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CLIENT'S COPY



NOVEMBER 12, 2013

SALUTE TO MILITARY GOLF ASSOCIATION, INC 11308 WILLOW DALE DRIVE GERMANTOWN, MD 20876 ATTENTION: MR. ED HENDERSON

DEAR ED

ENCLOSED IS THE 2012 EXEMPT ORGANIZATION RETURN, AS FOLLOWS...

2012 FORM 990

EACH ORIGINAL SHOULD BE DATED, SIGNED AND FILED IN ACCORDANCE WITH THE FILING INSTRUCTIONS. THE COPY SHOULD BE RETAINED FOR YOUR FILES.

VERY TRULY YOURS,

DONALD K. MARSHALL

Filing Instructions

Prepared for:	Prepared by:
SALUTE TO MILITARY GOLF ASSOCIATION,	DEMBO JONES HEALY PENNINGTON & MARSHA
11308 WILLOW DALE DRIVE	6010 EXECUTIVE BOULEVARD, SUITE 900
GERMANTOWN, MD 20876	ROCKVILLE, MD 20852

2012 FORM 990

ELECTRONIC FILING:

THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS. RETURN FORM 8879-EO TO US BY AUGUST 15, 2013.

Form 990
Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

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



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

ΑΙ	For th	e 2012 calendar year, or tax year beginning and	ending		
B	Check if applicab	le: C Name of organization		D Employer identified	cation number
	Addre	SALUTE TO MILITARY GOLF ASSOCIATION,	INC		
	Name Chang			65-1	296873
	 		Room/suite		
	 				620-8846
	Amen	ded City, town, or post office, state, and ZIP code		G Gross receipts \$	529,517.
	Appli tion	GERMANTOWN, MD 20876		H(a) Is this a group re	eturn
	pendi	F Name and address of principal officer: JAMIE WINSLOW		for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates inc	luded? Yes No
		empt status: X 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1)	or 527	If "No," attach a	list. (see instructions)
		te: WWW.SMGA.ORG		H(c) Group exemption	
		f organization: Corporation Trust X Association Other	L Year	of formation: 2007	State of legal domicile: MD
Pa	art I	Summary			
e	1	Briefly describe the organization's mission or most significant activities: TO P	ROVIDE	REHABILITI	VE GOLF
Governance		EXPERIENCES FOR COMBAT-WOUNDED VETERANS			
/err		Check this box Lift the organization discontinued its operations or dispo			sets. 13
g	3	Number of voting members of the governing body (Part VI, line 1a)			13
<u>م</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)			4
ties	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)			50
Activities &	6	Total number of volunteers (estimate if necessary)			0.
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			0.
	d d	Net unrelated business taxable income from Form 990-T, line 34		Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		318,083.	346,985.
nue	9	Program service revenue (Part VIII, line 2g)		37,171.	181,184.
Revenue	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		785.	1,348.
č		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		356,039.	529,517.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		19,520.	81,177.
sus	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses		Total fundraising expenses (Part IX, column (D), line 25)			
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		225,425.	391,105.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		244,945.	472,282.
	19	Revenue less expenses. Subtract line 18 from line 12		111,094.	57,235.
Inces			Be	eginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		450,744.	490,959.
et A Ind F	21	Total liabilities (Part X, line 26)		17,460.	440.
	22	Net assets or fund balances. Subtract line 21 from line 20		433,284.	490,519.
	art II	Signature Block alties of perjury, I declare that I have examined this return, including accompanying schedule	o and state	unto and to the best of m	knowledge and helief it is
UIIŰ	er heur	ances of perjury, i deciare mari nave examined this return, including accompanying schedule	55 anu Statem	ients, and to the pest of my	/ KIIOWIEUYE AITU DEITEI, IL IS

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer JAMIE WINSLOW, DIRECTO Type or print name and title	DR	Da	te				
	Print/Type preparer's name	Preparer's signature	Date					
Paid	DONALD K. MARSHALL			self-employed P00173665				
Preparer	Firm's name DEMBO JONES HEAI	LY PENNINGTON & MARSH	ALL Fire	m's EIN 52-1073331				
Use Only	Firm's address 🖕 6010 EXECUTIVE B	BOULEVARD, SUITE 900						
	ROCKVILLE, MD 20852 Phone no. (301)770-5100							
May the I	RS discuss this return with the preparer shown ab	ove? (see instructions)		X Yes No				
232001 12-1	232001 12-10-12 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2012)							

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

1	Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission:
	TO PROVIDE REHABILITIVE GOLF EXPERIENCES FOR COMBAT-WOUNDED VETERANS IN AN EFFORT TO IMPROVE THE QUALITY OF LIFE FOR THESE AMERICAN HEROES
2	Did the organization undertake any significant program services during the year which were not listed on
-	the prior Form 990 or 990-EZ? \Box Yes X If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X If "Yes," describe these changes on Schedule O.
1	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section $501(c)(3)$ and $501(c)(4)$ organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
ła	(Code:)(Expenses \$ 248,001. including grants of \$) (Revenue \$ 369,52 TRAINING OF COMBAT WOUNDED VETERANS - SMGA ACCOMPLISHED THE FOLLOWING SO FAR: 1) TO DATE WE HAVE EQUIPPED 1,000 WOUNDED WARRIORS WITH PROPERLY FITTED GOLF CLUBS 2) WE HAVE, TO DATE, OFFERED FREE LESSONS IN EXCESS OF 1,500 COMBAT WOUNDED VETERANS 3) ENABLED THE REHABILITIV BENEFITS OF GOLF TO IMPROVE THE MENTAL AND PHYSICAL CONDITION OF EACH VETERAN WHO HAS PARTICIPATED IN AN SMGA GOLF PROGRAM 4) PROVIDED
	WOUNDED WARRIORS WITH INDIVIDUALIZED PLAYER DEVELOPMENT PROGRAMS - OFFERING GOLF CLINICS, PERSONAL LESSONS, SPECIALIZED EQUIPMENT, AND GOLF EXPERIENCES.
łb	(Code:) (Expenses \$ 43,406. including grants of \$) (Revenue \$ 120,08
	ANNUAL SMGA CHARITY GOLF CLASSIC - HELD AT MONOR COUNTRY CLUB IN ROCKVILLE, MD, THIS IS THE SAME COURSE THAT SMGA CO-FOUNDERS, JIM EST AND JAMIE WINSLOW, LEARNED TO PLAY THE GAME OF GOLF. THE TOURNAMENT HAS SOLD OUT FOR SEVEN STRAIGHT YEARS, AND RAISES TENS OF THOUSANDS O DOLLARS TO SUPPORT POST-9/11 WOUNDED AMERICAN VETERANS. A FULL HOUSE MORE THAN 144 PLAYERS, VETERANS, AND GUESTS GATHER TO PLAY AND TO LISTEN TO THE EVENING'S KEYNOTE SPEAKER EACH YEAR. THE SMGA BOARD THANKS ALL PARTICIPANTS, SPONSORS, AND VOULNTEERS FOR MAKING THE EVEN SO SUCCESSFUL. ALL NET PROCEEDS FROM THE EVENTS HAVE EITHER GONE OR WILL GO TO THE PURCHASE OF EQUIPMENT, LESSONS, AND GOLF COURSE ACCESS FOR POST-9/11 WOUNDED VETERANS.
łc	(Code:)(Expenses \$ 11,406. including grants of \$) (Revenue \$ 38,90 BAH TOURNAMENT - VIA A PARTNERSHIP BETWEEN SMGA AND THE INTERNATIONAL CONSULTING FIRM BOOZ ALLEN HAMILTON, A SERIES OF TOURNAMENTS ACROSS T COUNTRY ARE HELD TO BENEFIT SMGA'S GROWING LIST OF CHAPTER AND AFFILIATE LOCATIONS. TEN EVENTS WERE HELD THIS YEAR, WHICH DREW LOCA WOUNDED WARRIORS AND BAH STAFF. NET PROCEEDS FROM THE EVENTS WILL SUPPORT LOCAL SMGA CHAPTERS AND/OR SMGA'S NEWLY FORMED AMERICAN GOLFE PROGRAM.
łd	Other program services (Describe in Schedule O.) (Expenses \$ 80,882 • including grants of \$) (Revenue \$ 1,000 •)
le	Total program service expenses ► 383,695.
	Form 990
2002	

SALUTE TO MILITARY GOLF ASSOCIATION, INC

Form 990 (2012)

65-1296873 Page 2

Form	aan	(2012)	
FOILI	990	(2012)	

SALUTE TO MILITARY GOLF ASSOCIATION, INC 65-1296873 Page 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	1
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
		2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			x
	public office? If "Yes," complete Schedule C, Part I	3		^
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			37
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			1
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
•	-	8		x
9	Schedule D, Part III			_ _
3				1
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
40	If "Yes," complete Schedule D, Part IV	9		~
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			v
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			1
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			1
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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	e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			Х
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	1
100	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
IZa		100	х	1
L	Schedule D, Parts XI and XII	12a	47	
a	Was the organization included in consolidated, independent audited financial statements for the tax year?	10		x
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		A X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			1
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			1
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			í
-	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			
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
10	To all a_1 is a complete conclude a_1 and m_1	10		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			x
~~	complete Schedule G, Part III	19		A X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		A
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	0000	00.1-
		Form	330	(2012)

232003 12-10-12

12151112 758104 07729

Form 990 (2012)

Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		x
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization mintain an escrow account other than a refunding escrow at any time during the year to defease	2-10		
Ŭ	any tax-exempt bonds?	24c		
Ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	2.10		
Lou	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	200		
	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		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disgualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
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
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
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		Х
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	33		X
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		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? 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	
		Form	990	(2012)

232004 12-10-12

Form	990 (2012) SALUTE TO MILITARY GOLF ASSOCIATION, INC 65-1296	873	P	age 5
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 15			
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 reportable gaming			
	(gambling) winnings to prize winners?	1c		
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 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	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 services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		37
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	_		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
0	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	30		
а	Initiation fees and capital contributions included on Part VIII, line 12			
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:			
	Gross income from members or shareholders 11a			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
~	amounts due or received from them.) 11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	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.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	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			
с	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			990	(2012)

232005 12-10-12

Form 990 (2012)

SALUTE TO MILITARY GOLF ASSOCIATION, INC 65-1296873 Page 6

	Check if Schedule O contains a response to any question in this Part VI					[
ec	tion A. Governing Body and Management					Т
10	Enter the number of voting members of the governing body at the end of the tax year	1 a	1	3	Yes	╉
Id	If there are material differences in voting rights among members of the governing body at the end of the tax year	la		4		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
h	Enter the number of voting members included in line 1a, above, who are independent	1b	1	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh			4		
2				2		1
3	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the	 na dira	st supervision	-		-
0	of officers, directors, or trustees, or key employees to a management company or other person?			3		
4	Did the organization make any significant changes to its governing documents since the prior Form					-
5	Did the organization become aware during the year of a significant diversion of the organization's as					-
6	Did the organization become aware during the year of a significant diversion of the organization state.			6		-
	Did the organization have members, stockholders, or other persons who had the power to elect or a					-
1 a	more members of the governing body?			7a		
h	Are any governance decisions of the organization reserved to (or subject to approval by) members,			10		┥
D				7b		
8	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar hv th	e following.	10		
	The governing body?			8a	X	1
	Each committee with authority to act on behalf of the governing body?			8b	X	-
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re			00		-
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		
ect	tion B. Policies (This Section B requests information about policies not required by the Internal F			9		-
		evenu	= 000e.)		Yes	-
02	Did the organization have local chapters, branches, or affiliates?			10a	103	-
	If "Yes," did the organization have written policies and procedures governing the activities of such o			104		-
D	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
1-	Has the organization provided a complete copy of this Form 990 to all members of its governing bo			11a	x	-
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	ay Derc		Tia		-
				12a		1
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			12a	-	-
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "			120	-	-
C	in Schedule O how this was done			12c		
3	Did the organization have a written whistleblower policy?			13	-	-
4	Did the organization have a written document retention and destruction policy?			14	-	-
4 5	Did the process for determining compensation of the following persons include a review and approv			14		-
5	persons, comparability data, and contemporaneous substantiation of the deliberation and decision'	-	laependent			
2	The organization's CEO, Executive Director, or top management official			15a		1
	Other officers or key employees of the organization			15a		-
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			150		-
6-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	mont	vith a			
va	taxable entity during the year?			16a		1
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate			104		-
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization to evaluate the steps to safeguard the steps to safeguard the organization to evaluate the steps to safeguard the step		•			
	exempt status with respect to such arrangements?			16b		1
ect	tion C. Disclosure			100		
7	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright MD					-
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sect	ion 501(c)(3)s only) availat		-
0	for public inspection. Indicate how you made these available. Check all that apply.) availai	JIE	
	Own website Another's website X Upon request Other (explain	n in Sci	hedule ()			
9	Describe in Schedule O whether (and if so, how), the organization made its governing documents, c		,	ind fine	ncial	
	statements available to the public during the tax year.	onnict	or interest policy, a	u iu iii id	icidi	
0	Statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books a	ind roa	ords of the organi-	ation.		
20	THE ORGANIZATION - 240-620-8846		orus or the organiz	.au011. 🖡		-
	11308 WILLOW DALE DRIVE, GERMANTOWN, MD 20876					-
2006 2-10-				Form	1 990	5
						1

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

• List all of the organization's **former** officers, key employees, 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.

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

(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average	(do		Pos		than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week	<u> </u>	cer an I	id a d I	recto	or/trus	tee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for	or di	ee ee			ated		organization	(W-2/1099-MISC)	from the
	related organizations	ustee	trust		e	suadu		(W-2/1099-MISC)		organization and related
	below	ual tr	tional		yolqr	st con yee				organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationo
(1) JAMIE WINSLOW	3.00	-	-		-					
CHAIRMAN		x						0.	Ο.	0.
(2) JIM ESTES	3.00									
CO-FOUNDER AND DIRECTOR		x						0.	0.	0.
(3) BRIAN FINAN	3.00									
PRESIDENT		X						0.	Ο.	0.
(4) EDWIN HENDERSON	3.00									
TREASURER		X						0.	0.	0.
(5) TONY FERNANDEZ	3.00									
GENERAL COUNSEL		Х						0.	0.	0.
(6) PETER BECHTEL	3.00									
SECRETARY		Х						0.	0.	0.
(7) JIM KNORR	3.00									
DIRECTOR		X						0.	0.	0.
(8) RAMON PADILLA	3.00									
DIRECTOR		х						0.	0.	0.
(9) ANDY MCCANN	3.00									•
DIRECTOR		X						0.	0.	0.
(10) DARIN AYERS	3.00								0	0
VICE-PRESIDENT	2 00	X						0.	0.	0.
(11) CHARLES J. EGGLESTON	3.00	.,,							0	0
DIRECTOR	2 00	X						0.	0.	0.
(12) JERRY MILLS	3.00							0	0	0
DIRECTOR	2 00	X						0.	0.	0.
(13) CRAIG NIIYA	3.00	x						0.	0.	0
DIRECTOR		A				<u> </u>		0.	0.	0.
		-								
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	+	-								
		1								
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Form 990 (2012)

		O MILITZ	AR	2 (GOI	Γ	A	SS	OCIATION, II	<u>NC 65-1</u>	296	873	Page 8	8
Par	t VII Section A. Officers, Directors, True		ploy	ees	, and	d Hi	ighe	st C	Compensated Employ	ees (continued)				
	(A) Name and title	(B) Average hours per week	box	not c , unle	ss pe	ition more rson	than is bot pr/trus	h an	(D) Reportable compensation from	(E) Reportable compensatio from related	on	Esti amo	(F) mated ount of ther	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatior (W-2/1099-MI	าร	froi orgar and	ensation m the nization related nizations	
			-											
														_
	Sub-total								0		0.		0	
d	Total from continuation sheets to Part V Total (add lines 1b and 1c)								0	•	0.		0	
2	Total number of individuals (including but i compensation from the organization	tot ilmited to tr	lose	liste	ed al		e) wr	10 r	eceived more than \$10	0,000 of reportab			(Yes No	0
3	Did the organization list any former officer line 1a? <i>If</i> " <i>Yes</i> ," <i>complete Schedule J for</i> 3											3	X	
4	For any individual listed on line 1a, is the s and related organizations greater than \$15	um of reportab 0,000? <i>If</i> "Yes,	le co " <i>co</i>	omp mple	ensa ete S	atior S <i>che</i>	n and edule	d ot e <i>J 1</i>	her compensation fron for such individual	the organization		4	X	
5	Did any person listed on line 1a receive or rendered to the organization? <i>If</i> "Yes," <i>contion</i> B. Independent Contractors											5	X	
1	Complete this table for your five highest co the organization. Report compensation for	-									npens	ation fro)m	_
	(A) Name and business			ONE					(B) Description of		с	(C) ompens		
								_						
2	Total number of independent contractors (\$100,000 of compensation from the organ		not li	mite	d to		se lis 0	stec	above) who received	more than				
	X X											Form 9	90 (2012	2)

232008 12-10-12

	990 t VI	(2012) SALUTE TO MILITARY G	OLF ASSOCIA	TION, INC	65-1296	873 Page 9
. a		Check if Schedule O contains a response to any question	n in this Part VIII			
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Program Service Contributions, Gifts, Grants Revenue and Other Similar Amounts	k c c f	FLAG & TEE PURCHASES561499AUCTION PURCHASES561499	346,985.	178,074. 2,650.		
Pr.		All other program service revenue				
	ç	Total. Add lines 2a-2f	181,184.			
	3 4 5	Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties	1,348.			1,348.
	k c	(i) Real (ii) Personal Gross rents				
	7 a	Gross amount from sales of (i) Securities (ii) Other assets other than inventory Less: cost or other basis and sales expenses	-			
/enue	c	Gain or (loss) Net gain or (loss) Gross income from fundraising events (not including \$ of				
Other Revenue		contributions reported on line 1c). See Part IV, line 18 Less: direct expenses Net income or (loss) from fundraising events	_			
	9 a	Gross income from gaming activities. See Part IV, line 19 Less: direct expenses b	_			
	0 10 a	 Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances Less: cost of goods sold b 				
		Net income or (loss) from sales of inventory				
		Miscellaneous Revenue Business Cod	e			
	11 a					
	k					
	0					
	e	Total. Add lines 11a-11d				
	12	Total revenue. See instructions.	529,517.	181,184.	0.	1,348.
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Form 990 (2012	2)
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SALUTE TO MILITARY GOLF ASSOCIATION, INC 65-1296873 Page 10

Sectors Of IC(d) and 501(-)(d) organizations must complete al columns. All other angulations must complete column (A) IX Check of 15 Scheid Columna response to any question in the Plart IX. (D) (D) <t< th=""><th>Pa</th><th>t IX Statement of Functional Expense</th><th>ses</th><th></th><th></th><th></th></t<>	Pa	t IX Statement of Functional Expense	ses			
De not include amounts reported on lines 6b, 7b, 8b, 9b, and 7b or 7bar Vice Total expenses Program service supervises Management and general expenses Fundament of the contracting expension 2 Grants and other assistance to individuals in the United States. See Part V, line 22 Imagement and general expenses Fundament of the contracting expensions 3 Grants and other assistance to individuals in the United States. See Part V, line 22 Imagement and general expensions Imagement and general expensions 4 Bondits paid to or form mombers Imagement and general expensions Imagement and general expensions Imagement and general expensions 5 Compensation of current officers, directors, trustees, and key employees Imagement and general expensions Imagement and general expensions 0 Compensation of incluid data expensions (still and 4358) ((11)) and general expensions Imagement and general expensions Imagement and general expensions 0 Compensation incluided advect, to fisqualified general expensions Imagement and general expensions Imagement and general expensions 0 Compensation incluided advect, to fisqualified general expenses Imagement and general expenses Imagement and general expenses 0 Compensation incluided advect, to fisqualified general expenses I	Secti	on 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. All oth	er organizations must co	omplete column (A).	
Do Not Notice Browns for Section 2011 (Res 0.0) Total expenses Program service expenses		Check if Schedule O contains a respo	nse to any question in thi	s Part IX		X
a grantational in the United States. See Part IV, line 22				Program service	Management and	Fundraising
2 Grants and other assistance to molviculas in the United States. See Part V, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part V, line 5 fain 16 4 Benefits paid to or for members 5 Compensation of Lunder discove, to disqualified persons (as defined under section 4586(1/1)) and persons described in section 4586(1/1) and persons described in section 458(6(1/1)) and persons described in section	1	Grants and other assistance to governments and				
the United States. See Part IV, line 22 Image: Comparison of universe of the second state the United States. See Part IV, lines 15 and 16 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Image: Comparison of universe of the second state the United States. See Part IV, lines 15 and 16 4 Benefits part IV, lines 15 and 16 Image: Comparison of universe of the second state State Second State the Second Stat		organizations in the United States. See Part IV, line 21				
3 Garts and other assistance to governments, organizations, and individual outside the United States. See Part IV, lines 15 and 18	2	Grants and other assistance to individuals in				
organizations, and individuals outside the United States. See Part IV, lines 15 and 16		the United States. See Part IV, line 22				
Under States: See Part IV, Ines 15 and 16 Image: Section 4000000000000000000000000000000000000	3	Grants and other assistance to governments,				
4 Benefits paid to of rownebers. 5 Compensation of current officers, directors, firstees, and key employees. 6 Compensation of included above, to disgualled persons (ascible in ascina 4950(c)(1) and persons discribed in ascina 4950(c)(2)(0) 6 1, 177. 29, 359. 16, 818. 15, 000. 9 Persoin plan ascinals and contributions (include ascin 4950(c)(1) and persons discribed in ascinals and contributions (include ascin 4950(c)(1) and persons discribed in ascinals and contributions (include ascin 4950(c)(1) and persons discribed in ascinals and contributions (include ascin 4950(c)(1) and persons discribed in ascinals and contributions (include ascin 4950(c)(1) and persons discribed in ascinals and contributions (include ascinals and cont		organizations, and individuals outside the				
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tustees, and key employees	4					
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7 Other statifies and vages 61,177. 29,359. 16,818. 15,000. 8 Persion plan accruals and contributions; linking services. See Part IV, line 17 20,000. 10,000. 5,000. 5,000. 9 Other employee benefits 20,000. 10,000. 5,000. 5,000. 9 Payofit axes						
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9 Other employee benefits	8		20 000	10 000	5 000	5 000
10 Payrol taxes	0		20,000.	10,000.	5,000.	5,000.
11 Fees for services (non-employees):						
a Management						
b Legal						
c Accounting						
d Lobbying	c					
e Professional fundraising services. See Part IV, line 17 f Investment management fees g Chter, (If line 11g annue exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royatties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conterences, conventions, and meetings 21 Advertising and promotion 22 Depreciation, depletion, and amortization 23 116 24 amount kist line 24e expenses in line 24e. If line 24e expenses in line 24e. If line 24e expenses in Schedule 0.) a GOLF EQUIPMENT b GOLF LESSONS c CAPS , SHIRTS , & CLOTHIN 4 At other expenses. Est E SCH O 25 Joint costs. Complete his line only if the organization reported in column (B) joint costs. From a combined educational expenses. Step Sch Cot 26 Joint costs. Complete his line only if the organization reported in column (B) joint costs. From a combined educational expenses. Step Sch	d					
f Investment management fees g Other. (If line 11g axount exceeds 10% of line 25, column (A) amount, list ine 11g expenses on Sch 0.) 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royatiles 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 21 Payments to affiliates 22 Depreciation, depletion, and amortization 3 15.817. 21 Payments to affiliates 22 Depreciation, depletion, and amortization 3 101, 816. 101, 816. 101, 816. 24 Other expenses in line 24e. If line 24e amount exceeds 10% of line 25. column (A) amount, list line 24e expenses on Schedule 0.) a GOLF F LESSONS c CAPS , SHIRTS , & CLOTHIN 48, 324. d I other expenses SEE SCH O 28, 180. 28 Ja35. 64, 900. 25, 435. c All other expenses SEE SCH O 21, 335. 64,	е					
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)	f					
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13 Office expenses Information technology 14 Information technology 127. 15 Royalties 127. 16 Occupancy 127. 17 Travel 28,043. 27,491. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 127. 127. 19 Conferences, conventions, and meetings 21,693. 13,939. 4,254. 3,500. 20 Interest		column (A) amount, list line 11g expenses on Sch 0.)				
14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 21 693. 29 Depreciation, depletion, and amortization 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 21 5,817. 23 Insurance 24 amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a GOLF EQUIPMENT b GOLF EXPENSE e All other expenses b SEE SCH O 25 Total functional expenses. Add lines 1 through 24e 472, 282. 383, 695. 64, 087. 24, 500. 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined e	12	Advertising and promotion				
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18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses, Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount, list line 24e expenses on Schedule 0.) a GOLF EQUIPMENT b GOLF LESSONS c CAPS, SHIRTS, & CLOTHIN d TOURNAMENT EXPENSE e All other expenses. Add lines 1 through 24e d Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here	16	Occupancy		07 401		
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19 Conferences, conventions, and meetings 21,693. 13,939. 4,254. 3,500. 20 Interest 21 Payments to affiliates 21 21,693. 13,939. 4,254. 3,500. 21 Payments to affiliates 21,693. 13,939. 4,254. 3,500. 22 Depreciation, depletion, and amortization 5,817. 5,817. 23 23 Insurance 3,156. 3,156. 3 24 amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a GOLF EQUIPMENT 101,816. 101,816. b GOLF LESSONS 62,614. 62,614. 62,614. 62,614. c CAPS, SHIRTS, & CLOTHIN 48,324. 45,396. 2,928. d TOURNAMENT EXPENSE 28,180. 28,180. e e All other expenses. SEE SCH O 91,335. 64,900. 25,435. 1,000. 25 Total functional expenses. Add lines 1 through 24e 472,282. 383,695. 64,087. 24,500. 26 Joint costs. from a combined educational campaign and fundraising solicitation. Check here <th>18</th> <th></th> <th></th> <th></th> <th></th> <th></th>	18					
20 Interest		-	21 602	12 020	4 254	2 500
21 Payments to affiliates 5,817. 22 Depreciation, depletion, and amortization 5,817. 23 Insurance 3,156. 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 101,816. a GOLF EQUIPMENT 101,816. 101,816. b GOLF LESSONS 62,614. 62,614. c CAPS, SHIRTS, & CLOTHIN 48,324. 45,396. 2,928. d TOURNAMENT EXPENSE 28,180. 28,180. e All other expenses. Add lines 1 through 24e 472,282. 383,695. 64,087. 24,500. 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if tollowing SOP 98-2 (ASC 958-720) if tollowing SOP 98-2 (ASC 958-720)			21,095.	13,939.	4,234.	5,500.
22 Depreciation, depletion, and amortization 5,817. 5,817. 23 Insurance 3,156. 3,156. 24 Other expenses. Itemize expenses on to 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.) 101,816. 101,816. a GOLF EQUIPMENT 101,816. 0 b GOLF LESSONS 62,614. 62,614. c CAPS, SHIRTS, & CLOTHIN 48,324. 45,396. 2,928. d TOURNAMENT EXPENSE 28,180. 28,180. 25,435. 1,000. 25 Total functional expenses. Add lines 1 through 24e 472,282. 383,695. 64,087. 24,500. 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if tollowing SOP 92-2 (ASC 958-720) if tollowing SOP 92-2 (ASC 958-720) 24,500.						
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amount, list line 24e expenses on Schedule 0.) 101,816. 101,816. a GOLF EQUIPMENT 101,816. 101,816. b GOLF LESSONS 62,614. 62,614. c CAPS, SHIRTS, & CLOTHIN 48,324. 45,396. 2,928. d TOURNAMENT EXPENSE 28,180. 28,180. e All other expenses SEE SCH O 91,335. 64,900. 25,435. 1,000. 25 Total functional expenses. Add lines 1 through 24e 472,282. 383,695. 64,087. 24,500. 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720) if following SOP 98-2 (ASC 958-720)		above. (List miscellaneous expenses in line 24e. If line				
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d TOURNAMENT EXPENSE 28,180. 28,180. e All other expenses SEE SCH O 91,335. 64,900. 25,435. 1,000. 25 Total functional expenses. Add lines 1 through 24e 472,282. 383,695. 64,087. 24,500. 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ □ if following SOP 98-2 (ASC 958-720) Image: Complete the solution of the solution. Check here ▶ □ if following SOP 98-2 (ASC 958-720) Image: Complete the solution of the solution of the solution of the solution of the solution. Check here ▶ □ if following SOP 98-2 (ASC 958-720)	b	GOLF LESSONS				
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26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)	е	·				1,000.
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶			472,282.	383,695.	64,087.	24,500.
educational campaign and fundraising solicitation. Check here ▶if following SOP 98-2 (ASC 958-720)	26					
Check here Figure if following SOP 98-2 (ASC 958-720)						
	22201	• · · · · · · · · · · · · · · · · ·				Form 990 (2012)

Net Assets or Fund Balances

10a Land, buildings, and equipment: cost or other 58,442. basis. Complete Part VI of Schedule D 10a 10,799. 21,196. b Less: accumulated depreciation 10b 10c Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 Intangible assets 14 15 Other assets. See Part IV, line 11 450,744. **Total assets.** Add lines 1 through 15 (must equal line 34) 16 17,460. 17 Accounts payable and accrued expenses Grants payable 18 19 Deferred revenue Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disgualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 17,460. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here 🕨 🔟 and complete lines 27 through 29, and lines 33 and 34. 433,284. Unrestricted net assets 27 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30

SALUTE TO MILITARY GOLF ASSOCIATION, INC

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

Cash - non-interest-bearing

Savings and temporary cash investments

Pledges and grants receivable, net

Accounts receivable, net

Loans and other receivables from other disgualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing

Notes and loans receivable, net

Inventories for sale or use

Prepaid expenses and deferred charges

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

Loans and other receivables from current and former officers, directors,

employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L

trustees, key employees, and highest compensated employees. Complete

65-1296873 Page 11

(B)

End of year

443,316.

47,643.

490,959

440

440.

490,519.

490,519.

490,959.

Form **990** (2012)

(A)

Beginning of year

429,548.

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433,284.

450,744.

Part X Balance Sheet

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12151112 758104 07729

Liabilities

Assets

Part II of Schedule L

Form 990 (2012)

Form	990 (2012) SALUTE TO MILITARY GOLF ASSOCIATION, INC	65-1296	873	Pag	ge 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
				_	
1	Total revenue (must equal Part VIII, column (A), line 12)	1			17.
2	Total expenses (must equal Part IX, column (A), line 25)	2	472		
3	Revenue less expenses. Subtract line 2 from line 1	3			35.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	433	3,2	84.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			_	
	column (B))	10	49(),5	19.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			37	
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the			37	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			v
	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 requ				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		0010)

Form **990** (2012)

	DULE A 90 or 990-EZ)	Put	olic Charity St	tatus	and P	ublic	Supp	ort		OMB No. 1545-0047
Department c Internal Reve	of the Treasury nue Service		te if the organization is 4947(a)(1) no tach to Form 990 or Fo	onexempt	charitable	e trust.				Open to Public Inspection
Name of	the organizati				-				mployer	identification number
		SALUTE	TO MILITARY	GOLF	ASSOC	IATIO	N, IN	C	6	5-1296873
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part	.) See inst	ructions.		
The organ	nization is not a	private foundation	because it is: (For lines 1	I through [.]	11, check	only one b	ox.)			
1 🛄	A church, co	vention of churche	s, or association of churc	ches desc	ribed in se	ction 170	(b)(1)(A)(i)			
2	A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Scl	hedule E.)						
3			tal service organization of		in section	170(b)(1)	(A)(iii).			
4	A medical res	earch organization	operated in conjunction	with a hos	pital desci	ribed in se	ction 170	(b)(1)(A)(i	ii). Enter	the hospital's name,
	city, and stat	e:								
5	An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	perated by	a governr	mental un	it describ	bed in
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)							
6	A federal, sta	te, or local governm	ent or governmental unit	t described	d in sectio	n 170(b)(1	I)(A)(v).			
7 X	An organizati	on that normally rec	eives a substantial part o	of its supp	ort from a	governme	ental unit o	or from the	e general	public described in
	section 170(b)(1)(A)(vi). (Comple	te Part II.)							
8	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)					
9	An organizati	on that normally rec	eives: (1) more than 33 1	I/3% of its	support fi	rom contri	butions, m	nembersh	ip fees, a	and gross receipts from
	activities rela	ted to its exempt fur	nctions - subject to certa	iin excepti	ons, and (2	2) no more	e than 33 1	/3% of its	s suppor	t from gross investment
	income and u	inrelated business t	axable income (less sect	ion 511 ta	x) from bu	sinesses a	acquired b	y the orga	anization	after June 30, 1975.
	See section	509(a)(2). (Complete	e Part III.)							
10	-	•	perated exclusively to tes	-	-			-		
11 📖			perated exclusively for th							
			ations described in section				2). See sec	tion 509	(a)(3). Ch	leck the box that
			organization and comple							
	a 🛄 Type I				nctionally i	•				n-functionally integrated
e 📖			t the organization is not							
			han one or more publicly						9(a)(1) or	section 509(a)(2).
f			ten determination from t	the IRS that	at it is a Ty	ре I, Туре	II, or Type	e III		
		ganization, check th								
g	-		organization accepted an			-				
			irectly controls, either al							
	0	0,	upported organization?							11g(i)
			n described in (i) above?							11g(ii)
h		•	person described in (i) of about the supported or							11g(iii)
	FIOVICE LITE IN	bilowing information	about the supported org	ganization	(5).					
(1) Nomo	ofourported		(III) Type of organization	(iv) is the o	rganization	(v) Did vou	i notify the	(vi)	s the	(wii) Amount of monotony
	of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9	in col. (i) lis		organizat	ion in col.	organizati	on in col	(vii) Amount of monetary support
orge	amzation		above or IRC section	governing	document?	(i) of your	support?	(i) organiz U.S	S.?	Support
			(see instructions))	Yes	No	Yes	No	Yes	No	
									1	
									1	

Total	
LHA For	Paperw

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

Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-12

Schedule A (Form 990 or 990-EZ) 2012 SALUTE TO MILITARY GOLF ASSOCIATION, INC65-1296873 Page 2

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	61,449.	135,790.	234,582.	318,083.	346,985.	1096889.
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 \dots						
4	Total. Add lines 1 through 3	61,449.	135,790.	234,582.	318,083.	346,985.	1096889.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						273,301.
	Public support. Subtract line 5 from line 4.						823,588.
Sec	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	61,449.	135,790.	234,582.	318,083.	346,985.	1096889.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources \dots			759.	785.	1,348.	2,892.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital		F 140	41.0	0 000	4.50	0 000
	assets (Explain in Part IV.)		5,149.	418.	2,996.	460.	9,023.
	Total support. Add lines 7 through 10						1108804.
	Gross receipts from related activities,	,	,			12	
13	First five years. If the Form 990 is for	-	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	. —
Sec	organization, check this box and stor ction C. Computation of Publ		rcentage				>
	Public support percentage for 2012 (I			olump (f))		14	74.28 %
	Public support percentage for 2012 (Public support percentage from 2011					15	81.20 %
	33 1/3% support test - 2012. If the c						
104	stop here. The organization qualifies						
h	33 1/3% support test - 2011. If the c						
N	and stop here. The organization qual						
17-	10% -facts-and-circumstances tes						
170	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
h	10% -facts-and-circumstances tes						
N	more, and if the organization meets the	-					
	organization meets the "facts-and-cire				• •		
18	Private foundation. If the organization						s
				.,,,		dule A (Form 990	

232022 12-04-12

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

Page 3

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

	idar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services 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 disqualified persons						
	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						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
aler	idar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Tota
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is						
2	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a secti	ion 501(c)(3) oraa	nization,
	check this box and stop here	-			•		
Sec	tion C. Computation of Publi	c Support Pe	rcentage				····· *
	Public support percentage for 2012 (li			column (f))		15	
	Public support percentage from 2011						
16							
	tion D. Computation of Inves					17	
Sec	-		nn (f) divided by li				
Sec 17	Investment income percentage for 20	12 (line 10c, colur					
Sec 17 18	Investment income percentage for 20 Investment income percentage from 2	12 (line 10c, colur 011 Schedule A,	Part III, line 17			18	e 17 is not
Sec 17 18 19a	Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests - 2012. If the	12 (line 10c, colur 2011 Schedule A, organization did r	Part III, line 17 not check the box	on line 14, and line	e 15 is more than	18 33 1/3% , and line	
Sec 17 18 19a	Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests - 2012. If the more than 33 1/3%, check this box an	12 (line 10c, colur 1011 Schedule A, organization did r nd stop here. The	Part III, line 17 not check the box e organization qua	on line 14, and line lifies as a publicly	e 15 is more than supported organi	18 33 1/3%, and line ization	►
5ec 17 18 19a b	Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests - 2012. If the more than 33 1/3%, check this box an 33 1/3% support tests - 2011. If the	12 (line 10c, colur 011 Schedule A, organization did r nd stop here. The organization did r	Part III, line 17 not check the box e organization qua not check a box or	on line 14, and line lifies as a publicly n line 14 or line 19a	e 15 is more than supported organi a, and line 16 is m	18 33 1/3%, and line ization nore than 33 1/3%	, and
Sec 17 18 19a b	Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests - 2012. If the more than 33 1/3%, check this box an	12 (line 10c, colur 011 Schedule A, organization did r ad stop here. The organization did r ck this box and s	Part III, line 17 not check the box e organization qua not check a box or top here. The orga	on line 14, and line lifies as a publicly n line 14 or line 19a anization qualifies	e 15 is more than supported organi a, and line 16 is m as a publicly sup	18 33 1/3%, and line ization nore than 33 1/3% ported organization	▶ , and pn►