 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statemer	nts With I	Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	59,977,321.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	10,645,983.		
b	Donated services and use of facilities				
с	Recoveries of prior year grants				
d			-240,744.		
е	Add lines 2a through 2d			2e	10,405,239.
3	Subtract line 2e from line 1			3	49,572,082.
4	Amounts included on Form 990, Part VIII, line 12, 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	-769,582.		
	Add lines 4a and 4b			4c	-769,582.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	48,802,500.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	ents With	Expenses per R	leturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	55,782,829.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)		-331,665.		
е	Add lines 2a through 2d			2e	-331,665.
3	Subtract line 2e from line 1			3	56,114,494.
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	240,744.		
с	Add lines 4a and 4b			4c	240,744.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	56,355,238.
Pa	t XIII Supplemental Information.				

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 V, LINE 4:

THE ENDOWMENTS ARE USED IN FURTHERING THE IDEALS AND PROMOTING THE WELFARE

OF THE UNITED STATES MILITARY ACADEMY AND ITS GRADUATES.

PART V, LINE 1E: THIS REPRESENTS TRANSFERS OF TEMPORARILY RESTRICTED GIFTS

TO PERMANENTLY RESTRICTED ENDOWMENTS TO COMPLY WITH THE DONORS' INTENT.

PART X, LINE 2:

THE INCOME TAX POSITIONS TAKEN BY THE ASSOCIATION FOR ANY YEARS OPEN UNDER

THE VARIOUS STATUTES OF LIMITATIONS ARE THAT THE ASSOCIATION CONTINUES TO

BE EXEMPT FROM INCOME TAXES AND THAT THE ASSOCIATION EARNS REVENUES FROM

CERTAIN ACTIVITIES WHICH ARE CONSIDERED UNRELATED BUSINESS TAXABLE INCOME

		E GRADUATES OF THE		
Schedule D (Form 990) 2016 Part XIII Supplemental Inform	UNITED STATES MILI ation (continued)	ITARY ACADEMY	14-1260763	Page 5
UNDER THE INTERNAL REVENUE COD	E. IN BOTH 2016 AM	ND 2015, HOWEVER, UNRELATED		
BUSINESS INCOME (NET OF APPLIC	ABLE EXPENSES) RES	SULTED IN NO MATERIAL TAX		
EXPENSE. THE ASSOCIATION BELIE	VES THAT THERE ARE	E NO OTHER TAX POSITIONS		
TAKEN OR EXPECTED TO BE TAKEN	THAT WOULD SIGNIF	ICANTLY INCREASE OR		
DECREASE UNRECOGNIZED TAX EXPE	NSES OR BENEFITS V	WITHIN 12 MONTHS OF THE		
REPORTING DATE. NONE OF THE AS	SOCIATION'S FEDERA	AL OR STATE INCOME TAX		
RETURNS IS CURRENTLY UNDER EXA	MINATION BY THE IN	NTERNAL REVENUE SERVICE		
("IRS") OR STATE AUTHORITIES.				
PART XI, LINE 2D - OTHER ADJUS	TMENTS:			
INVESTMENT FEES		-240,744.		
PART XI, LINE 4B - OTHER ADJUS	TMENTS :			
COSTS OF GOODS SOLD		-976,429.		
UBI GAIN FROM PARTNERSHIP INVE	STMENTS	206,847.		
TOTAL TO SCHEDULE D, PART XI,	LINE 4B	-769,582.		
PART XII, LINE 2D - OTHER ADJU	STMENTS:			
COST OF GOODS SOLD		976,429.		
RECOVERY OF UNCOLLECTIBLE PLED	GES	-1,308,094.		
TOTAL TO SCHEDULE D, PART XII,	LINE 2D	-331,665.		
PART XII, LINE 4B - OTHER ADJU	STMENTS:			
INVESTMENT FEES		240,744.		

SCHEDULE F	Stateme	nt of Act	ivities Outside the Ur	nited Sta	ntes ⊢	OMB No. 1545-0047
(Form 990)			n answered "Yes" on Form 990, Part			2016
Department of the Treasury			Attach to Form 990.			Open to Public
Internal Revenue Service	Information abo	out Schedule F	(Form 990) and its instructions is at	www.irs.gov/fo		Inspection
Name of the organization ASSOCIATION OF THE GRA	DUATES OF TH	E			Employer ide	ntification number
UNITED STATES MILITARY					14-126076	
Part I General Info	rmation on A	ctivities Out	side the United States. Comple	ete if the orgar	nization answere	d "Yes" on
Form 990, Part I	V, line 14b.					
-	-		ds to substantiate the amount of its gra			
the grantees' eligibility f	or the grants or a	ssistance, and t	he selection criteria used to award the	grants or assis	stance?	X Yes No
2 For grantmakers. Desc	ribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and ot	her assistance o	outside the
United States.						
3 Activities per Region. (T	he following Part	I, line 3 table ca	an be duplicated if additional space is n	eeded.)		
(a) Region	(b) Number of	(c) Number of employees,			vity listed in (d)	(f) Total expenditures
	offices in the region	agents, and	(by type) (such as, fundraising, pro- gram services, investments, grants to		gram service, e specific type	for and
	In the region	independent contractors	recipients located in the region)		(s) in the region	investments in the region
CENTRAL AMERICA AND		in the region				
THE CARIBBEAN -						
ANTIGUA & BARBUDA,						
ARUBA, BAHAMAS,			INVESTMENTS			33,606,650.
EAST ASIA AND THE						
PACIFIC - AUSTRALIA,						
BRUNEI, BURMA,						
CAMBODIA,			PROGRAM SERVICES	SCHOLARSHI	P	45,276.
EUROPE (INCLUDING						
ICELAND & GREENLAND)			PROGRAM SERVICES	SCHOLARSHI	P	54,187.
MIDDLE EAST AND						
NORTH AFRICA			PROGRAM SERVICES	SCHOLARSHI	D	4,020.
			I KOGRAH BERVICEB	DCHOLARDIT		4,020.
3 a Sub-total	0	0				33,710,133.
b Total from continuation						
sheets to Part I	0	0				0.
c Totals (add lines 3a						
and 3b)	0	0				33,710,133.

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

Schedule F (Form 990) 2016

UNITED STATES MILITARY ACADEMY

Schedule F (Form 990) 2016

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

14-1260763

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
			ecognized as charities by the f			•		1	
	the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter								

Schedule F (Form 990) 2016

632072 09-21-16

Page 2

SCHOLARSHIP RAST ASIA AND THE 1 45,276. WIRE TRANSFER 0. N/A N/A EUROPE (INCLUDING CELAND & 2 54,187. WIRE TRANSFER 0. N/A N/A MIDDLE EAST AND	art III Grants and Other Assistar			tes. Complete	if the organization answered "Yes	s" on Form 990, Par	t IV, line 16.	
EAST ASIA AND THE PACIFIC 1 45,276. WIRE TRANSFER 0. N/A N/A EUROPE (INCLUDING ICELAND & GREENLAND) 2 54,187. WIRE TRANSFER 0. N/A N/A	Part III can be duplicated if	additional space is needed	d		•			
SCHOLARSHIP PACIFIC 1 45,276. WIRE TRANSFER 0. N/A N/A EUROPE (INCLUDING ICELAND & GREENLAND) 2 54,187. WIRE TRANSFER 0. N/A N/A	(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	noncash	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other
SCHOLARSHIP PACIFIC 1 45,276. WIRE TRANSFER 0. N/A N/A EUROPE (INCLUDING ICELAND & GREENLAND) 2 54,187. WIRE TRANSFER 0. N/A N/A MIDDLE EAST AND								
SCHOLARSHIP PACIFIC 1 45,276. WIRE TRANSFER 0. N/A N/A EUROPE (INCLUDING ICELAND & GREENLAND) 2 54,187. WIRE TRANSFER 0. N/A N/A MIDDLE EAST AND								
EUROPE (INCLUDING ICELAND & GREENLAND) 2 54,187. WIRE TRANSFER 0. N/A N/A MIDDLE EAST AND	UOI ADGUTD		1	45 276	WIDE MDANGEED	0	NT / 7	NT / N
ICELAND & ICELAND & N/A GREENLAND) 2 54,187. WIRE TRANSFER 0. N/A MIDDLE EAST AND	HOLARSHIP			45,270.	WIRE TRANSFER	0.	N/A	
ICELAND & ICELAND & 2 54,187. WIRE TRANSFER 0. N/A N/A		EUROPE (INCLUDING						
CHOLARSHIP GREENLAND) 2 54,187. WIRE TRANSFER 0. N/A N/A MIDDLE EAST AND 2 54,187. WIRE TRANSFER 0. N/A								
MIDDLE EAST AND	HOLARSHIP		2	54,187.	WIRE TRANSFER	0.	N/A	N/A
				,				
SCHOLARSHIP NORTH APRICA 1 4,020. CHECK 0. N/A N/A SCHOLARSHIP IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		MIDDLE EAST AND						
Image: Second	HOLARSHIP	NORTH AFRICA	1	4,020.	CHECK	0.	N/A	N/A
Image: state of the state								
Image: state of the state								
Image: state of the state								

Schedule F (Form 990) 2016

Scheo	dule F (Form 990) 2016 UNITED STATES MILITARY ACADEMY	14-1260763	Page 4
Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)</i>	X Yes	No No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2016

Page 5

Part V Supplemental Information

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

PART I, LINE 2:

Schedule F (Form 990) 2016

THE ASSOCIATION PROVIDES CERTAIN GRANTS TO CAPTAINS AND MAJORS IN THE

ARMY FOR ADVANCED EDUCATION, LANGUAGE, AND CULTURAL IMMERSION NECESSARY

FOR UNDERSTANDING AND COMBATING INTERNATIONAL TERRORISM, WHICH IS ONE OF

THE CENTERS OF EXCELLENCE AT THE UNITED STATES MILITARY ACADEMY WHERE

CADETS RECEIVE TRAINING. PAYMENTS ARE MADE DIRECTLY TO THE SCHOOLS.

PROPER USE OF FUNDS IS MONITORED VIA THE STUDENTS' COMPLETION OF THE

GRADUATE PROGRAMS.

SCHEDULE G Supplemental Information Regarding Fundraising or Gaming Activities					OMB No. 1545-0047			
(Form 990 or 990-EZ)	Complete if the	e organization answered "Yes" on	Form	990, F	Part IV, line 17, 18, o			2016
Department of the Treasury Internal Revenue Service		organization entered more than \$1 ▶ Attach to Form 99 bout Schedule G (Form 990 or 990-EZ	0 or Fo	rm 99	0-EZ.	nov/fc	orm990	Open to Public Inspection
Name of the organization		N OF THE GRADUATES OF THE	/ 4114 116	moura		101/10		entification number
<u> </u>		TES MILITARY ACADEMY					14-12607	
Part I Fundrais required to	complete this par	• Complete if the organization answ t.	ered "Y	'es" or	n Form 990, Part IV, I	ine 1	7. Form 990-E	Z filers are not
 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations b X Internet and email solicitations f Solicitation of government grants c X Phone solicitations g Special fundraising events d X In-person solicitations 2 a 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? X Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. 								
(i) Name and addres or entity (fund	(III) ACTIVITY have custody						or retained by) fundraiser	(vi) Amount paid to (or retained by) organization
ADVANTAGE PLUS CON	SULTING -		Yes	No				
6280 S. VALLEY VIE	W BLVD,	PHONE & MAIL		x	1,582,594.		270,000	. 1,312,594.
-								
Total	<u></u>		<u></u> .		1,582,594.		270,000	. 1,312,594.
3 List all states in whi or licensing.	ich the organizatio	n is registered or licensed to solicit	contrib	utions	or has been notified	it is e	exempt from r	egistration

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

	edul I rt I	le G (Form 990 or 990 EZ) 2016 UNITED STA				-1260763 Page 2
га		of fundraising event contributions and gr	-			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
e			(event type)	(event type)	(total number)	- col. (c))
Revenue	4	Orace receipte				
Be	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
Jses	•					
Exper	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
ā	8	Entertainment				
	9	Other direct expenses				
		Direct expense summary. Add lines 4 through				
Pa	11 Irt I	Net income summary. Subtract line 10 from I II Gaming. Complete if the organization				
		\$15,000 on Form 990-EZ, line 6a.			-	
ē			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c
Revenue						
щ	1	Gross revenue				
ses	2	Cash prizes				
	3	Noncash prizes				
Direct Exper	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	│	│	
	6	Volunteer labor	No	No	No No	
		Volunteer labor Direct expense summary. Add lines 2 through	No	No	No	
	6	Volunteer labor	No	No	No	
9	6 7 8 Ent	Volunteer labor Direct expense summary. Add lines 2 through	No No from line 1, column (d)	No	No ►	
9 a	6 7 8 Ent	Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 ter the state(s) in which the organization condu	No 5 in column (d) from line 1, column (d) ucts gaming activities: _ ctivities in each of these	No No states?	No ►	
9 a b	6 7 8 Is t	Volunteer labor Direct expense summary. Add lines 2 through <u>Net gaming income summary. Subtract line 7</u> ter the state(s) in which the organization condu he organization licensed to conduct gaming a	No	states?	No ►	Yes No
9 a b	6 7 8 Is t If "I We	Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 ter the state(s) in which the organization condu- the organization licensed to conduct gaming an No," explain:	No 5 in column (d) from line 1, column (d) ucts gaming activities: ctivities in each of these evoked, suspended, or te	states?	No ►	Yes No

ASSOCIATION	OF	THE	GRADUATES	OF	THE
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Sch	edule G (Form 990 or 990-EZ) 2016 UNITED STATES MILITARY ACADEMY	L4-1260763	Page 3
11	Does the organization conduct 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 No
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility		%
	An outside facility	13 b	%
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 No
k	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount		
	of gaming revenue retained by the third party \blacktriangleright \$		
c	If "Yes," enter name and address of the third party:		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation 🕨 💲		
	Description of services provided 🕨		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	No
k	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	е	
	organization's own exempt activities during the tax year > \$		
Ра	ITTIV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	III, lines 9, 9b, 1	0b, 15b,
SCH	EDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:		
(I)	NAME OF FUNDRAISER: ADVANTAGE PLUS CONSULTING		
(I)	ADDRESS OF FUNDRAISER:		
628	0 S. VALLEY VIEW BLVD, SUITE 732, LAS VEGAS, NV 89118		

ASSOCIA	ATION	OF	THE	GRAI	DUATES	OF	THE
UNITED	STATE	IS 1	4ILI7	FARY	ACADEN	4Y	

Schedule (G (Form 990 or 990-EZ)	UNITED	STATES MILITARY	ACADEMY		14-1260763	Page 4
Part IV	G (Form 990 or 990-EZ) Supplemental Inform	mation ((continued)				0

SCHEDULE I (Form 990)	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.									
Department of the Treasury	Comple	ete if the organizatio	Attach to For		rt IV, line 21 or 22.		2016 Open to Public			
nternal Revenue Service	Information	on about Schedule I	•		t www.irs.gov/form9	90.	Inspection			
lame of the organization ASSOC	IATION OF THE GRADUATE						Employer identification numb			
	D STATES MILITARY ACAD	ЕМҮ					14-1260763			
Part I General Information o	n Grants and Assistance									
÷	in records to substantiate the	-			-					
	nts or assistance?						X Yes			
2 Describe in Part IV the organi Part II Grants and Other Ass		<u> </u>					N/ Page 04 (an ann			
	istance to Domestic Organiz more than \$5,000. Part II can I				anization answered "	Yes" on Form 990, Par	t IV, line 21, for any			
1 (a) Name and address of orga		(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant			
or government		(if applicable)	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	noncash assistance				
	DEW									
NITED STATES MILITARY ACA EST POINT	DEMY									
EST POINT, NY 10996	14-1364902		65,326.	0.			MEMORIAL PROJECTS			
	14 1504502		05,520.							
NITED STATES MILITARY ACA	DEMY									
EST POINT										
EST POINT, NY 10996	14-1364902		39,441.	٥.			USMA MISC			
NITED STATES MILITARY ACA	DEMY									
EST POINT						TRAVEL &				
EST POINT, NY 10996	14-1364902		6,205,442.	100,942.	COST	ENTERTAINMENT	CADET EDUCATION			
`										
NITED STATES MILITARY ACA	DEMY					ART - STAINED				
EST POINT						GLASS WINDOW &				
EST POINT, NY 10996	14-1364902		0.	3,000.	FMV	PHOTOS	CADET EDUCATION			
NITED STATES MILITARY ACA	DEMY									
EST POINT						EQUIPMENT -				
EST POINT, NY 10996	14-1364902		0.	4,600.	соѕт	ENGINES, MAPS	CADET EDUCATION			
NITED STATES MILITARY ACA	DEWV									
EST POINT						TECHNOLOGY -				
EST POINT, NY 10996	14-1364902		0.	58,000.	COST	WEBSITES	CADET EDUCATION			
,	501(c)(3) and government org	anizations listed in th		,,	1		•			
	rganizations listed in the line 1						······			

Schedule I (Form 990)

UNITED STATES MILITARY ACADEMY .

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JNITED STATES MILITARY ACADEMY							
NEST POINT						MAGAZINE	
WEST POINT, NY 10996	14-1364902		8,440,284.	1,100.	FMV	COLLECTION	CADET ACTIVITES
JNITED STATES MILITARY ACADEMY							
VEST POINT						TECHNOLOGY - LED	
NEST POINT, NY 10996	14-1364902		0.	3,150.	COST	TV'S & IPADS	CADET ACTIVITES
						TRAINING	
JNITED STATES MILITARY ACADEMY						PISTOLS, MATS,	
NEST POINT						ANNOTATION	
NEST POINT, NY 10996	14-1364902		0.	10,825.	COST	SYSTEM	CADET ACTIVITES
NITHER CHARGE NTI THARY ACARENY							
JNITED STATES MILITARY ACADEMY NEST POINT						TRAVEL &	
WEST POINT, NY 10996	14-1364902		0.	51,350.	ററഞ	ENTERTAINMENT	CADET ACTIVITES
4231 FOINT, NI 10330	14-1304902		0.	51,550.	0001	ENTERTAINMENT	CADEI ACIIVIIES
JNITED STATES MILITARY ACADEMY							
NEST POINT						MISC - TROPHY,	
NEST POINT, NY 10996	14-1364902		0.	1,980.	COST	A/V REPAIR	CADET ACTIVITES
· ·				<i>,</i>			
JNITED STATES MILITARY ACADEMY							
NEST POINT						TRAINING -	
WEST POINT, NY 10996	14-1364902		25,863,759.	47,703.	COST	FITNESS EQUIP	CADET FACILITIES
JNITED STATES MILITARY ACADEMY							
NEST POINT							
NEST POINT, NY 10996	14-1364902		0.	100.	FMV	ART - PHOTOS	CADET FACLITIES
ARMY WEST POINT ATHLETIC							
ASSOCIATION, INC 639 HOWARD	47 4457025	= 01(a)(2)	E00.000	•			
ROAD - WEST POINT, NY 10996	47-4457035	DUT(C)(3)	500,000.	0.			CADET ACTIVITES

Schedule I (Form 990)

Schedule I (Form 990) (2016) UNITED STATES MILITARY ACADEMY

14-1260763

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	52	658,177.	0.	N/A	N/A

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE ASSOCIATION PROVIDES GRANTS TO THE UNITED STATES MILITARY ACADEMY

("USMA"). SINCE THE USMA IS A FEDERAL GOVERNMENT INSTITUTION, THE

ASSOCIATION RELIES ON USMA TO MONITOR THE USE OF THESE GRANT FUNDS.

CERTAIN SCHOLARSHIPS (PRIMARILY TO PREP SCHOOLS) ARE PROVIDED TO CAREFULLY

SELECTED AND HIGHLY MOTIVATED YOUNG PEOPLE SEEKING ADMISSION TO USMA.

STUDENTS MUST HAVE ALL QUALIFICATIONS DETERMINED BY THE ADMISSIONS

COMMITTEE TO BE CONSIDERED FOR A SCHOLARSHIP. STUDENTS WHO ACCEPT THESE

Schedule I (Form 990)

Part IV Supplemental Information

SCHOLARSHIPS MUST PERFORM TO USMA-SET STANDARDS DURING THE SCHOLARSHIP

PERIOD TO BE ACCEPTED AT USMA AT THE END OF THE SCHOLARSHIP PERIOD.

FURTHER, OTHER GRANTS ARE AWARDED TO CAPTAINS AND MAJORS IN THE REGULAR

ARMY FOR ADVANCED EDUCATION, LANGUAGE SKILLS, AND CULTURAL IMMERSION

NECESSARY FOR UNDERSTANDING AND COMBATING INTERNATIONAL TERRORISM, WHICH IS

ONE OF THE CENTERS OF EXCELLENCE AT THE UNITED STATES MILITARY ACADEMY

WHERE CADETS RECEIVE TRAINING.

(Form 990) For certain Officers, Dreaters, Trustees, Key Employes, and Highest Compensation answered "Yes" on Form 900, Part IV, line 23. Information about Schedule J form 900 and its instructions is at www.irs.contents.con	SC	HEDULE J	Compensation Information			OMB No.	1545-004	47	
Compete the organization argument Yee' on Form 990, Parl IV, line 23. Attach to Form 990. Information about Schedule J (form 990. Attach to Form 990. Manned the organization argument Yee's on Form 990. Manned the organization provided any of the following to or for a person listed on Form 990. Manned the organization arguments Xee Manned Yee's One Personal services (such as maid, charffeur, chef) Manned fores, including the CEOE/Secutive Director, Check all that apply. Do not check any boxes for methods used by a related organization to establish the Compensation and proses described above? If 'No,' complete Parl III to explain the organization is a substantiation provided any of the torganization regular substantiation provided any boxes for methods used by a related organization to establish the COE/Decoutive Director, Check all that apply. Do not check any boxes for methods used by a related organization to establish the COE/Decoutive Director, but be gard or organization committee Munna or a leader organization: Manned the organization argument? Manned the organization argument? Manned the organization argument? Manned the organization: Manned the organization argument? Manned the organization is the second or compensation ormittee During the year, did any person listed on Form 900, Part VII, Section A, line 1a, with respect to the filing organization: Manned the organization? Manned th			-	st		00	2016		
Department the Integration P Information about Schedule J (Form 990. Open to Public Inspection Inspection Name of the organization Association of the organization at the structure is instructions is at the structure is a properties of the organization of the organization provided any of the following to or for a person listed on Form 190. Part NI. Section A. line 1a. Complete Part III to provide any relevant information regarding these items. First-Class or charter travel Taxiel for companions Yes No. Important on the structure of the organization provided any of the following to or for a person listed on Form 190. Part NI. Section A. line 1a. Complete Part III to provide any relevant information regarding these items. Taxiel for companions Yes No. Important on the structure of the organization of the sequence of the structure of personal residence is the structure of the organization regions as the structure of the organization regions as used of personal residence is the structure of the organization regions as the structure of the organization regions abstraint on provide abstraint on provide above? If "No." complete Part III to explain 1b X In dicate which, if any, of the following the filing organization used to establish the compensation of the organization 's CEC/Executive Director, but explain in Part III. X 1b X Indicate which, if any, of the following the filing organization used to a related organization 's CEC/Executive Director, but explain in Part III. X 1c X Indicate which, if any, or the following the organ	•		Compensated Employees			 20	ZU IO		
	_			÷23.		Open to	Publ	ic	
Name of the organization ASSOCTATION OF THE GRADUATES OF THE ULTERS STATES BILITERS ACADENT Employer identification number 14-1260763 Part I Questions Regarding Compensation Yes No 1 Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VI, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Yes No 1 Fractionary spending account Payments for business use of personal residence 1 X 2 Indennification and gross up payments Personal services (such as, much, charlfer, chef) 1 X 2 Indennification and gross up payments Personal services (such as, much, charlfer, chef) 1 X 2 Indicate which, if any, of the following the filing 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 1 X 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Cxecutive Director, but explain in Part III. 2 X 3 Indicate which, if any, of the following the filing organization used to establish compensation or the CEO/Executive Director, but explain in Part III. 2 X<				iov/for	m990.	•			
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a Receive a severance payment or change-of-control payment? 4a X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X c Participate in, or receive payment from, an equity-based compensation arrangement? 4c X If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. 4c X Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a X a The organization? 5b X X b Any related organization? 5b X c For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 5b X a The organization? 6a X b Any related organization? 6a X b Any related organization? 6a X c For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a X a The organization? 6a X X b Any related organization? </th <td>4</td> <td>During the year, did</td> <td>any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing</td> <td></td> <td></td> <td></td> <td></td> <td></td>	4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing						
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c Participate in, or receive payment from, an equity-based compensation arrangement? 4c X If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Image: Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. Image: Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. Image: Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. Image: Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: Image: Section 50, describe in Part III. 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: Image: Section 50, describe in Part III. 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: Image: Section 50, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. Image: The organization? Image: Section 53, 4958-4(a)(3)? If "Yes," describe in Part III. Image: The organization Part III. Image: The organization Part	а							──	
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Image: Control (Control (Co								──	
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? b Any related organization? ff "Yes" on line 5a or 5b, describe in Part III. 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:	С					4c		X	
 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: The organization? Any related organization? If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? Any related organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on Form 990, Part VII, section A, line 1a, did the organization provide any nonfixed payments not described on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in 		If "Yes" to any of lir	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: The organization? Any related organization? If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? Any related organization? For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on Form 990, Part VII, section A, line 1a, did the organization provide any nonfixed payments not described on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in 									
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a The organization? 5a X b Any related organization? 5b X If "Yes" on line 5a or 5b, describe in Part III. 5b X 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a X a The organization? 6a X b Any related organization? 6b X contingent on the net earnings of: 6b X a The organization? 6b X b Any related organization? 6b X f "Yes" on line 6a or 6b, describe in Part III. 6b X 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 7 X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Image: State	5	-		nsatior	ו				
b Any related organization? 5b X If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: Image: Control of Control		•						v	
b Any rotated organization? If "Yes" on line 5a or 5b, describe in Part III. 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? b Any related organization? if "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III 7 For persons listed on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in								<u> </u>	
 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? Any related organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in 	b					<u>5b</u>			
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a The organization? 6a X b Any related organization? 6b X if "Yes" on line 6a or 6b, describe in Part III. 6b X 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 7 X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Image: Contract exception described in the organization procedure described in Image: Contract exception described in	6			nsatior	٦				
b Any related organization? 6b X If "Yes" on line 6a or 6b, describe in Part III. 6b X 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III 7 X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Image: Contract Contrect Contract Contract Contract Contract Con	_	-	-					v	
If "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in								<u> </u>	
 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in 	a					00			
not described on lines 5 and 6? If "Yes," describe in Part III 7 X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Image: Contract Contrect Contrect Contract Contract Contract Contract Contra	7			marte					
 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	1					-	x		
initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	•						Λ		
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	•		· · · · · · · · · · · · · · · · · · ·			····· 8			
regulations section 53.4958-b(C)?	9		-						
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J (Form 990) 2016				<u></u>			- 000		

UNITED STATES MILITARY ACADEMY

Schedule J (Form 990) 2016

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

For each individual whose compensation must be reported on 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 aren't listed on Form 990, Part VII.

14-1260763

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-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denems	(D)(!) ⁻ (D)	reported as deferred on prior Form 990
(1) ROBERT L. MCCLURE	(i)	148,995.	100,000.	0.	10,630.	363.	259,988.	0.
PRESIDENT & CEO (UNTIL 6/30/16)	(ii)	Ο.	0.	0.	0.	0.	0.	0.
(2) TODD BROWNE	(i)	238,667.	6,000.	0.	18,102.	1,973.	264,742.	0.
VP/COO - PRESIDENT/CEO (AS OF 7/1/16	(ii)	Ο.	0.	0.	0.	0.	0.	0.
(3) CARL MOCCIA	(i)	191,380.	6,000.	0.	15,099.	12,710.	225,189.	0.
VICE PRESIDENT & CFO	(ii)	Ο.	0.	0.	0.	0.	0.	0.
(4) JAMES JOHNSTON	(i)	136,612.	3,500.	0.	10,231.	1,284.	151,627.	0.
CORPORATE SECRETARY	(ii)	Ο.	0.	0.	0.	0.	0.	0.
(5) KRISTIN SORENSON	(i)	206,818.	10,000.	0.	6,505.	18,300.	241,623.	0.
VICE PRESIDENT OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) EUGENE CORRIGAN	(i)	200,000.	100,000.	0.	0.	0.	300,000.	0.
PRESIDENT/COO WP ATHLETICS LLC	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) MICHAEL WHITE	(i)	140,598.	4,250.	0.	10,383.	12,710.	167,941.	0.
MAJOR GIFT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) RICHARD HUH	(i)	124,329.	2,500.	0.	6,097.	17,164.	150,090.	0.
VICE PRESIDENT, ALUMNI SUPPORT	(ii)	Ο.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							

Page 2

UNITED STATES MILITARY ACADEMY

Schedule J (Form 990) 2016

14-1260763

Pag<u>e 3</u>

Part III Supplemental Information

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.

PART I, LINE 1A:

WPAOG PAYS SOCIAL CLUB MEMBERSHIP DUES FOR THE PRESIDENT & CEO TO ATTEND

BUSINESS FUNCTIONS. WPAOG REQUIRES THE MEMBERSHIP SO THAT IT MAY USE THE

CLUB'S FACILITIES FOR BUSINESS MEETINGS. THESE BENEFITS ARE NOT INCLUDED IN

TAXABLE COMPENSATION SINCE THEY ARE BUSINESS RELATED.

PART I, LINE 7:

THE BOARD HAS THE AUTHORITY TO AWARD THE EXECUTIVE OFFICER WITH A BONUS

WHICH IS DEPENDENT UPON HIS PERFORMANCE AND NOT THE FINANCIAL PERFORMANCE

OF WPAOG. THE AMOUNT OF THE BONUS TO BE AWARDED IS DECIDED BY THE BOARD,

ALTHOUGH THE AMOUNT CANNOT BE ABOVE A SPECIFIC THRESHOLD. THE EXECUTIVE

OFFICER AWARDS BONUSES TO THE OTHER OFFICERS AND EMPLOYEES BASED UPON

CONTRACTUAL AGREEMENTS AND MERIT.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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

2016 **Open To Public** Inspection

Name	of the	organization

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. ASSOCIATION OF THE GF

vanie	UI	uie	organiz	Lation	

ASSOCIATION OF THE GRADUATES OF THE	Employer identification number
UNITED STATES MILITARY ACADEMY	14-1260763

Pa	rt I Types of Property				·
		(a)	(b)	(c)	(d)
		Check if	Number of	Noncash contribution	Method of determining
		applicable	contributions or	amounts reported on Form 990, Part VIII, line 1g	noncash contribution amounts
1	Art - Works of art	Х	3		VALUE OF COMPARABLE ART
2	Art - Historical treasures			· · ·	
3	Art - Fractional interests				
4	Books and publications	Х		1,100.	COST OF COMPARABLE ITEMS
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	Х	102	6,218,201.	NYSE VALUE
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or				
	trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution -				
	Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other (TRAVEL/ENTER.)	Х	15	153,140.	
26	Other (TRAINING ITEM)	X	9		EST. PURCHASE PRICE
27	Other (TECHNOLOGY)	X	13	61,150.	
28	Other (MISC)	Х	4	3,130.	COST
29	Number of Forms 8283 received by the organization	ation during	the tax year for co	ontributions	
	for which the organization completed Form 828	3, Part IV, D	Oonee Acknowledg	ement 29	T
					Yes No

ιнΔ	For Paperwork Reduction Act Notice, see the Instructions for Form 990	Schodulo M (Fo	rm (2016
	describe in Part II.				
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,				
b	If "Yes," describe in Part II.				
	contributions?	32	2a		Х
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash				
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		1	x	
b	If "Yes," describe the arrangement in Part II.				
		·····	<u>, a</u>		
	exempt purposes for the entire holding period?	30	a		Х
	must hold for at least three years from the date of the initial contribution, and which isn't required to be used for				
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that	t it			

Reduction Act Notice, see the Instructions for Form 990.

ule M (Form 990) (201

ASSOCIATION OF THE GRADUATES OF THE Schedule M (Form 990) (2016) UNITED STATES MILITARY ACADEMY 14-1260763 Page 2 **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete Part II this part for any additional information. SCHEDULE M, PART I, COLUMN (B): NUMBERS REPORTED IN PART I COLUMN B REPRESENT THE NUMBER OF DONORS.

SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury	Supplemental Information to Form 990 or 990. 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
Internal Revenue Service	▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at <u>www.irs.gov/f</u>		Inspection
Name of the organizatio	ASSOCIATION OF THE GRADUATES OF THE UNITED STATES MILITARY ACADEMY		identification number 60763
	UNITED STATES MILITARI ACADEMI	14-12	00705
FORM 990, PART VI,	SECTION A, LINE 6:		
ALL LIVING GRADUAT	ES OF THE UNITED STATES MILITARY ACADEMY IN GOOD STANDING		
QUALIFY AS MEMBERS	OF THE ASSOCIATION. THE MEMBERSHIP BODY PRESENTLY		
APPROXIMATES 51,00	0 IN NUMBER.		
FORM 990, PART VI,	SECTION A, LINE 7A:		
MEMBERS NOMINATE A	ND ELECT THE CHAIRMAN, VICE-CHAIRMAN AND THE DIRECTORS OF		
THE BOARD, ALL OF	WHOM CONSTITUTE THE BOARD OF DIRECTORS OF THE		
ASSOCIATION, AS WE	LL AS RATIFYING BY-LAW CHANGES.		
FORM 990, PART VI,	SECTION A, LINE 7B:		
APPROPRIATIONS FRO	M THE CORPUS OF THE ENDOWMENT REQUIRE APPROVAL OF THE		
MEMBERSHIP.			
FORM 990, PART VI,	SECTION B, LINE 11B:		
THE ACCOUNTING STA	FF PREPARES THE INITIAL SCHEDULES TO BE USED BY THE		
OUTSIDE CPA FIRM F	OR PREPARATION OF THE RETURN. THE DRAFTS ARE THEN		
REVIEWED BY THE AC	COUNTING STAFF AND THE CFO BEFORE A "FINAL" DRAFT IS SENT		
TO THE AUDIT & COM	PLIANCE COMMITTEE OF THE BOARD OF DIRECTORS. THIS		
COMMITTEE HOLDS A	SEPARATE MEETING WITH THE CPA FIRM AND THE CFO TO REVIEW		
THE ENTIRE DOCUMEN	T. ONCE REVIEWED AND APPROVED, THE FORM 990 IS SENT TO		
THE ENTIRE BOARD C	F DIRECTORS. SUBSEQUENTLY, THE AUDIT COMMITTEE REPORTS		
	TO THE FULL BOARD, NOTING ITS AGREEMENT WITH THE		
	, IF THERE ARE ANY QUESTIONS PERTAINING TO THE DOCUMENT		
THAT WAS DISTRIBUT	ED TO EACH PERSON. FORM 990 IS FILED WITH THE IRS AFTER		

THIS PROCESS HAS TAKEN PLACE.

Schedule O (Form 990 or 990-EZ) (2016)						
Name of the organization	ASSOCIATION OF THE GRADUATES OF THE					
	UNITED STATES MILITARY ACADEMY					

FORM 990, PART VI, SECTION B, LINE 12C:

THERE IS A WRITTEN CONFLICT OF INTEREST POLICY APPLICABLE TO ALL BOARD

MEMBERS, VOLUNTEERS AND STAFF. THE POLICY DOCUMENTATION IS DISTRIBUTED

ANNUALLY TO EACH PERSON, INCLUDING NEW HIRES UPON HIRING. INDIVIDUALS ARE

REQUIRED TO RETURN AN ACKNOWLEDGEMENT OF THEIR ACCEPTANCE AND ADHERENCE

PROMPTLY TO THE SECRETARY OF THE ORGANIZATION. SITUATIONS INVOLVING ANY

POSSIBILITY OF CONFLICT ARE REVIEWED BY THE ETHICS COMMITTEE TO ENSURE THAT

ANY RELATED ISSUES ARE PROPERLY DEALT WITH. ANYONE WITH A CONFLICT OF

INTEREST MUST RECUSE THEMSELVES FROM PARTICIPATING IN DISCUSSIONS BY THE

ETHICS COMMITTEE, AND BOARD OF DIRECTORS REGARDING THE MATTER, AS WELL AS

FROM ANY RELATED VOTE.

FORM 990, PART VI, SECTION B, LINE 15:

IN 2015, 2011 AND 2008, WEST POINT ASSOCIATION OF GRADUATES ("WPAOG")

UTILIZED AN OUTSIDE HUMAN RESOURCES/COMPENSATION CONSULTANT TO REVIEW

SALARIES AND PROVIDE FEEDBACK RELATING TO THEIR APPROPRIATENESS RELATIVE TO

OUR PARTICULAR MARKET. THIS CONSULTANT ALSO REVIEWED THE SALARIES OF THE

PRESIDENT, VICE PRESIDENTS, OTHER OFFICERS AND MOST EMPLOYEES TO ENSURE

THAT THEY WERE WITHIN LEVELS CONSISTENT WITH THE MARKET. OUR COMPENSATION

COMMITTEE ALSO REVIEWS THESE SALARIES ANNUALLY TO ENSURE THAT THEY ARE

REASONABLE AND IN-LINE WITH THE RELATED MARKET. THE COMPENSATION COMMITTEE

IS COMPRISED OF INDEPENDENT BOARD MEMBERS. THE COMPENSATION COMMITTEE THEN

MEETS WITH THE BOARD IN AN EXECUTIVE SESSION, AND THEIR DECISIONS ARE

DOCUMENTED.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO

Name of the organization	ASSOCIATION OF THE GRADUATES (Employer identification number
	UNITED STATES MILITARY ACADEMY	Y	14-1260763
MT, NE, NV, NH, NJ, NM, NY	, NC, ND, OH, OR, PA, RI, SC, SD, TN, TX	, UT, VT, VI, WV, WI, WY	
FORM 990, PART VI, S	SECTION C, LINE 19:		
NPAOG'S FINANCIAL ST	TATEMENTS (ANNUAL AUDIT REPORT)	AND BYLAWS ARE AVAILABLE	
ON OUR WEBSITE FOR E	PUBLIC VIEWING, AND OUR CONFLIC	T OF INTEREST POLICY IS	
POSTED TO THE INTERN	NAL SECTION FOR EMPLOYEES ONLY.	THE CONFLICT OF INTEREST	
POLICY WOULD BE MADE	E AVAILABLE TO THE PUBLIC UPON 1	REQUEST.	
FORM 990, PART XI, I	LINE 9, CHANGES IN NET ASSETS:		
JBI INCOME FROM PART	TNERSHIP INVESTMENTS	-206,847.	
RECOVERY OF UNCOLLEC	CTIBLE PLEDGES	1,308,094.	
TOTAL TO FORM 990, E	PART XI, LINE 9	1,101,247.	

SCHEDULE R
(Eorm 990)

(Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service	Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.		Open to Public Inspection
Name of the organization	ASSOCIATION OF THE GRADUATES OF THE	Employer id	entification number
	UNITED STATES MILITARY ACADEMY	14-126	0763

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
LGL REAL ESTATE FOUNDATION, LLC - 13-4265639					ASSOCIATION OF THE
BLDG 698, HERBERT HALL, MILLS ROAD					GRADUATES OF THE UNITED
WEST POINT, NY 10996	REAL ESTATE HOLDING	NEW YORK	0.	0.	STATES MILITARY ACADEMY
WEST POINT ATHLETICS, LLC - 32-0434673					ASSOCIATION OF THE
BLDG 698, HERBERT HALL, MILLS ROAD	PROGRAM DESIGN &				GRADUATES OF THE UNITED
WEST POINT, NY 10996	DEVELOPMENT	NEW YORK	0.	76,127.	STATES MILITARY ACADEMY
	-				
	-				

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	cont	g) 512(b)(13) rolled tity?		
			501(c)(3))		501(c)(3))			Yes	No

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

Schedule R (Form 990) 2016

OMB No. 1545-0047

2016

ASSOCIATION	OF	THE	GRADUATES	OF	THE
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Schedule R (Form 990) 2016 UNITED STATES MILITARY ACADEMY

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j					
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign		rect controlling Predominant income Share of total Share of total (related, unrelated, income end-o		ect controlling entity excluded from tax under	Direct controlling entity (related, unrelated, excluded from tax under Share of total excluded from tax under assets			itionate Code V-UBI amount in box 20 of Schedule		Code V-UBI amount in box	Gener mana partn	al or Percentaç ^{ging} ownershi	ige ìip
		country)		sections 512-514)		455615	Yes	No	K-1 (Form 1065)	Yes	10				
												—			

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i Sec 512(t contr ent	(i) ction (b)(13) trolled tity?
		country)				400010		Yes	No
	1								
	1								

UNITED STATES MILITARY ACADEMY Schedule R (Form 990) 2016

Part V

1

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. Yes No During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity 1a **b** Gift, grant, or capital contribution to related organization(s) 1b c Gift, grant, or capital contribution from related organization(s) 1c d Loans or loan guarantees to or for related organization(s) 1d e Loans or loan guarantees by related organization(s) 1e f Dividends from related organization(s) 1f Sale of assets to related organization(s) 1g h Purchase of assets from related organization(s) 1h Exchange of assets with related organization(s) 1i j Lease of facilities, equipment, or other assets to related organization(s) 1j k Lease of facilities, equipment, or other assets from related organization(s) 1k 11 Performance of services or membership or fundraising solicitations for related organization(s) **m** Performance of services or membership or fundraising solicitations by related organization(s) 1m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) 1n n o Sharing of paid employees with related organization(s) 10 **p** Reimbursement paid to related organization(s) for expenses 1p Reimbursement paid by related organization(s) for expenses 1q **r** Other transfer of cash or property to related organization(s) 1r

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

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
<u>(4)</u>			
(5)			
<u>(6)</u>			

1s

Schedule R (Form 990) 2016 UNITED STATES MILITARY ACADEMY

14-1260763 Page 4

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a)	(b)	(c)	(d)	(e	e)	(f)	(g)	(1	h)	(i)	(j)	(k)	
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	(€ Are partner 501(c org:	e all rs sec.	Share of	Share of		ropor- nate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General o	Percentage	
of entity		(state or foreign	excluded from tax under	org:		total	end-of-year	alloca	tions?	of Schedule K-1	partner?	ownership	
		country)	sections 512-514)	Yes	No	income	assets	Yes	No	(Form 1065)	Yes No	<u> </u>	
												1	

Schedule R (Form 990) 2016

	(F	
Schedule R	(Form 99	0)2016

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

Form 926	Return by a U.S. Transferor of Prop		ļ	OMB No.	1545-0026			
(Rev. December 2013) Department of the Treasury Internal Revenue Service	epartment of the Treasury ternal Revenue Service ► Attach to your income tax return for the year of the transfer or distribution.							
Part I U.S. Tra	nsferor Information (see instructions)	or distribution.			^{nt} No. 128			
Name of transferor			Ide	ntifying numbe	(see instructions)			
Association of t	the Graduates of the			, ,	()			
United States M:	ilitary Academy		14	4-1260763				
1 If the transferor v	vas a corporation, complete questions 1a through 1d.							
a If the transfer wa	s a section 361(a) or (b) transfer, was the transferor controlled (under section	368(c)) by 5 or						
	corporations?			Yes	No No			
b Did the transfero	r remain in existence after the transfer?			Yes	No			
If not, list the cor	ntrolling shareholder(s) and their identifying number(s):							
	Controlling shareholder		Identify	ing number				
				5				
	vas a member of an affiliated group filing a consolidated return, was it the par ne and employer identification number (EIN) of the parent corporation:	rent corporation	?	Yes	No			
	Name of parent corporation	E	IN of pare	ent corporati	on			
d Have basis adjus	tments under section 367(a)(5) been made?			Yes	No			
	vas a partner in a partnership that was the actual transferor (but is not treated	1 as such under	section 36	67), complete				
questions 2a thro	d EIN of the transferor's partnership:							
	Name of partnership		EIN of p	partnership				
OAKTREE PRIVATE	INVESTMENT FUND IV, L.P.	47-165	9183					
b Did the partner p	ick up its pro rata share of gain on the transfer of partnership assets? \ldots			X Yes	No No			
c Is the partner dis	posing of its entire interest in the partnership?			Yes	X No			
d Is the partner dis	posing of an interest in a limited partnership that is regularly traded on an est	ablished						
securities market		<u></u>	<u></u>	Yes	X No			
Part II Transfer	ree Foreign Corporation Information (see instructions)							
3 Name of transfer	ee (foreign corporation)			tifying numb	er, if any			
OAKTREE MEZZANII	98-115	2076						
5 Address (includir	ng country)		4b Refer	rence ID num	ber			
190 ELGIN AVENUE								
	005 CAYMAN ISLANDS		<u> </u>					
CJ	country of incorporation or organization							
7 Foreign law char CORPORATION	acterization (see instructions)							
	foreign corporation a controlled foreign corporation?			Vee	X No			
	foreign corporation a controlled foreign corporation? Reduction Act Notice, see separate instructions.	<u></u>	<u></u>	Eorm 926 (F	X No Rev. 12-2013			
624531 04-01-16				FOITT 920 (F	16V. 12-2013)			

Form 926 (R	Rev. 12-2013)	ASSOCIATION	OF	THE	GRADUATES	OF	THE	UNITED	STATES	MILITARY	ACADEMY	14-1260763
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Part III Information Regarding Transfer of Property (see instructions)

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash	12/31/2016		116,054.		
Stock and					
securities					
Installment obligations,					
account receivables or					
similar property					
Similar property					
Foreign currency or other					
property denominated in					
foreign currency					
loreigh currency					
Inventory					
inventory					
Assets subject to					
depreciation recapture					
(see Temp. Regs. sec.					
1.367(a)-4T(b))					
Tangible property used in					
trade or business not listed					
under another category					
under another category					
Intangible					
property					
property					
Property to be leased					
(as described in final					
and temp. Regs. sec.					
1.367(a)-4(c))					
Property to be sold					
(as described in					
Temp. Regs. sec.					
1.367(a)-4T(d))					
Transfers of oil and gas					
working interests (as					
described in Temp.					
Regs. sec. 1.367(a)-4T(e))					
011					
Other property					
	1			1	1

Supplemental Information Required To Be Reported (see instructions):

SEE STATEMENT 5

	1926 (Rev. 12-2013) ASSOCIATION OF THE GRADUATES OF THE UNITED STATES MILITARY ACADEMY 14-1 rt IV Additional Information Regarding Transfer of Property (see instructions)	260763	Page 3
9	Enter the transferor's interest in the foreign transferee corporation before and after the transfer:		
	(a) Before% (b) After%		
10	Type of nonrecognition transaction (see instructions) IRC SECTION 351		
11	Indicate whether any transfer reported in Part III is subject to any of the following:		
а	Gain recognition under section 904(f)(3)	Yes	X No
b	Gain recognition under section 904(f)(5)(F)	Yes	X No
с	Recapture under section 1503(d)	Yes	X No
d	Exchange gain under section 987	Yes	X No
12	Did this transfer result from a change in the classification of the transferee to that of a foreign corporation?	Yes	X No
13	Indicate whether the transferor was required to recognize income under final and Temporary Regulations sections		
	1.367(a)-4 through 1.367(a)-6 for any of the following:		
а	Tainted property	Yes	X No
b	Depreciation recapture	Yes	X No
с	Branch loss recapture	Yes	X No
d	Any other income recognition provision contained in the above-referenced regulations	Yes	X No
14	Did the transferor transfer assets which qualify for the trade or business exception under section 367(a)(3)?	Yes	X No
15 a	Did the transferor transfer foreign goodwill or going concern value as defined in Temporary Regulations section 1.367(a)-1T(d)(5)(iii)?	Yes	X No
b	If the answer to line 15a is "Yes," enter the amount of foreign goodwill or going concern value transferred > \$		
16	Was cash the only property transferred?	X Yes	No
17 a	Was intangible property (within the meaning of section 936(h)(3)(B)) transferred as a result of the transaction?	Yes	X No
b	If "Yes," describe the nature of the rights to the intangible property that was transferred as a result of the transaction:		
b 			

Form 926 (Rev. 12-2013)

FORM 926

STATEMENT 5

STATEMENT PURSUANT TO 1.351-3(A) BY ASSOCIATION OF THE GRADUATES OF THE UNITED STATES MILITARY ACADEMY, A SIGNIFICANT TRANSFEROR (1) NAME AND EMPLOYER IDENTIFICATION NUMBER OF TRANSFEREE CORPORATION: NAME: OAKTREE MEZZANINE FUND IV (CAYMAN), L.P. EIN: 98-1152076 (2) DATE OF TRANSFER(S) OF ASSETS: VARIOUS (3) AGGREGATE FAIR MARKET VALUE AND BASIS OF PROPERTY TRANSFERRED: FAIR MARKET VALUE: \$116,054 (CASH), BASIS: \$116,054

(4) DATE AND CONTROL NUMBER OF PRIVATE LETTER RULING(S) ISSUED BY THE IRS IN CONNECTION WITH THE EXCHANGE: N/A

FORM 926 ADDITIONAL INFORMATION REQUIRED BY TEMPORARY STATEMENT 6 REGULATION SECTIONS 1.6038B-1T(C)(4)(III) AND (VII), AND 1.6038B-1T(C)(5) STATEMENT FILED PURSUANT TO TREAS. REG. SECTION 1.6038B-1(C) AND TEMP. REG. SECTION 1.6038B-1T(C) 1 **TRANSFEROR:** ASSOCIATION OF THE GRADUATES OF THE UNITED STATES MILITARY ACADEMY BLDG 698, HERBERT HALL, MILLS RD. WEST POINT, NY 10996 EIN: 14-1260763 OAKTREE PRIVATE INVESTMENT FUND IV, LP 333 SOUTH GRAND AVENUE 28TH FLOOR LOS ANGELES, CA 90071 EIN: 47-1659183 2(I) **TRANSFEREE:** OAKTREE MEZZANINE FUND IV (CAYMAN), L.P. **190 ELGIN AVENUE** GEORGETOWN, GRAND CAYMAN KY1-9005 EIN: 98-1152076 COUNTRY OF INCORPORATION: CAYMAN ISLANDS 2(II) ON VARIOUS DATES, THE ASSOCIATION OF THE GRADUATES OF THE UNITED STATES MILITARY ACADEMY MADE CONTRIBUTIONS TOTALING USD 116,054 (HAVING A FAIR MARKET VALUE AND BASIS OF \$116,054) TO THE CAPITAL OF OAKTREE MEZZANINE FUND IV (CAYMAN), L.P. IN AN IRC 351 EXCHANGE. 3 ASSOCIATION OF THE GRADUATES OF THE UNITED STATES MILITARY ACADEMY RECEIVED SHARES OF OAKTREE MEZZANINE FUND IV (CAYMAN), L.P. IN THE EXCHANGE. **4 PROPERTY TRANSFERRED:** A) CASH (VARIOUS DATES) FAIR MARKET VALUE: \$116,054 BASIS: \$116,054 4(I) ACTIVE BUSINESS PROPERTY N/A 4(II)STOCK OR SECURITIES TRANSFERRED N/A 4(III) DEPRECIATED PROPERTY N/A 4(IV) PROPERTY TO BE LEASED N/A 4(V) PROPERTY TO BE SOLD N/A TRANSFERS TO A FSC N/A 4(VI)4(VII) TAINTED PROPERTY N/A 4(VIII) FOREIGN LOSS BRANCH N/A 4(IX)OTHER INTANGIBLES N/A TRANSFER OF FOREIGN LOSS BRANCH PROPERTY N/A 5 5(I) BRANCH OPERATION N/A 5(II) BRANCH PROPERTY N/A 5(III) PREVIOUSLY DEDUCTED LOSSES N/A 5(IV) CHARACTER OF GAIN N/A 6 ASSETS TRANSFERRED IN AN EXCHANGE DESCRIBED IN CODE SEC. 361(A) OR 361(B) N/A