



ASI Board of Directors 2020/2021

Dylan Crivello Chair and Chief of Staff

Michael Garrett
President & CEO

Tim Pelayo

Executive Vice President

Andrew Gamboa VP of Student & University Affairs

> Caleb Standley CoBA Representative

Jacqueline Montaño CoBA Representative

Julia Glorioso CHABSS Representative

Alex Chavez CHABSS Representative

Risa Lindamood CEHHS Representative

Lauren Gonzalez
CSTEM Representative

Jenna Dotson Student at Large Representative for Sustainability

Sarah Ortiz Student at Large Representative for Viversity & Inclusion Representative

Christopher King Student at Large Representative for Viversity & Inclusion Representative

Jacob Peirce Veterans Student Representative

Advisors
Annie Macias
Executive Director

Ashley Fennell Assoc. Director, Government Affairs & Initiatives

Standing Invitees
Anna Fleming
Alumni Association Representative

Allison Scheer-Cohen
Academic Senate Representative

Gail Cole-Avent President's Designee

Jason Drake University CFO Designee

Janella Temnick
CSUSM Corporation

ASI Board of Directors Committee Minutes 21-10

Friday, March 5th at 2:30pm

Zoom: https://csusm.zoom.us/meeting/register/tJEtcumqqDguGNfd3Lar_UHf15KKAK7zTD6n

This meeting is being facilitated through an online zoom format, consistent with the Governor's Executive Order N25-20, suspending certain open meeting law restrictions.

| ITEM | SUBJECT | PRESENTER |
|-------------|---|---|
| 01 | Call to Order | Dylan Crivello |
| | Meeting called to order at 2:31 PM | Chair and Chief of Staff |
| 02 | Roll Call | Dylan Crivello |
| | Present: Dylan Crivello, Michael Garrett, Tim Pelayo, Andrew | Chair and Chief of Staff |
| | Gamboa, Caleb Standley, Julia Glorioso, Alex Chavez, Risa | |
| | Lindamood, Lauren Gonzalez, Jenna Dotson, Sarah Ortiz, | 1 |
| | Christopher King, Jacob Peirce, Annie Macias, Ashley Fennell, | |
| | Anna Fleming, Alison Scheer-Cohen, Gail Cole-Avent, Jason | ļ |
| | Drake, Jenelle Temnick | |
| 02 | Absent: Jacqueline Montano | 71.21. |
| 03 | Recognition of Guests | Dylan Crivello Chair and Chief of Staff |
| | No verbal recognition of guests. Registration in Zoom | Chair and Chief of Blagg |
| 04 | Approval of Agenda | Dylan Crivello |
| Action | Standing invitees: Janelle Temnick – CSUSM Corporation | Chair and Chief of Staff |
| | P 31 Cd 1 | |
| | By will of the chair, move to approve the agenda and appropriate | |
| | edits by unanimous consent None opposed | |
| | Motion Carries | |
| 05 | Approval of Minutes | Dylan Crivello |
| Action | By will of the chair, move to approve the minutes by consent vote | Chair and Chief of Staff |
| TACLION | None opposed | |
| | Motion Carries | |
| 06 | Open Forum* | Dylan Crivello |
| Information | Zameer Karim: Made comments that not many students are | Chair and Chief of Staff |
| | running for the new board for next academic year. He also shared | |
| | concerns about conflict of interest that former VP Board Member | |
| | Mariana Rosales is a new hire on the ASI Team as a graduate | |
| | assistant along with Kenny Tran Former ASI President who both | |
| | came back to ASI. | 2 |
| 07 | Approval of CSTEM Representative | Michael Garrett |
| Action | Description: President recommends appointment for the open | President & CEO |
| | position of CSTEM Representative. | |
| | Fiscal Impact: None | |
| | Michael introduces Mariano Santana and reviews the appointment | |
| | process. | |
| | Mariano introduced himself | |
| | Michael moves to approve Mariano Santana as the new CSTEM Rep | |
| | Caleb seconds | |
| | All vote in the Affirmative | |
| | None Opposed | |
| | Motion Carries | |
| | | |

| | Diana Cumming iversity Controller |
|---|--------------------------------------|
| Fiscal Impact: None See attached for document reviewed. Diana Cumming introduced herself and reviews the 990 and proclaims that the form is now ready to be filed for the IRS. She further explains what is a 990. She makes a notice to the revenue and how most of it went to the ASI Cougar Pantry. She further reviewed revenue and assets. She further reviews into detail the revenue page of the tax form, some but not many changes. She discussed the supplementary revenue and new information that has been made. She also reviews and discussed who is working closely with ASI. 42 pages in total Annie commented that it is important to bring the 990 to the board for all the members to see what is on the form and ask any questions. Diana informed the board that the forms have been approved and are now on the website | |
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| | |
| HILDS://www.chushi.edu/an/anoili/corporate_docilments/tingnoigi | |
| reports.html | |
| | |
| | Dylan Crivello |
| and matter See attached for student Tepor (s. | r and Chief of Staff |
| Annie Macias: Meet with Tim about yearly projections. Looking at what it means to ASI when we return to campus. Working on | |
| contracts for Festival 78. Contractor now for the pantry and | |
| timeline now. The pantry will be next to the bookstore. MCT team | |
| is looking at workload the marketing team is feeling the tough | |
| workload on events this school year. | |
| | |
| Ashley Fennell: Thursday appt for Cougar Pantry are slow, | |
| sending surveys to students. Fresh Market Monday, truck did not show, moved to Wednesday. Met with vendor about design on | |
| refrigerators. Met with contractor and timeline for pantry | |
| expansion to mid-July. Ballots open on the 15th for ASI Elections. | 1 |
| | |
| Anna Fleming: Gradfest is next week 10th to 11th. Gifting | |
| memberships to all upcoming grads. Life After Graduation with Career Center event coming up. Process of making two infinity | |
| networks. | |
| | |
| Alison Scheer-Cohen: Thanked Andrew for coming to Senate and talking about Cesar Chavez Day of Service | |
| Gail Cole-Avent: an update from Scott Hagg about the second | } |
| higher education emergency relief fund. Has not arrived at | i |
| CSUSM yet and not sure when it will show up. | |
| Jason Drake: working on improving for student to make appeals | |
| to the Refund policy. | ļ |
| Janelle Temnick: Gradfest next week. Bookstore has been busy. | |
| Housing 200 students living at UVA, 50 students at the Quad. | ł |
| CSUSM Corporation social media is active. Hoping to open the | |
| Child Care center on June 1st. 10 Announcements Dy | dom Cuinalla |
| | rlan Crivello and Chief of Staff |
| | |

| | Jacqueline: if anyone has any ideas for next year tri festa events contact Jacqueline. Jake Peirce: Veteran Voices' 18th of March 2:30 pm Christopher: Campus Climate survey is important to take and is in students' emails. Ashley: Origami Crash Course at 6 PM. Submit evals. | |
|--------|--|--------------------------|
| 11 | Adjournment | Dylan Crivello |
| Action | This meeting adjourned at 3:37 PM | Chair and Chief of Staff |

^{*} Public comment will be limited to a maximum of 5 minutes per guest. Chair will determine allocated amount per meeting.

I, Dylan Crivello 20/21 ASI Chair & Chief of Staff, hereby certify that the above minutes were approved by Board of Directors of Associated Students, Inc., at a regularly scheduled meeting held on March 19, 2021

Julian Crivello Date

Meeting ID Topic

95050263423 Board of Directors 21-11

Name (Original Name) User Email

Dylan Crivello dcrivello@csusm.edu
Tim Pelayo tpelayo@csusm.edu

Julia Gloriosoglori005@cougars.csusm.eduRisa Lindamoodlinda006@cougars.csusm.edu

Gail Cole-Avent gcavent@csusm.edu
Annie Macias amacias@csusm.edu
Ashley Fennell afennell@csusm.edu

Caleb Standleystand015@cougars.csusm.eduSarah Ortizortiz252@cougars.csusm.eduLauren Gonzalezgonza823@cougars.csusm.edu

michael garrett migarrett@csusm.edu
Jason Drake jdrake@csusm.edu

Mariano Santana (He/Him) (Mariano Santana) santa055@cougars.csusm.edu

Alison Scheer-Cohen ascheer@csusm.edu

Jenna Dotsondotso006@cougars.csusm.eduJordan Lanterlante001@cougars.csusm.eduChristopher Kingking178@cougars.csusm.edu

Andrew Gamboa agamboa@csusm.edu

Jake Peirce - Vet Rep - he/him (Jacob Peirce)

Anna Fleming

Diana Cumming

Alexandra Chavez

Jason Schreiber

Janelle Temnick

peirc003@cougars.csusm.edu

afleming@csusm.edu

dcumming@csusm.edu

asichabss1@csusm.edu

jschreiber@csusm.edu

jtemnick@csusm.edu

Zameer Karim karim013@cougars.csusm.edu

Jacqueline Montaño asicoba2@csusm.edu

2019

990

PUBLIC DISCLOSURE

| | ASSOCIATED STUDENTS, INC. OF CALIFORNIA 990 (2019) STATE UNIVERSITY SAN MARCOS | 33-0556915 Page 2 |
|----------|---|--------------------------|
| Pa | t III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III | X |
| 1 | Briefly describe the organization's mission: | <u> </u> |
| • | TO PROVIDE AN OFFICIAL VOICE TO EXPRESS STUDENT OPINIO | NS, TO FOSTER |
| | AWARENESS OF STUDENT ISSUES AND TO PROTECT THE RIGHTS | & INTERESTS OF |
| | THE STUDENTS OF CALIFORNIA STATE UNIVERSITY SAN MARCOS | |
| | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the | |
| | prior Form 990 or 990-EZ? | Yes A No |
| 3 | If "Yes," describe these new services on Schedule O. | . V. V. |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services if "Yes," describe these changes on Schedule O. | S? Yes 🕰 No |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, | as made and by expenses |
| | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to of | |
| | revenue, if any, for each program service reported. | , |
| 4a | (Code:) (Expenses \$ 1,163,420. including grants of \$) (Rev | enue \$ 2,413,001.) |
| | | FOSTER AWARENESS |
| | OF STUDENT ISSUES, AND PROTECT THE RIGHTS AND INTEREST | |
| | A PRIMARY ENTITY OF CAMPUS LIFE, ASI AFFORDS STUDENTS | |
| | TO SERVE THEIR COMMUNITIES, ENGAGE IN THE DIVERSE LIFE | |
| | UNIVERSITY, AND EMPOWER THEMSELVES AS STUDENT LEADERS THE FOLLOWING AREAS: | BY ENGAGING IN |
| | THE FORDOWING AREAS. | |
| | THE ASI BOARD OF DIRECTORS: COMPOSED OF 16 STUDENT-ELE | CTED POSITIONS |
| | THAT SERVE AS THE STUDENT VOICE ON CAMPUS VIA PARTICIP. | ATION IN |
| | UNIVERSITY COMMITTEES, CSU SYSTEM WISE AND STATE-WIDE . | ADVOCACY. |
| | | |
| | | |
| 4b | (Code:) (Expenses \$ | enue \$) |
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| - | | |
| 4C | (Code:) (Expenses \$) (Rev | enue \$) |
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| | | |
| 4d | Other monram services (Describe on Schedule (1) | |
| 4d | Cther program services (Describe on Schedule O.) (Expenses 5 Including gards of 5) (Revenue 5 |) |
| 4d 4e | |) |

** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax
er section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundati

Do not enter social security numbers on this form as it may be made public. 990 2019 Name of organization
ASSOCIATED STUDENTS, INC. OF CALIFORNIA
STATE UNIVERSITY SAN MARCOS 33-0556915 Number and street (or P.O. box if mail is not delivered to street address)
333 S. TWIN OAKS VALLEY RD USU3700 Telephone number 760-750-4994 City or town, state or province, country, and ZIP or foreign postal coc SAN MARCOS, CA 92096-0001 | Repair | Found and address of principal officer. | Found and address H(a) Is this a group return H(b) Are all subordinates in If "No." attach a list, (see in H(c) Group exemption number ▶ aar of formation: 1994 M State of lega K Form of organization: X Corporation Summary

Briefly describe the organization's mission or most significant activities: ASSOCIATED STUDENTS

CSUSM SERVES, ENGACES, AND EMPOWERS STUDENTS.

Check this box

Lift the organization discontinued its operations or disposed of more than 25% of its ne 2 Check this box ▶ ☐ If the organization discontinued its operations or disport
3 Number of roting members of the governing body (Part V, line 1s)
4 Number of independent voting members of the governing body (Part V, line 1s)
5 Total number of individuals employed in calendary are 2019 (Part V, line 2s)
6 Total number of rotindividuals employed in calendary are 2019 (Part V, line 2s)
7 Total number for violatiness (estimate if necessary)
7 Total unrelated business revenue from Part VIII, column (C), line 12
b Net unrelated business taxable income from Form 990.T, line 39 8 Contributions and grants (Part VIII, line 1h)
9 Program service revenue (Part VIII, line 2g)
10 Investment income (Part VIII. column (A) line Controlutions and grants (Part VIII, line 1n)
Program service revenue (Part VIII, line 2n)
Investment income (Part VIII, column (A), lines 3, 4, and 7d)
Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)
Total revenue add lines 8 through 11 (must equal Part VIII, column (A), line 1;
Grants and similar amounts paid (Part IX, column (A), lines 1:3) 12 Total revenue - add lines 8 through 11 (must equal Part VIII,
 13 Grants and similar amounts paid (Part IX, column (A), lines 1
 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 Salaries, other compensation, employee benefits (Part IX, column (A), line 16a Professional fundralising fees Part IX, column (A), line 15a) b Total fundralising expenses (Part IX, column (D), line 25) b 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-124e) 18 Total expenses. Add lines 13-17 (must sequal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund bala
Part II Signature Block Signature of officer ANNIE MACIAS, PH.D, EXECUTIVE DIRECTOR
Type or print name and title 02/18/21 | irm's name ALDRICH CPAS AND ADVISORS, LLP
irm's address 7676 HAZARD CENTER DREVE STE 130:
SAN DIEGO, CA 92108

discuss this return with the preparer shown above? feet effatuctions)

120 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Phone no. (619)

810-4940 X Yes No Form **990** (2019)

| Pa | 990 (2019) STATE UNIVERSITY SAN MARCOS 33-0556 t IV Checklist of Required Schedules | | | |
|----|--|-----|-----|---|
| u | try officering of required confedence | | Yes | N |
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | | | H |
| | If "Yes," complete Schedule A | 1 | Х | l |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors | 2 | Х | Γ |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | | | Γ |
| | public office? If "Yes," complete Schedule C, Part I | 3 | | l |
| 1 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | | | Γ |
| | during the tax year? If "Yes," complete Schedule C, Part II | 4 | | L |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | | | Γ |
| | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | L |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | | | Γ |
| | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | L |
| , | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | Γ |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | l |
| 3 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | | | Γ |
| | Schedule D, Part III | 8 | | l |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for | | | Γ |
| | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? | | | l |
| | If "Yes," complete Schedule D, Part IV | 9 | | L |
|) | Did the organization, directly or through a related organization, hold assets in donor-restricted endowments | | | Γ |
| | or in quasi endowments? If "Yes," complete Schedule D, Part V | 10 | | L |
| 1 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X | | | Γ |
| | as applicable. | | | L |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | | Г |
| | Part VI | 11a | Х | L |
| b | Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total | | | Γ |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | L |
| С | Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total | | | Г |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | L |
| 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 | | | Γ |
| | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | L |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | Х | L |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | l |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | Х | L |
| 2a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | l |
| | Schedule D, Parts XI and XII | 12a | Х | L |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? | | | l |
| | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | Х | L |
| 3 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | I |
| la | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | L |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | l | | ı |
| | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 | | | l |
| | or more? If "Yes," complete Schedule F, Parts I and IV | 14b | | L |
| 5 | 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 | | L |
| 6 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | | | l |
| | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | L |
| | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | | | l |
| | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | | L |
| 3 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | | l |
| | 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | L |
| 9 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | l | | ı |
| | complete Schedule G, Part III | 19 | | L |
| | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | L |
| | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | L |
| 1 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | l | | |
| | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | 1 | ı |

SEE SCHEDULE O FOR CONTINUATION(S)

2019.05050 ASSOCIATED STUDENTS, INC. O 20557_01

15300218 310575 20557.002

15300218 310575 20557.002

(gambling) winnings to prize winners?

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable

2019.05050 ASSOCIATED STUDENTS, INC. O 20557_01

1b

ASSOCIATED STUDENTS, INC. OF CALIFORNIA

STATE UNIVERSITY SAN MARCOS

vernance, Management, and Disclosure For each "Yes" response to lines 2 thm
ne 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. 33-0556915 Part VI Go GHECK IT Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the go body delegated broad authority to an executive committee or similar committee, explain on Schedul Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business rel officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct super 3 Did the organization delegate control over management duties customarily performed by or under the direct super of officers, referectors, trusteses, or key employees to a management company or other person?

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

5 Did the organization become aware during the year of a significant diversion of the organization's assests?

6 Did the organization have members or stockholders?

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body?

Each committee with authority to act on behalf of the governing body 8b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the ation's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No Did the organization have local chapters, branches, or affiliates?
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?

Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 10a 11a 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 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X b were omces, directors, or trustees, and key employees required to access animally interests that count give nee to commits?
 Cold the organization requirally and consistently monitor and enforce compliance with the policy? If "Yes, "describe in Schedule O how this was done.

If the organization have a written whistleblower policy?

If the organization have a written whistleblower policy?

If the organization have a written document retention and destruction policy?

If the organization have a written document retention and destruction policy? х ew and approval by independen persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO. Executive Director, or top management official 15a a The Organization SCCC, Executive Director, or top intelligene Unitida.

1 Other offices or key employees of the organization.

1 Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).

6a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with the organization of the organizatio Х taxable entity during the year?

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 empt status with respect to such arrangements? Section C. Disclosure C. Disclusion

No. Disclusion for public irrspect...

Own website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financia

ASSOCIATED STUDENTS, INC. OF CALIFORNIA

33-0556915 Form 990 (2019) STATE UNIVERSITY SAN MARCOS

Part V Statements Regarding Other IRS Filings and Tax Compliance. Page 5 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 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year?

b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O b in Yes, has it like of contribution to the year in Wo in a supported a replanation of schedule of Mark At any time during the calendar year, did the organization have an interest in, or a signature or other author financial account in a foreign country (such as a bank account, securities account, or other financial account in Yes, enter the name of the foreign country.) See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? ba Was the organization a party to a prohibitote tax senter transaction at any time during the tax year?

b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?

c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?

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?

b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts X Х 7 Organizations that may receive deductible contributions under section 170(c).
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor Х 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided?
 c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was re C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282 filed during the year

I 17 (%), indicate the number of Forms 8282 filed during the year

B Did the organization receive at jurks, directly to rindirectly, to a personal benefit contract?

Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1038-C? Х X Sonosoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization smaintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?

 Sonosoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?

Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a 10b a financion rees and capina communication included or Francis, in Fig. 2

B offices receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

Section 501(c)(12) organizations. Enter.

G cross income from members or shareholders.

b Gross income from other sources (Do not net amounts due or paid to other sources aga amounts due or received from them.)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Fc b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue question that after issuess.

A is the organization licensed to issue qualified health plans in more than one state?

Note: See the instructions for additional information the organization must report on Schedule to 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 Enter the amount of reserves on hand ... 13c Х 14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation of 14a ion on Schedule O Is the organization subject to the section 4890 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?

If "Yes," see instructions and file Form 470, Schedule N.

Is the organization an educational institution subject to the section 4968 excise tax on net investment income? Х

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If "Yes," complete Form 4720, Schedule O.

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ASSOCIATED STUDENTS, INC. OF CALIFORNIA STATE UNIVERSITY SAN MARC

33-0556915 Part VII Co npensation of Officers, Directors, Trustees, Key Employees, Highest Compensa Employees, and Independent Contractors eck 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 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

enter 4- 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 reports 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.

able compensation (Box 5 of Form W2 and/or Box 7 of Form 1094-MISC) of more than \$10,000 from the organization and any related organize

**List all of the organization's farmer officers, key employees, and highest compensated employees who received more than \$10,000 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.

See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related any current office (F) (E) Reportable compensation from related Name and title Estimated amount of other Average hours per /W-2/1099-MISC from the (W-2/1099-MISC) ganizatio below and related organizations 20.00 14,774 856 921. PRESIDENT
(2) SAVANA DOUDAR 20.00 FORMER PRESIDENT
(3) MARIANA ROSALES 338 0 0. 20.00 518 0. 20.00 OF STUDENT & UNIVERSITY AFFAIRS
) LUCAS DIAS 856 12,764 541. 20.00 FORMER VP OF STUDENT & UNIVERSITY AND (6) JAE FREEMAN 338 0 0. 20.00 CHAIR AND CHIEF OF STAFF 518 0 0. 5.00 338 0 0. 5.00 338 0 0. STUDENT REPRESENT ENTATIVE 5.00 STUDENT REPRESENTATIVE 338 0 0. (10) JUAN ACEVES 5.00 STUDENT REPRESENT
(11) PAULETTE CRU
STUDENT REPRESENT
(12) AILED TORRES 338 0 0. 5.00 TATIVE 338 0. 5.00 338 0 0. (13) FAITH MARIE GARICA 5.00 STUDENT REPRESENTATIVE (14) MUTULA OLIVIER KWA 338 0 0. 5.00 STUDENT REPRESENTATIVE
(15) HANNAH SHOHARA 338 5.00 338 0. 5.00 338 STUDENT REPRESENTATIVE 0 0. 5.00 338

20

statements available to the public during the tax year

Statements average to use public using time as year.

State the name, address, and teleprone number of the person who possesses the organization's books and reconstruction. The property of the person of the perso

ASSOCIATED STUDENTS, INC. OF CALIFORNIA STATE UNIVERSITY SAN MARCOS 33-0556915 Page 8 Form 990 (2019) STATE UNIVERSITE SAN SERVICES AND SERVICE (E) Reportable (F) Average hours per from the (W-2/1099-MISC) from the organization (W-2/1099-MISC) below line) (18) ESTEFANIA FRATICELLI STUDENT REPRESENTATIVE 5.00 338 0 0. 5.00 338 0. STUDENT REPRESENTATIVE (20) EMILY BORGESON 5.00 0 338 STUDENT REPRESENTATIVE (21) INIQUE WILSON 0. 5.00 338 0 STUDENT REPRESENTATIVE (22) RYLEE SPENCER 0. 5.00 338. 0 0. 5.00 0 STUDENT REPRESENTATIVE
(24) DEVON KIMBROUGH 338 0. 5.00 (24) DEVON KIMBROUGH
STUDENT REPRESENTATIVE
(25) ARIANNA CAMINO
STUDENT REPRESENTATIVE
(26) NICK LAVELY
STUDENT REPRESENTATIVE 338 0 0. 5.00 0. 254 0 5.00 1b Subtotal c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)

2 Total number of individuals (including but not limited to those listed abo 12,298. 151,086. 50,881. Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual line 1a? If "Yes," complete Schedule J for such individual
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from
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 indi
rendered to the organization If "Yes," complete Schedule J for such person
tion B. Independent Contractors ete this table for your five highest compensated independent contractors that received more than \$100,000 of comp the organization. Report compensation for the calendar year ending with or within the organization's tax year (A) (C) Name and bu NONE

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
SEE PART VII, SECTION A CONTINUATION SHEETS Form **990** (2019)

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ASSOCIATED STUDENTS, INC. OF CALIFORNIA 9) STATE UNIVERSITY SAN MARCOS Statement of Revenue 33-0556915 Check if Schedule O contains a response or note to any line in this Part VIII
(A) Unrelated siness rever Total re elated or exemp function revenue from tax under sections 512 - 514 1 a Federated campaigns Membership dues Fundraising events d Related organization Government grants (contributions All other contributions, gifts, grants, an similar amounts not included above 330,000 1g \$ 330,000 900099 2,199,712. STUDENT FEES
STUDENT ACTIVITIES 2.199.712 Program Service All other program service rever Total. Add lines 2a-2f Investment income (including .413.001 33,943. 33,943 other similar amounts) Income from investment of tax-e Royalties ... (i) Real (ii) Personal 6 a Gross rents
b Less: rental expenses...
c Rental income or (loss)
d Net rental income or (loss
7 a Gross amount from sales of assets other than inventory • (ii) Other (i) Securities b Less: cost or other basis and sales expenses c Gain or (loss) 7c
d Net gain or (loss) 8 a Gross income from fundraising events (not Other including \$ ____ contributions reported on line 1c). See Part IV. line 18 b Less: direct exper 8b Net income or (loss) from fundraising eve
 A Gross income from gaming activities. Se
 Part IV, line 19 b Less: direct expenses Net income or (loss) from gaming act 10 a Gross sales of inventory, less returns and allowances

b Less: cost of goods sold All other revenue 776,944.2,413,001.

ASSOCIATED STUDENTS, INC. OF CALIFORNIA

| Carrow C | Form 990 STATE UN | | | | | | | | CALIFORNIA | 33-055 | 6915 |
|--|---------------------------------------|-------|----------|--|---------|-------|--------|----------|---------------------|-----------------|---------------|
| (27) KEITH LIN | | | | | | | | | Compensated Employ | | |
| Name and title | | | ľ | , | | | | | | | (F) |
| Por week (list any) | | | l | | | | | | | | |
| week (list any hours for related organizations below line) 1 | | | (cl | heck | c all t | that | арр | ly) | | | |
| (ist any hours for related organizations (ist any hours for related organizations organizations (ist any hours for related organizations organizations (ist any hours represented to the property of t | | | Г | Г | | | | П | | | |
| 127 KETTH LIN | | | ١, | | | | eak qu | | | | |
| 127 KETTH LIN | | | gusp | | | | dem | | | (W-2/1099-MISC) | |
| 127 KETTH LIN | | | 5080 | æ | | | l Sab | | (11 27 1000 111100) | | |
| 127 KETTH LIN | | | 150 | al fu | | 99,69 | 9d H0 | | | | organizations |
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| X | (OR) HERMIN A TH | | Ĕ | Ë | 5 | 98. | ž | ŝ | | | |
| (28) GENESSIA QUEZADA S.00 X 338. | | 3.00 | ₽. | | | | | | 338 | ۱ ، | 0 |
| X 338. 0. 0. | | 5.00 | - | \vdash | Н | Н | Н | \vdash | 550. | ٠. | |
| Case Care Case | | 3,00 | Ιx | | | | | | 338. | ٥. | 0. |
| X 338. 0. 0. | | 5.00 | - | \vdash | Н | Н | Н | \vdash | 5501 | • | |
| STUDENT ERPRESENTATIVE | | | lx l | | | | | | 338. | ٥. | 0. |
| X 338. 0. 0. | | 5.00 | - | \vdash | Н | Н | Н | Н | 5501 | · · · | |
| S10 RICHARD BADU | STUDENT REPRESENTATIVE | | x | | | | | | 338. | ٥. | 0. |
| 132 III PELAYO 5.00 X 338. 0. 0. 0. | (31) RICHARD BAGU | 5.00 | \vdash | Т | П | П | П | Т | | | |
| X 338. 0. 0. | STUDENT REPRESENTATIVE | | x | | | | | | 338. | 0. | 0. |
| (34) SERIOURT SERIORSHYATUVE X 254. 0. 0. (14) ANNIE MACIAS EXECUTIVE DIRECTOR/ADVISOR TO BOARD X X 0. 123,548. 49,419. | | 5.00 | Г | | | | | | | | |
| X | | | Х | $ldsymbol{ldsymbol{ldsymbol{ldsymbol{L}}}$ | | | | | 338. | 0. | 0. |
| (34) ANNIE MACIAS EXECUTIVE DIRECTOR/ADVISOR TO BOARD X 0. 123,548. 49,419. | | 5.00 | | | | | | | | | |
| EXECUTIVE DIRECTOR/ADVISOR TO BOARD X 0. 123,548. 49,419. | | | Х | ᆫ | Ш | Ш | ш | ᆫ | 254. | 0. | 0. |
| | | 40.00 | 1 | | l | | | | | | |
| Total to Part VII, Section A, line 1c 2, 282. 123, 548. 49, 419. | EXECUTIVE DIRECTOR/ADVISOR TO BOARD | | ╙ | ╙ | Х | ш | ш | _ | 0. | 123,548. | 49,419. |
| Total to Part VII, Section A, line 1c 2, 282. 123, 548. 49, 419. | | | 1 | | | | | | | | |
| Total to Part VIII, Section A, line to 2, 282. 123, 548. 49, 419. | | | ⊢ | ⊢ | Н | Н | Н | ⊢ | | | |
| Total to Part VII, Section A, line 1c 2, 282. 123, 548. 49, 419. | | | 1 | | | | | | | | |
| Total to Part VII, Section A, line 1c 2, 282. 123, 548. 49, 419. | | | | Г | П | П | П | П | | | |
| Total to Part VIII, Section A, line to 2,282. 123,548. 49,419. | | | 上 | _ | Ш | Ш | Ш | ᆫ | | | |
| Total to Part VII, Section A, line 1c 2, 282. 123, 548. 49, 419. | | | 1 | | | | | | | | |
| Total to Part VII, Section A, line 1c 2, 282. 123, 548. 49, 419. | | | ⊢ | ⊢ | Н | Н | Н | ⊢ | | | |
| Total to Part VII, Section A, line to 2,282. 123,548. 49,419. | | | 1 | | | | | | | | |
| Total to Part VII, Section A, line 1c 2, 282. 123, 548. 49, 419. | | | \vdash | Н | Н | Н | Н | Н | | | |
| Total to Part VII, Section A, line 1c 2, 282. 123, 548. 49, 419. | | | 1 | | | | | | | | |
| Total to Part VII, Section A, line 1c 2, 282. 123, 548. 49, 419. | | | Π | | | | | | | | |
| Total to Part VII, Section A, line 1c 2, 282. 123, 548. 49, 419. | | | ⊢ | ┡ | Н | Н | Н | ⊢ | | | |
| Total to Part VII, Section A, line 1c 2, 282. 123, 548. 49, 419. | | | 1 | | | | | | | | |
| Total to Part VII, Section A, line 1c 2, 282. 123, 548. 49, 419. | - | | ⊢ | ⊢ | Н | Н | Н | Н | | | |
| Total to Part VII, Section A, line 1c 2, 282. 123, 548. 49, 419. | | | 1 | | | | | | | | |
| Total to Part VII, Section A, line to 2,282. 123,548. 49,419. | | | | Г | П | П | П | Г | | | |
| Total to Part VIII, Section A, line 1c 2, 282. 123, 548. 49, 419. | | | <u> </u> | L | Ш | Ш | | L | | | |
| Total to Part VII, Section A, line 1c 2, 282. 123, 548. 49, 419. | | | 1 | | | | | | | | |
| Total to Part VII, Section A, line 1c 2, 282. 123, 548. 49, 419. | | | ⊢ | ⊢ | Н | Н | Н | ⊢ | | | |
| Total to Part VII, Section A. line 1c 2, 282. 123, 548. 49, 419. | | | 1 | | | | | | | | |
| Total to Part VII, Section A, line 1c 2, 282. 123, 548. 49, 419. | | | | | | | | | | | |
| | Total to Part VII, Section A, line 1c | | | | | | | | 2,282. | 123,548. | 49,419. |

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ASSOCIATED STUDENTS, INC. OF CALIFORNIA

Form 990 (2019) STATE UNIVERSITY SAN MARCOS
Part IX Statement of Functional Expenses 33-0556915 Page 10 se or note to any line in this Part IX.

(A) (B)

Total expenses Programs Check if Schedule O contains a re Grants and other assistance to domestic organiza and domestic governments. See Part IV. line 21 individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV. lines 15 and 16 individuals. See Part IV, lines 15 and 16
Benefits paid to or for members
Compensation of current officers, directors,
trustees, and key employees
Compensation on included above to disqualified
persons (as defined under section 4958(t)(1)) and
persons described in section 4958(c)(3)(B) 12,298 12,298 151,693 Other salaries and wages
Pension plan accruals and contributions (include 632,103. section 401(k) and 403(b) employer contributions) Other employee benefits
Payroll taxes 52,620 43,498. 9,122 Fees for services (nonemployees) a Management 4,538. 147,946. 2,641 **b** Legal 147,946 c Accounting Accounting
 Hobbying
 Professional fundraising services. See Part IV, line 17
 Investment management fees
 Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 66,050 66,050 12 Advertising and promotion 13 14 Office expenses
Information technology 14,388 24. 14,364 Occupancy Travel 4,586 18 Payments of travel or entertainment expen for any federal, state, or local public officials Conferences, conventions, and meetings 666 666 Interest
Payments to affiliates
Depreciation, depletion, and amortization
Insurance
Other openese. Itemize expenses not covered
above (List miscellaneous sepenses on line 24th above (List miscellaneous sepenses on Schelde on) (A)
STUDENT ACTIVITIES
OTHER EXPENSES
OTHER EXPENSES
OTHER RENTAL AND LEASE
PROFESSIONAL DEVELOPMEN
All other expenses. 8,386 8,386 7.319 3,344 5,877 22.448 9.766 1,594,436. Total functional expenses. Add lines 1 through 24e 431,016 ete this line only if the organizat reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Check here

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ASSOCIATED STUDENTS, INC. OF CALIFORNIA STATE UNIVERSITY SAN MARCOS 33-0556915 Page 11

| Pai | tΧ | Balance Sheet | | | | | |
|-----------------------------|----------|--|----------|-----------------------|--------------------------|------------|--------------------|
| | | Check if Schedule O contains a response or not | e to ar | y line in this Part X | | | |
| | | | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | 1,300. | 1 | 1,300. | | |
| | 2 | Savings and temporary cash investments | 484,468. | 2 | 338,027. | | |
| | 3 | Pledges and grants receivable, net | | 3 | | | |
| | 4 | Accounts receivable, net | | 722,088. | 4 | 2,003,273. | |
| | 5 | Loans and other receivables from any current or | | | | | |
| | | trustee, key employee, creator or founder, subst | | | | | |
| | | controlled entity or family member of any of thes | e pers | ons | | 5 | |
| | 6 | Loans and other receivables from other disqualif | fied pe | rsons (as defined | | | |
| | | under section 4958(f)(1)), and persons described | d in sec | ction 4958(c)(3)(B) | | 6 | |
| ste | 7 | Notes and loans receivable, net | | | | 7 | |
| Assets | 8 | Inventories for sale or use | | | | 8 | |
| ٩. | 9 | Prepaid expenses and deferred charges | | | | 9 | |
| | 10a | Land, buildings, and equipment: cost or other | | == == . | | | |
| | | basis. Complete Part VI of Schedule D | | 78,354. | 10 555 | | 20 544 |
| | | Less: accumulated depreciation | | | 10,555. | | 32,744. |
| | 11 | Investments - publicly traded securities | | | | 11 | |
| | 12 | Investments - other securities. See Part IV, line 1 | | | | 12 | |
| | 13 | Investments - program-related. See Part IV, line 1 | | | 13 | | |
| | 14 | Intangible assets | | 3,000. | 14 | 0. | |
| | 15 16 | Other assets. See Part IV, line 11 | | | 1,221,411. | 15 | 2,375,344. |
| _ | 17 | Total assets. Add lines 1 through 15 (must equa | 8,222. | 17 | 9,607. | | |
| | 18 | Accounts payable and accrued expenses | | | 0,222. | 18 | 3,007. |
| | 19 | Grants payable | | | 58,017. | 19 | 42,549. |
| | 20 | Deferred revenue Tax-exempt bond liabilities | | | 30,017. | 20 | 12,313. |
| | 21 | Escrow or custodial account liability. Complete F | | | | 21 | |
| | 22 | Loans and other payables to any current or form | | | | 21 | |
| Liabilities | | trustee, key employee, creator or founder, subst | | | | | |
| iq | | controlled entity or family member of any of thes | | | | 22 | |
| == | 23 | Secured mortgages and notes payable to unrela | | | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated | | | | 24 | |
| | 25 | Other liabilities (including federal income tax, pay | | | | | |
| | | parties, and other liabilities not included on lines | | | | | |
| | | of Schedule D | | | 379,597. | 25 | 365,105. |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 445,836. | 26 | 417,261. |
| | | Organizations that follow FASB ASC 958, che | ck her | e 🕨 X | | | |
| ce | | and complete lines 27, 28, 32, and 33. | | | | | |
| ja | 27 | Net assets without donor restrictions | | | 775,575. | 27 | 1,958,083. |
| J B | 28 | Net assets with donor restrictions | | | | 28 | |
| š | | Organizations that do not follow FASB ASC 95 | 58, ch | eck here 🕨 🗔 | | | |
| 느 | | and complete lines 29 through 33. | | | | | |
| ste | 29 | Capital stock or trust principal, or current funds | | | | 29 | |
| 886 | 30 | Paid-in or capital surplus, or land, building, or eq | | | | 30 | |
| Net Assets or Fund Balances | 31 | Retained earnings, endowment, accumulated in | | | 775 575 | 31 | 1 050 000 |
| ž | 32 | Total net assets or fund balances | | | 775,575. | 32 | 1,958,083. |
| | 33 | Total liabilities and net assets/fund balances | | | 1,221,411. | 33 | 2,375,344. |
| | | | | | | | Form 990 (2019) |

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| SCHEDULE A | | Dublic Cho | rity Status on | d Duk | dia C | innort | | OMB No. 1545-0047 | | |
|--|--|-------------------------|--|--------------|--------------|-----------------|---------------|------------------------------------|--|--|
| (Form 990 or 990-EZ) | Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. | | | | | | | | | |
| Department of the Treasury Internal Revenue Service | | ▶. | Attach to Form 990 or F | orm 990- | EZ. | | | Open to Public | | |
| | | | v/Form990 for instructi | | | | | Inspection | | |
| Name of the organizati | | | DENTS, INC. TY SAN MARCO | | LIFOR | NIA | | identification number 3-0556915 | | |
| Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. | | | | | | | | | | |
| | | | (For lines 1 through 12, o | | | | | | | |
| | | | on of churches describe | | | | | | | |
| | | | Attach Schedule E (Forn | | | | | | | |
| | | | anization described in se | | | ii). | | | | |
| | | | njunction with a hospita | | | |)(iii). Enter | the hospital's name, | | |
| city, and stat | - | | , | | | | | | | |
| | | or the benefit of a co | ollege or university owne | d or opera | ted by a g | overnmental | unit describ | oed in | | |
| | | Complete Part II.) | | | , | | | | | |
| | | | mental unit described in | section 17 | 70(b)(1)(A) | (v). | | | | |
| | | | antial part of its support | | | | the general | public described in | | |
| | | omplete Part II.) | | | | | 5 | | | |
| | | | (1)(A)(vi). (Complete Par | t II.) | | | | | | |
| | | | in section 170(b)(1)(A)(| | ed in coniu | unction with a | land-grant | college | | |
| | | | culture (see instructions) | | | | | | | |
| university: | | | | | | | - | | | |
| 10 An organizat | ion that norma | Illy receives: (1) more | than 33 1/3% of its sup | port from | contributi | ons, member | ship fees, a | and gross receipts from | | |
| | | | ct to certain exceptions, | | | | | | | |
| | | | (less section 511 tax) fr | | | | | | | |
| | | mplete Part III.) | | | | | | | | |
| | | | sively to test for public sa | fety. See: | section 50 | 09(a)(4). | | | | |
| 12 X An organizat | ion organized | and operated exclus | ively for the benefit of, to | perform t | the function | ons of, or to c | arry out the | purposes of one or | | |
| more publicly | y supported or | ganizations describ | ed in section 509(a)(1) o | r section | 509(a)(2). | See section | 509(a)(3). (| Check the box in | | |
| lines 12a thro | ough 12d that | describes the type of | of supporting organization | n and con | plete line | s 12e, 12f, an | id 12g. | | | |
| a Type I. As | upporting orga | anization operated, s | supervised, or controlled | by its sup | ported org | ganization(s), | typically by | / giving | | |
| the suppor | rted organizati | on(s) the power to re | gularly appoint or elect | majority | of the dire | ctors or trust | ees of the s | supporting | | |
| organizatio | n. You must o | complete Part IV, S | ections A and B. | | | | | | | |
| b Type II. As | supporting org | anization supervised | d or controlled in connec | tion with it | s support | ed organizati | on(s), by ha | ıving | | |
| control or r | management o | of the supporting org | anization vested in the s | ame perso | ons that co | ontrol or man | age the sup | ported | | |
| organizatio | n(s). You mus | t complete Part IV, | Sections A and C. | | | | | | | |
| c X Type III fu | nctionally inte | egrated. A supportin | g organization operated | in connec | tion with, | and functions | ally integrat | ed with, | | |
| its support | ed organizatio | n(s) (see instruction: | s). You must complete | Part IV, Se | ctions A, | D, and E. | | | | |
| d Type III no | n-functionall | y integrated. A supp | orting organization oper | ated in co | nnection v | with its suppo | rted organi | ization(s) | | |
| that is not | functionally in | tegrated. The organi | zation generally must sa | tisfy a dist | ribution re | quirement an | d an attent | iveness | | |
| requiremen | nt (see instruct | ions). You must cor | mplete Part IV, Sections | A and D, | and Part | ٧. | | | | |
| e Check this | box if the org | anization received a | written determination fro | m the IRS | that it is a | a Type I, Type | II, Type III | | | |
| functionally | y integrated, o | r Type III non-function | nally integrated support | ing organi: | zation. | | | | | |
| f Enter the number | of supported | organizations | | | | | | . 1 | | |
| | | about the support | | | | | | | | |
| (i) Name of supp | | (ii) EIN | (iii) Type of organization (described on lines 1-10 | | na document? | (v) Amount o | | (vi) Amount of other | | |
| organization | n | | above (see instructions)) | Yes | No | support (see i | nstructions) | support (see instructions) | | |
| | | | | | | | | | | |
| CSU SAN MARC | :OS | 33-0535371 | . 5 | X | | | 0. | 634,158. | | |

ASSOCIATED STUDENTS, INC. OF CALIFORNIA

| | 1990 (2019) STATE UNIVERSITY SAN MARCOS | 33 | -0556 | 915 | Pa | ge 12 | | | | |
|----|---|---------|-------|------|-----|---------|--|--|--|--|
| Pa | rt XI Reconciliation of Net Assets | | | | | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | | | | | | |
| | | | | | | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | ,77 | | | | | | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | .,59 | | | | | | |
| 3 | | | | | | | | | | |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | | 77 | 5,5 | 75. | | | | |
| 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 on Schedule O) | 9 | | | | 0. | | | | |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, | | | | | | | | | |
| _ | column (B)) | 10 | 1 | .,95 | 8,0 | 83. | | | | |
| Pa | rt XIII Financial Statements and Reporting | | | | | | | | | |
| _ | Check if Schedule O contains a response or note to any line in this Part XII | | | | | \perp | | | | |
| | | | | _ | 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 | О. | | | | | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | | 2a | | Х | | | | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe | d on a | | | | | | | | |
| | separate basis, consolidated basis, or both: | | | | | | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | | | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | | 2b | Х | | | | | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate | te basi | s, | | | | | | | |
| | consolidated basis, or both: | | | | | | | | | |
| | Separate basis Consolidated basis X 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 | ne audi | t, | | | | | | | |
| | 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 on Sci | hedule | Ο. | | | | | | | |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si | ngle A | udit | 1 7 | | | | | | |
| | Act and OMB Circular A-133? | | | За | | Х | | | | |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required | ired a | udit | | | | | | | |
| _ | or audits, explain why on Schedule O and describe any steps taken to undergo such audits | | | 3b | | | | | | |
| | | | | Form | 990 | (2019) | | | | |
| | | | | | | | | | | |

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ASSOCIATED STUDENTS, INC. OF CALIFORNIA

(Form 990 or 990 EZ) 2019 STATE UNIVERSITY SAN MARCOS

Support Schedule for Organizations Described in Sections 17(0b)(1)(A)(w) and 170(b)(1)(A)(w)

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

A Public Support

| ale | ndar year (or fiscal year beginning in) | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
|-----|---|-------------------|--|--------------------------|-------------------|---------------------|-----------|
| | Gifts, grants, contributions, and | (=) == := | (4/2010 | (=/===:: | (=/==:= | (5)==== | (1) |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | | | | | | |
| 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 | | | 1 | | | |
| | 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) | | | | | | |
| e | Public support. Subtract line 5 from line 4. | | | | | | |
| | tion B. Total Support | | | | | | |
| | ndar year (or fiscal year beginning in) | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| | Amounts from line 4 | (a) 2015 | (b) 2016 | (0) 2017 | (u) 2018 | (e) 2019 | (I) IOIAI |
| | Gross income from interest, | | | 1 | | | |
| ۰ | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties, | | | | | | |
| | and income from similar sources | | | | | | |
| | Net income from unrelated business | | <u> </u> | + | | <u> </u> | |
| g | activities, whether or not the | | | | | | |
| | business is regularly carried on | | | | | | |
| 40 | Other income. Do not include gain | | | - | <u> </u> | + | |
| 10 | or loss from the sale of capital | | | | | | |
| | assets (Explain in Part VI.) | | | | | | |
| | Total support, Add lines 7 through 10 | | | | | | |
| | | ata (aaa inatuud | ione) | | | 12 | |
| | Gross receipts from related activities, First five years. If the Form 990 is for | | | | | | |
| 13 | organization, check this box and stor | | s iirst, second, iii | iru, iouriii, or iiiii i | ax year as a secu | JII 30 I(C)(3) | |
| Sec | tion C. Computation of Publ | | ercentage | | | | |
| | Public support percentage for 2019 (I | | | column (fi) | | 14 | 9 |
| | | | | | | ** | |
| | Public support percentage from 2018 | | | | | | 9 |
| l6a | 33 1/3% support test - 2019. If the c | | | | | | |
| | stop here. The organization qualifies | as a publicly sup | ported organizatio | n | | | ▶□ |
| b | 33 1/3% support test - 2018. If the o | | | | | | |
| | and stop here. The organization qual | | | | | | |
| l7a | 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 | | | | | | |
| | organization meets the "facts-and-circ | umstances" test | . The organization | | | | ▶ _ |
| | | | | | | and see instruction | |

ASSOCIATED STUDENTS, INC. OF CALIFORNIA

33-0556915 Page 4

33-0556915 Page 3 Schedule A (Form 990 or 990-EZ) 2019 STATE UNIVERSITY SAN MARCOS

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

| | qualify under the tests listed betion A. Public Support | elow, please com | plete Part II.) | | | | |
|---|--|--|--|--|--|---|--|
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (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 | | | | i | | |
| | Amounts included on lines 1, 2, and | | | | | | |
| | 3 received from disqualified persons | | | | | | |
| t | 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 | | | | | | |
| | Public support. (Subtract line 7c from line 6.) | | | | | | |
| | ction B. Total Support | | | | | | |
| | | | | | | | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| | ndar year (or fiscal year beginning in) | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 9 | andar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest. | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 9 | Amounts from line 6 Gross income from interest, dividends, payments received on | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 9 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 9 10a | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 9 10a | 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 | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 9 10a | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Untrelated business taxable income (less section 511 taxes) from businesses | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 9 10a | 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 | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 9 10a | 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 | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 9 10a | Amounts from line 6 Gross income from interest, clividends, payments received on socurities loans, rents, royalities, 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 Net income from unrelated business activities not included in line 10b, | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 9 10a | Amounts from line 6 Gross income from interest, dividends, payments received on socurities loans, rents, royalities, 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 Net income from unrelated business whether or not business in whether or not business in | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 9 10a 1 | Amounts from line 6 Gross income from interest, clividends, payments received on socurities loans, rents, royalities, 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 Net income from unrelated business activities not included in line 10b, | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 9 10a 1 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalities, 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. Net income from unrelated business activities not included in line 10b, whether or not the business is. Other income. Do not include gain or loss from the sale of capital or loss from the sale of capital services from the sale of capital | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 9 10a 11 | Amounts from line 6 Gross income from interest, dividends, payments received on socurities loans, rents, royalities, and income from similar sources , burleated business trazble income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 9 10a 11 11 12 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalities, and income from similar sources . Unrelated business tazable income (less section 511 taxes) from businesses acquired after June 30, 1976 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on regularly carried on rolss from the sale of capatia assets (Explain in Part VI). Total support, den time 9, 10c, 11, and 12) | | | | | | |
| 9 10a 11 11 12 | Amounts from line 6 Gross income from interest, dividends, payments received on socurities loans, rents, royalities, and income from similar sources Unrelated business trazble income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Ace time 9, 100, 11, and 12.) Total support. (Ace time 9, 100, 11, and 12.) Test fixe years. If the Form 980 is for | | | | | | |
| 9 10a 11 11 12 13 14 | Amounts from line 6 Gross income from interest, dividends, payments received on socurities loans, rents, royalities, 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 Net Income from unrelated business activities not included in line 10b, whether or not the business is Other income. Do not included a line 10b and 10b Total support, does need 9, 10c, 11, and 12b Total support, does need 9, 10c, 11, and 12b First five years. If the Form 990 is for check this box and stop here. | the organization | s first, second, thi | | | | |
| 9 10a 11 11 12 13 14 See | Amounts from line 6 Gross income from interest, dividends, payments received on socurities loans, rents, royalities, and income from similar sources Unirelated business trazble income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10s and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Fart VI), Total support, ros uses 9, 60c, 11, and 12, Test five years. If the Form 980 is for check this box and stop here stion C. Computation of Publi | the organization | s first, second, this | d, fourth, or fifth t | ax year as a section | n 501(c)(3) organiz | ation, |
| 9 10a 11 11 12 13 14 See 15 | Amounts from line 6 Gross income from interest, dividends, payments received on socurities loans, rents, royalities, 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 Net income from unrelated business activities not included in line 10b, which is the section 51 facts of the section 51 facts of the section 51 facts of the section of the section 51 facts of the section 51 fac | the organization | s first, second, this rcentage livided by line 13, | d, fourth, or fifth t | ax year as a section | n 501(c)(3) organiz | ration, |
| 9 10a 11 11 12 13 14 See 15 16 | Amounts from line 6 Gross income from interest, dividends, payments received on socurities loans, rents, royalities, and income from similar sources Untrelate business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Ment 10a and 10a Ment 10a and 10a Ment 10a and 10a Ment 10a and 10a Ment 10a Ment 10a and 10a Ment 10a | the organization | s first, second, this rcentage invided by line 13, III, line 15 | d, fourth, or fifth t | ax year as a section | n 501(c)(3) organiz | ation, |
| 9 10a 11 11 12 13 14 See 15 16 See | Amounts from line 6 (Gross income from interest, dividends, payments received on socurities loans, rents, royalities, 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. Net income from unrelated business activities not included in line 10b, regularly carried on. Net income from unrelated business activities not included in line 10b. The regularly carried on. Other income. Do not include gain or loss from the sale of capital assestic (Explain in Part VI). First five years. If the Form 980 is for check this box and stop here button C. Computation of Public support percentage for 2019 (Public support percentage for 2019 (Public support percentage for 2019 f.). | r the organization is Support Peline 8, column (f), 6, Schedule A, Part Strent I Incom | s first, second, this rcentage divided by line 13, III, line 15 e Percentage | d, fourth, or fifth t | ax year as a section | n 501(c)(3) organiz | ation, |
| 9 10a 11 12 13 14 See 15 16 See 17 | Amounts from line 6 Gross income from interest, dividends, payments received on socurities loans, rents, royalities, 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. So not include gain Other income. So not include gain Cher income. So see 5, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here office on the control of the control of the control Public support percentage for 2018 Stion D. Computation of Invest Investment income percentage for 2018 | the organization io Support Pe iine 8, column (f), Schedule A, Part stment Incom | s first, second, this rcentage ivided by line 13, III, line 15 e Percentage | d, fourth, or fifth t | ax year as a section | n 501(c)(3) organiz | 25 26 26 26 26 26 26 26 26 26 26 26 26 26 |
| 9 10a 11 12 13 14 See 15 16 See 17 18 | Amounts from line 6 Gross income from interest, dividends, payments received on socurities loans, rents, royalties, and income from similar sources Unrelated business tixable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business Net income from unrelated business Net income from unrelated business on the come from the business is regularly carried on Other income. Do not include gain of loss from the sale of capital Total support, and the sale of capital Total support percentage from 2018 Public support percentage from 2018 Livin D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2018 Investment income percentage from | the organization is Support Peine 8, column (f), dischadule A parts street Incom 19 (line 10c, column 50c) (2018 Schedule A parts Street Incom 2018 Schedule | s first, second, this rcentage livided by jine 13, ill. line 15 e Percentage nn (f), divided by ji | d, fourth, or fifth ti | ax year as a section | 15 16 17 18 18 | 96 96 |
| 9 10a 11 12 13 14 See 15 16 See 17 18 | Amounts from line 6 Gross income from interest, dividends, payments received on socurities loans, rents, royalities, and income from similar sources . Unrelated business trazble income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried or relation to the control of the control to the control of the control to the control of the control to the control t | the organization: ic Support Pe is 8, column (1), Schedule A, Part Stment Incom 19 (ine 10c, column 2018 Schedule A, | s first, second, this rcentage slivided by line 13, III. line 15 Part III. line 17 Part III. line 17 | d, fourth, or fifth t | ax year as a section | nn 501(c)(3) organib 15 16 17 18 18 33 /3%, and line to | 25 26 27 is not 26 27 is not 27 is n |
| 9 10a 11 12 13 14 See 15 16 See 17 18 19a | Amounts from line 6 Gross income from interest, dividends, payments received on socurities loans, rents, royalities, and income from similar sources. Unirelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Method 10a and 10a Method 10a | the organization is Support Pe ine 8, column (f), of Schedule A, Part Stment Incom 1916 (ine 10c, column column) (in 10c, column) (ine 10c | s first, second, this rcentage livided by jine 13, III, Ilian 15 e Percentage no (f), divided by ii Part III, Iiie 15 out check the box organization quality | d, fourth, or lifth the column (f)) ne 13, column (f)) on line 14, and line | ax year as a section | 15 15 16 17 18 17 18 17 18 17 18 17 18 17 18 17 18 17 18 17 18 17 18 17 18 17 18 18 | ### ################################## |
| 9 10a 11 12 13 14 See 15 16 See 17 18 19a | Amounts from line 6 Gross income from interest, dividends, payments received on socurrise loans, rents, royalities, 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 Net income from unrelated business activities not included in line 10b, whether on rot the business is Other income. Do not include gain or loss from the sale of capital assests (Explain in Part VI). Total support, does see 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here stion C. Computation of Public Libration of Public support percentage from 2018 Public support percentage from 2018 Investment income percentage for 2019 Investmen | the organization is Support Peline 8, column (f), Schedule A, Part Strent Incomo 198 (ine 10c, colum 2018 Schedule A, organization did notatop here. The organization did notatop here. The organization did notatop here. The | s first, second, this rcentage livided by line 13, III, line 15 pot 11, line 17 pot thek the box organization qual to theke the box to theke to box | d, fourth, or fifth to column (f)) on line 14, and line fies as a publicly si | ax year as a section as a secti | n 501(a)(3) organia 15 16 17 18 33 1/3%, and line 1 attorn | ### ation, |
| 9 10a 11 12 13 14 See 15 16 See 17 18 19a | Amounts from line 6 Gross income from interest, dividends, payments received on socurities loans, rents, royalities, and income from similar sources. Unirelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Method 10a and 10a Method 10a | the organization is Support Perion 8, column (f), of Schedule A, Paris Stredule A, Paris (F) | first, second, this rcentage livided by line 13, iii. line 15 e Percentage Part III, line 17 part III, line 17 ot check the box organization qualit ot check a box or opphers. The organ | d, fourth, or fifth t column (f)) ne 13, column (f)) files as a publicly si line 14 or line 19; line 14 or line 19; | ax year as a section of the section | 15 16 17 18 18 17 18 18 17 18 18 17 18 18 17 18 18 18 18 18 18 18 18 18 18 18 18 18 | ### ation, |

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ASSOCIATED STUDENTS, INC. OF CALIFORNIA 33-0556915 Page 5 STATE UNIVERSITY SAN MARCOS Schedule A (Form 990 or 990-EZ) 2019 STAT
Part IV Supporting Organizations Yes No Has the organization accepted a gift or contribution from any of the following persons? a 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?

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

Section B. Type I Supporting Organizations No Did the directors, trustees, or membership of one or more supported organizations have the power to 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 fax year. 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 coordinated the supporting organization. supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations Yes No 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 Section D. All Type III Supporting Organizations Yes No 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? 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 surpgreted organization? If "No," explain in Part II whe organization is maintained a close and continuous organizations with the supported organization(s). By reason of the relationship described in (2), did the organization's supported organization's 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.

Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the $\fbox{$X$}$ The organization satisfied the Activities Test. Complete line 2 below. a La The organization satisfied the Activities Test. Complete line 2 below.

The organization is the parent of each of its supported organizations. Complete line 3 below.

The organization is supported a governmental entity. Describe in Part VI how you supported a government entity (see instruct

Activities Test. Answer (a) and (b) below.

Did substantially all of the organization's activities during the tax year directly further the exempt purposes of
the supported organization(s) which the organization was responsive? If Yest, Yest in Part VI identify
those supported organizations and explain how these activities directly furthered their exempt purposes, Yes No how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. that these decimines constituted solusial relay and in activities that, but for the organization's involvement, one or mo of the organization's supported organization(s) would have been engaged in 7th "Yes," explain in Part VI the reasons for the organization's supported organization(s) would have engaged in these activities but for the organization's problem that its supported organization(s) would have engaged in these activities but for the organization's involvement.

Schedule A (Form 990 or 990-EZ) 2019 STATE UNIVERSITY SAN MARCOS
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, D, and C if you checked 12d of Part I, complete Sections A, D, and C omplete Part V.)

Section A, DI Supporting Organizations

| | | | Yes | No |
|--------|---|---------|----------|------|
| 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. | - 1 | Х | |
| 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). | 2 | | X |
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer | | | |
| | (b) and (c) below. | 3a | \Box | X |
| 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. | 3b | ш | _ |
| С | 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. | 3c | | _ |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If | | | 37 |
| | "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below. | 4a | | X |
| ь | 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. | 4b | | _ |
| С | 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) | | | |
| | DUIDOSES. | 4c | | |
| 50 | Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," | 40 | | |
| ou | 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). | 5a | | Х |
| 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? | 5b | | |
| С | Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5c | | |
| 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. | 6 | ш | X |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor | | | |
| | (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with | | | Х |
| _ | regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). | 7 | \vdash | |
| 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). | 8 | | х |
| 0 | Was the organization controlled directly or indirectly at any time during the tax year by one or more | • | | |
| oa. | 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. | 9a | | Х |
| h | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which | Ja | | |
| | the supporting organization had an interest? If "Yes." provide detail in Part VI. | 9b | | Х |
| С | 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. | 9c | | Х |
| 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. | 10a | | Х |
| 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.) | 10b | | |
| 932024 | 09-25-19 Schedule A (Form 9 | 90 or 9 | 90-EZ | 2019 |

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ASSOCIATED STUDENTS, INC. OF CALIFORNIA STATE UNIVERSITY SAN MARCOS
snally Integrated 509(a)(3) Supporting Organizations

| | ions must complete S | | 100.00 |
|--|----------------------|----------------|--------------------------------|
| ection A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
| 1 Net short-term capital gain | 1 | | |
| 2 Recoveries of prior-year distributions | 2 | | |
| 3 Other gross income (see instructions) | 3 | | |
| 4 Add lines 1 through 3. | 4 | | |
| 5 Depreciation and depletion | 5 | | |
| 6 Portion of operating expenses paid or incurred for production or | | | |
| collection of gross income or for management, conservation, or | | | |
| maintenance of property held for production of income (see instruct | ions) 6 | | |
| 7 Other expenses (see instructions) | 7 | | |
| 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | | |
| Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current 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 Subtract line 2 from line 1d. | 3 | | |
| 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greate | er amount, | | |
| see instructions). | 4 | | |
| 5 Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 Multiply line 5 by .035. | 6 | | |
| 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 | | |
| 2 Enter 85% of line 1. | 2 | | |
| 3 Minimum asset amount for prior year (from Section B, line 8, Column | 1A) 3 | | |
| 4 Enter greater of line 2 or line 3. | 4 | | |
| 5 Income tax imposed in prior year | 5 | | |
| 6 Distributable Amount. Subtract line 5 from line 4, unless subject to | | | |
| emergency temporary reduction (see instructions). | 6 | | |

Schedule A (Form 990 or 990-EZ) 2019

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2b

Parent of Supported Organizations. Answer (a) and (b) below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. ASSOCIATED STUDENTS, INC. OF CALIFORNIA

| | dule A (Form 990 or 990-EZ) 2019 STATE UNIVERS | | | 3-0556915 Page 7 |
|-------|--|-------------------------------|--|---|
| Pai | Type in their tailed and the grates are | (a)(3) Supporting Orga | anizations (continued) | |
| Secti | on D - Distributions | | | Current Year |
| 1 | Amounts paid to supported organizations to accomplish exe | | | |
| 2 | Amounts paid to perform activity that directly furthers exempt | pt purposes of supported | | |
| | organizations, in excess of income from activity | | | |
| 3 | Administrative expenses paid to accomplish exempt purpose | es of supported organization | ns | |
| 4 | Amounts paid to acquire exempt-use assets | | | |
| 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 | Distributions to attentive supported organizations to which to | he organization is responsive | ė | |
| | (provide details in Part VI). See instructions. | | | |
| 9 | Distributable amount for 2019 from Section C, line 6 | | | |
| 10 | Line 8 amount divided by line 9 amount | | | |
| Secti | ion E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2019 | (iii) Distributable Amount for 2019 |
| 1 | Distributable amount for 2019 from Section C, line 6 | | | |
| 2 | Underdistributions, if any, for years prior to 2019 (reason- | | | |
| | able cause required- explain in Part VI). See instructions. | | | |
| 3 | Excess distributions carryover, if any, to 2019 | | | |
| а | From 2014 | | | |
| b | From 2015 | | | |
| С | From 2016 | | | |
| d | From 2017 | | | |
| е | From 2018 | | | |
| f | Total of lines 3a through e | | | |
| g | Applied to underdistributions of prior years | | | |
| h | Applied to 2019 distributable amount | | | |
| i | Carryover from 2014 not applied (see instructions) | | | |
| i | Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | |
| | Distributions for 2019 from Section D, | | | |
| | line 7: \$ | | | |
| а | Applied to underdistributions of prior years | | | |
| | Applied to 2019 distributable amount | | | |
| | Remainder. Subtract lines 4a and 4b from 4. | | | |
| | Remaining underdistributions for years prior to 2019, if | | | |
| | any. Subtract lines 3g and 4a from line 2. For result greater | | 1 | |
| | than zero, explain in Part VI. See instructions. | | | |
| 6 | Remaining underdistributions for 2019. Subtract lines 3h | | | |
| | and 4b from line 1. For result greater than zero, explain in | | | |
| | Part VI. See instructions. | | | |
| 7 | Excess distributions carryover to 2020. Add lines 3j | | | |
| | and 4c. | | | |
| 8 | Breakdown of line 7: | | | |
| а | Excess from 2015 | | | |
| b | Excess from 2016 | | | |
| С | Excess from 2017 | | | |
| d | Excess from 2018 | | | |
| | Excess from 2019 | | | |

Schedule A (Form 990 or 990-EZ) 2019

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| | ** PUBLIC DISCLOSURE COPY ** | | | | | | |
|---|--|--|--|--|--|--|--|
| Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service | OMB No. 1545-0047 2019 | | | | | | |
| | SSOCIATED STUDENTS, INC. OF CALIFORNIA | Employer identification number 33-0556915 | | | | | |
| Organization type (check o | one): | | | | | | |
| Filers of: | Section: | | | | | | |
| Form 990 or 990-EZ | $\boxed{\mathbf{X}}$ 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 | | | | | | |
| General Rule The 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 | | | | | | | |
| Special Rules | | | | | | | |
| For an organization described in section 501(c)(3) filing Form 990 or 990 EZ that met the 83 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(b), that checked Schedule A (Form 990 or 990 EZ), Part II, line 15, 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. | | | | | | | |
| year, total contribu | n described in section 501(c)(7), (8), or (10), filing Form 990 or 990 EZ that received from a titions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educative to children or animals. Complete Parts I, II, and III. | | | | | | |
| year, contributions is checked, enter h purpose. Don't cor | n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a sexclusively for religious, charitable, etc., purposes, but no such contributions totaled menet the total contributions that were received during the year for an exclusively religious, implete any of the parts unless the General Rule applies to this organization because it ne, etc., contributions totaling \$5,000 or more during the year | ore than \$1,000. If this box charitable, etc., eceived nonexclusively | | | | | |
| but it must answer "No" on | nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fr I Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fo the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). | | | | | | |
| LHA For Paperwork Reducti | ion Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule E | (Form 990, 990-EZ, or 990-PF) (2019) | | | | | |

ASSOCIATED STUDENTS, INC. OF CALIFORNIA

33-0556915 Par

Will Schedule A (Form 990 or 990-EZ) 2019 STATE UNIVERSITY SAN MARCOS

33-0556915 Par

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, Section B, Ines 1, 2, 3, 5, 4, 6, 46, 5a, 5, 8, 9b, 9c, 1, 1a, 1b, and 1c; Part IV, Section B, line 1a and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, line 1a, 2a, 2b, 3a, and 3b; Part V, Iner IV, Part IV, Section B, line 1a, Part V, Section D, lines 5, and 6, and Part V, Section E, line 1a, 2a, and 3b; Part V, Iner IV, Part IV, 33-0556915 Page 8 SECTION E, LINE 2A: THE ORGANIZATION HAS ONE SUPPORTED ORGANIZATION, WHICH IS CALIFORNIA STATE UNIVERSITY SAN MARCOS, "CSUSM". THE ORGANIZATION'S GOVERNING DOCUMENTS SPECIFICALLY STATE THAT THE PURPOSE OF THE ORGANIZATION IS TO BENEFIT THE STUDENTS OF CSUSM. THE ORGANIZATION PROVIDES AN EMAIL TO A PRINCIPAL OFFICER OF THE UNIVERSITY WHICH DESCRIBES THE FINANCIAL SUPPORT THAT WAS PROVIDED TO THE UNIVERSITY BY THE ORGANIZATION, IN ADDITION TO PROVIDING A COPY OF THE TAX RETURN AN EMAIL LINK IS PROVIDED FOR WHICH THE PRINCIPAL CAN ACCESS THE GOVERNING DOCUMENTS. OFFICERS AND DIRECTORS OF THE ORGANIZATION ARE ELECTED AND/OR APPOINTED TO THE BOARD. CSUSM MAINTAINS A CLOSE WORKING RELATIONSHIP WITH THE ORGANIZATION. DUE TO THIS CLOSE WORKING RELATIONSHIP, THE CAMPUS PRESIDENT HAS FINAL AUTHORITY OVER THE OPERATION OF THE AUXILIARY, INCLUDING IT'S ASSETS. THE ORGANIZATION ADMINISTERS VARIOUS STUDENT PROGRAMS AND ACTIVITIES. STUDENT ACTIVITY FEES AND OTHER REVENUES ARE COLLECTED FOR THE SUPPORT OF STUDENT-RELATED PROGRAMS, STAFF SALARIES AND FOR THE ACQUISITION OF

SECTION E, LINE 2B:

ASSETS THAT BENEFIT THE STUDENT BODY.

ALL OF THE ACTIVITIES DIRECTLY FURTHER THE MISSION OF CSUSM AND WOULD BE CARRIED OUT BY CSUSM IF NOT FOR THE INVOLVEMENT OF THE ORGANIZATION.

Schedule A (Form 990 or 990-EZ) 2019

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| | B (Form 990, 990-EZ, or 990-PF) (2019) | | 1 | Page 2 |
|-------------|---|--------------------------|---------|--|
| ASSOC | rganization IATED STUDENTS, INC. OF CALIFORNIA UNIVERSITY SAN MARCOS | | | yer identification number |
| Part I | Contributors (see instructions). Use duplicate copies of Part I if addition | nal space is needed. | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributio | ns | (d) Type of contribution |
| 1 | | \$330,0 | 00. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributio | ns | (d) Type of contribution |
| | | \$ | | Person Payroll Noncash Complete Part II for noncash contributions. |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributio | ns | (d) Type of contribution |
| | | \$ | | Person Payroll Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributio | ns | (d) Type of contribution |
| | | \$ | | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributio | ns | (d) Type of contribution |
| | | \$ | | Person Payroll Complete Part II for noncash contributions. |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributio | ns | (d) Type of contribution |
| — | | \$ | | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| 923452 11-0 | 8-19 24 | Schedule | B (Form | 990, 990-EZ, or 990-PF) (2019 |

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Name of organization Name or organization
ASSOCIATED STUDENTS, INC. OF CALIFORNIA
STATE UNIVERSITY SAN MARCOS 33-0556915 Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is n (a) No. FMV (or estimate) Description of noncash property given Date received from Part I (a) No. from Part I (c) FMV (or estimate) (See instructions.) (d) Date received (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. from Part I (c) FMV (or estimate) (See instructions.) (b)

Description of noncash property given (d) Date received (a) No. (c) FMV (or estimate) (See instructions.) (d) Date received Part 0, 990-EZ, or 990-PF) (2019) 25 2019.05050 ASSOCIATED STUDENTS, INC. 0 20557_01 15300218 310575 20557.002

SCHEDULE D **Supplemental Financial Statements 2019** ► Complete if the organization answered "Yes" on Form 990.
Part N, line 6, 7, 8, 9, 10, 11, 11, 11, 11, 11, 11, 12, or 12b.
►Go to www.irs.gov/Form990 for instructions and the latest informa
ASSOCIATED STUDENTS, INC. OF CALIFORNIA
STATE UNIVERSITY SAN MARCOS Employer identification number 33-0556915 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.co organization answered "Yes" on Form 990, Part IV, line 6. (a) Don Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Aggregate value at end of year

Did the organization informal all donors and donor advisors in writing that the assets held in donor advised funds
are the organization's property, subject to the organization's exclusive legal control?

Did the organization informal grantees, donors, and donor advisors in writing that grant funds can be used only
for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring Yes No Yes impermissible private benefit?

Part II | Conservation Easements. Complete if the organization answered "Yes" on F Conservation Easements. Complete it the organization (check all that apply).

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

Preservation of land for public use (for example, recreation or education).

Preservation of a certified historic structure. Protection of natural habitatic

Protection of natural habitatic

Preservation of pun nservation easement on the last Held at the End of the Tax Year day of the tax year. a Total number of conservation easements 2a b Total acreage restricted by conservation easements
 C Number of conservation easements on a certified historic structure included in (a) Number of conservation easements on a certified historic structure included in (a)
 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure issted in the National Register
 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organizal year
 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monotronia, inspection, handling of violations, and enforcement of the conservation easements it holds?

Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcement of the conservation easements during the year Yes No S

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

[Part III] Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered Yes' on Form 990, Part IV, Ine 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

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

(i) Revenue included on Form 990, Part XIII, line 1

(ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following converte received in the exception of FASS ASC 958 sections or the similar assets for financial gain, provide the following converte received to the exception of FASS ASC 958 sections or these sections or the similar assets for financial gain, provide the following converte received to the exception of FASS ASC 958 sections or these sections or the section of the converte received to the exception of FASS ASC 958 sections or these sections are the section of the exception of the section of the section of the exception of the section of the the following amounts required to be reported under FASB ASC 958 relating to these items: Revenue included on Form 990. Part VIII. line 1 sets included in Form 990, Part X
or Paperwork Reduction Act Notice, see the Instructions for Form 990.

| Name of or | (Form 990, 990-EZ, or 990-PF) (2019) | | Page |
|--|--|--|--|
| ASSOCT | | OF CALIFORNIA | Employer identification number |
| STATE | UNIVERSITY SAN MARC | OS | 33-0556915 |
| Part III | from any one contributor. Complete colu- completing Part III, enter the total of exclusively re | mns (a) through (e) and the following line entry. I eligious, charitable, etc., contributions of \$1,000 or less | ion 501(c)(7), (8), or (10) that total more than \$1,000 for the y For organizations s for the year. (Enter this info. once.) \$\infty\$ \$ |
| (a) No. | Use duplicate copies of Part III if add | litional space is needed. | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | _ | _ |
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| | Transferee's name, addre | ess, and ZIP + 4 | Relationship of transferor to transferee |
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| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
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| | Transferee's name, addre | ess, and ZIP + 4 | Relationship of transferor to transferee |
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| 923454 11-06- | -19 | | Schedule B (Form 990, 990-EZ, or 990-PF) (20 |
| 300218 | 310575 20557.002 | 26 2019.05050 ASSOCIAT | TED STUDENTS, INC. O 20557_0 |
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| School to S | | | CALIFORNIA |
| Part III | (Form 990) 2019 STATE U Organizations Maintaining C | NIVERSITY SAN MARCOS Collections of Art, Historical Trea | 33-0556915 Page asures, or Other Similar Assets(continued) |
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1a Land b Buildings

c I easehold improvements

b Permanent endowment ▶

Description of property

(a) Cost or other basis (investment)

(ii) Related organizations

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

Complete if the organization answered "Yes" on Form 990, Part IV

Describe in Part XIII the intended uses of the organization's endowment funds
 Part VI Land, Buildings, and Equipment.

c Term endowment

line 11a. See Form 990, Part X, line 10.

78,354.

(c) Accumulate depreciation

45.610

(d) Book value

32,744.

32,744. le D (Form 990) 2019

(b) Cost or other basis (other)

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| thedule D (Form 990) 2019 STATE UNIVE | RSITY SAN MAR | COS | 33-0556915 | Page 3 |
| 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 of | r end.of.vear market v | alue |

| Complete ii trie organization answered Tes | | | |
|--|---|-------------------------------------|------------------------|
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or en | d-of-year market value |
| (1) Financial derivatives | | | |
| (2) Closely held equity interests | | | |
| (3) Other | | | |
| (A) | | | |
| (B) | | | |
| (C) | | | |
| (D) | | | |
| (E) | | | |
| (F) | | | |
| (G) | | | |
| (H) | | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) | | | |
| Part VIII Investments - Program Related. | | | |
| Complete if the organization answered "Yes" | on Form 990 Part IV line | 11c See Form 990 Part V line 13 | |
| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or en | d-of-vear market value |
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| 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 Description | 11d. See Form 990, Part X, line 15. | (b) Book value |
| | Description | | (D) DOOK VAIUE |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |

(7) (8) Complete if the organ (a) Des ed "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25 (1) Federal income taxes
(2) CAPITAL LEASE OBLIGATION
(3) DUE TO RELATED PARTIES (4) (5)

365,105. nn (b) must equal Form 990, Part X, col. (B) line 25.)

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII. X

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 1990, Part IV, line 23.

▶ 4 Go to www.irs.gov/Form990 for instructions and the latest information.

ASSOCIATED STUDENTY, INC. OF CALIFORNIA STATE UNIVERSITY SAN MARCOS

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:
Receive a severance payment or change of control payment?
Participate in, or receive payment from, a supplemental nonqualified retirement plan?

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation 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' or 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

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" on line 8, did the organization also follow the rebuttable presumption procedure described in

c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrued contingent on the revenues of:

Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply, Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

Compensation committee

Independent compensation consultant

Form 990 of other organizations

Ompensation survey or study

Approval by the board or compensation committee

Schedule D (Form 990) 2019

33-0556915

932053 10-02-19

SCHEDULE J

15300218 310575 20557.002

Part I Questions Regarding Compensation

cretionary spending account

29 2019.05050 ASSOCIATED STUDENTS, INC. 0 20557_01

Health or social club dues or initiation fees
Personal services (such as maid, chauffeur, chef)

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| nn line 1: ne 7b 90, Part I, line 99 90, Part I, line 1: ne 7b see 25: line 1: ne 7b 990, Part I, line 1: till, lines 1a ar | 22 21 22 22 22 24 44 44 44 44 Part IV, lim dt | 2c 2d 4a 4b 2a 2c 2d 4a 4b 1ines 1b ar | Expenses p 89,20 | 2e 3 3 4c 5 5 5 6 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 | 2,77 2,77 irn. 1,68 1,59 | 0. 6,944. 3,644. 9,208. 4,436. |
| nn line 1: ne 7b 90, Part I, line 99 90, Part I, line 1: ne 7b see 25: line 1: ne 7b 990, Part I, line 1: till, lines 1a ar | 22 24 44 44 44 44 44 44 44 44 44 44 44 4 | 2d 4a 4b 1ts With 2a 2b 2c 2d 4a 4b 1ines 1b ar | 89,20 | 4c 5 5 Seer Return 1 8 | 2,77 2,77 irn. 1,68 1,59 | 0. 6,944. 3,644. 9,208. 4,436. |
| n line 1: ne 7b 90. Part I, line I Financial m 990, Part IV ine 25: line 1: ne 7b | 4: 4: 4: 4: 4: 4: 4: 4: | 4a 4b 4b 4b 4b 4c 4c 4c 4c | 89,20 | 4c 5 5 Seer Return 1 8 | 2,77 2,77 irn. 1,68 1,59 | 0. 6,944. 3,644. 9,208. 4,436. |
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| n line 1: ine 7b 90, Part I, line 1 Financial m 990, Part IV 3 ne 25: line 1: ine 7b 990, Part I, line t III, lines 1a ar | 44 41 42 42 42 43 44 44 44 44 | 4a 4b 2a 2b 2c 2d 4a 4b | 89,20 | 5 per Retu 1 8 | 8 1,68 1,59 | 9,208. 4,436. |
| 99, Part I, line I Financial m 990, Part IV in 990, Part IV ine 1: ine 7b 990, Part I, line t III, lines 1a ar | 12.) Statements , line 12a. 2.2 2.2 2.4 4.4 4.9 4.9 4.9 4.9 4.9 4.9 4.9 4.9 4 | 2a 2b 2c 2d 4a 4b lines 1b al | 89,20 | 5 per Retu 1 8 | 8 1,68 1,59 | 9,208. 4,436. |
| 99, Part I, line I Financial m 990, Part IV in 990, Part IV ine 1: ine 7b 990, Part I, line t III, lines 1a ar | 12.) Statements , line 12a. 2.2 2.2 2.4 4.4 4.9 4.9 4.9 4.9 4.9 4.9 4.9 4.9 4 | 2a 2b 2c 2d 4a 4b lines 1b al | 89,20 | 5 per Retu 1 8 | 8 1,68 1,59 | 9,208. 4,436. |
| 90, Part I, line 1 Financial m 990, Part IV 3 ne 25: line 1: ne 7b 990, Part I, line t III, lines 1a ar | 12.) Statements , ine 12a. 2: 2: 2: 2: 44. 44. 41. | 2a 2b 2c 2d 4a 4b lines 1b ar | 89,20 | 5 per Retu 1 8 | 8 1,68 1,59 | 9,208. 4,436. |
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| m 990, Part IV s ne 25: line 1: ine 7b 990, Part I, line | 2: 22 2: 24 4: 44 4: 41 4: 47 4: 74 7: 74 | 2a 2b 2c 2d 4a 4b lines 1b ar | 89,20 | 2e 3 | 8 1,59 | 9,208. 4,436. 0. 4,436. |
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| 990, Part I, line | nd 4; Part IV, lin | | | 5 | | 4,436. |
| t III, lines 1a ar | nd 4; Part IV, lin | | | | | |
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| SITIONS | AS PART | T OF | THE STA | TEMEN' | T OF | |
| | HAS DET | TERMI | NED THA | T THE | | |
| AGEMENT | IONS AT | JUNE | 30, 20 | 20 AN | D 2019 | AND |
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ASSOCIATED STUDENTS, INC. OF CALIFORNIA
Schedule D (Form 990) 2019 STATE UNIVERSITY SAN MARCOS 33-0556915 Page 4

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

1 2,866,152.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. revenue, gains, and other support per audited financial statements

| ASSOCIATED STUDBNTS, INC. OF CALIF ALEANETE DIVIDENTS TITY SAM PARCOS ALEANETE DIVIDENTS TITY SAM PARCOS Or north be reported or Schiede 4, report compensation from the sech listed transformer and effective the sech listed transformer and the sech lis | TITITION 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | ASSOCIATED STUDES STATE UNIVERSITY SEPTION 6901, 2019 STATE UNIVERSITY Part Officers Directors, Trustees, KeyEmpoyse, and Highers and Process, and Highers and Hig | ASSOCIATED STUDENTS, INC.; OP CALIFORNIA 33-0556915 | × | | | | | | | | | | | | | | | | |
|--|--|--|---|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
|--|--|--|---|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

The organization? **b** Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

not described on lines 5 and 6? If "Yes," describe in Part III

Regulations section 53.4958-6(c)?

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

33-0556915 SIMILAR POSITIONS WITHIN THE AUXILIARIES OF THE CSU THROUGH THE AUXILIARY CSUSM THE THE PRESENTED TO THE ASI PERSONNEL and 8, and for Part II. Also UNIVERSITY, ACCORDINGLY OFFICIAL CAMPUS MINUTES; AND SET FORWARD BY AND/OR A CHANGE IN JOB DUTIES. ARE PAID BY Q. ORGANIZATIONS ASSOCIATION (AOA) SALARY SURVEY WHICH IS COMPLETED RECOMMENDED COST CORPORATION AND/OR THE UNIVERSITY. DEPENDING ON THE BASIS FOR POSITIONS WITHIN THE CSU CORPORATION. ASSOCIATED STUDENTS, INC. OF CALIFORNIA STATE UNIVERSITY SAN MARCOS required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, COMPENSATION ADJUSTMENT, DATA IS COLLECTED FROM VARIOUS AND THE GUIDELINES 33 OF N FOR EMPLOYEES THUS, RECORDED THE LAW, CORPORATION OR WAGE THE ORGANIZATION ARE COMPENSATION IS DETERMINED FOLLOWING EQUITY ADJUSTMENT STUDENT MANAGEMENT IN THE MINIMUM INFORMATION WITH RECOMMENDATIONS IS COMMITTEE AS AN ACTION ITEM AND, ų Pi CSUSM PRESIDENT COMPARABILITY OF SIMILAR SIGNED BY THE BI-ANNUALLY, CHANGES RAISES, OF THE ARE PERCENTAGE UNIVERSITY CHANGES

| | dule L (Form 990 or 990-EZ) 2019 STATE | | | 33-055 | 5915 | Page 2 |
|-----|--|--|------------------------------|--------------------------------|-----------------------------|-------------------------------|
| Fai | | - | 201 | | | |
| _ | (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of transaction | (d) Description of transaction | (e) Sha organiz rever | aring of ration's nues? |
| | | | | | Yes | No |
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| Par | | sponses to questions on Schedule L (see | instructions). | • | | |
| SCH | L, PART III, GRANTS C | R ASSISTANCE BENEFIT | TING INTER | ESTED PERSON | NS: | |
| (B) | RELATIONSHIP BETWEEN | INTERESTED PERSON AN | D ORGANIZA | TION: | | |
| DIR | ECTORS OF ORGANIZATION | I | | | | |
| (C) | AMOUNT OF GRANT \$ 7, | 000. | | | | |
| (D) | TYPE OF ASSISTANCE: S | CHOLARSHIPS | | | | |
| (E) | PURPOSE OF ASSISTANCE | : FINANCIAL AID | | | | |
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Transactions With Interested Persons SCHEDULE L 28b, or 28c, or Form 990-EZ, Part V, line 35a or 40b.

► Attach to Form 990 or Form 990-EZ. 2019 33-0556915 Part I Complete if the organizati answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (a) Name of disqualified person (c) Description of transaction 2 Enter the amount of tax incurred by the organiza section 4958
3 Enter the amount of tax, if any, on line 2, above, Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization (a) Name of interested per (g) In default Yes No Yes No Total
| Part III | Grants or Assistance Benefiting Interested Persons. wered "Yes" on Form 990, Part IV, line 27 Complete if the organization (b) Relationship between interested person and the organization (d) Type of (e) Purpose o DIRECTORS OF OR SEE PART V SEE PART V

SEE PART V FOR CONTINUATIONS

932131 10-21-19

15300218 310575 20557.002

2019.05050 ASSOCIATED STUDENTS, INC. 0 20557_01

| SCHEDULE O | Supplemental Information to Form 990 or 990 | E7 | OMB No. 1545-0047 |
|--|--|---------|-----------------------|
| (Form 990 or 990-EZ) | Complete to provide information for responses to specific questions on | | 2019 |
| | Form 990 or 990-EZ or to provide any additional information. | | Open to Public |
| Department of the Treasury Internal Revenue Service | ► Attach to Form 990 or 990-EZ. | | Inspection |
| Name of the organizatio | ASSOCIATED STUDENTS, INC. OF CALIFORNIA | | identification number |
| | STATE UNIVERSITY SAN MARCOS | 33-0 | 556915 |
| FORM 990, PA | RT III, LINE 4A, PROGRAM SERVICE ACCOMPLISHME | NTS: | |
| THE CAMPUS A | CTIVITIES BOARD (CAB) ORGANIZES A DIVERSE VAR. | IETY O | F |
| ACTIVITIES, | EVENTS, AND PROGRAMS FOCUSED ON INCREASING TH | E QUAL | ITY OF |
| STUDENT LIFE | AT CSUSM. CAB IS COMPRISED OF STUDENT MEMBERS | S AND A | ASI |
| PROFESSIONAL | STAFF WHO WORK COLLABORATIVELY TOWARD CREATI | NG PRO | GRAMS |
| THAT ENGAGE | ALL CSUSM STUDENTS, INCLUDING STUDENTS ENROLL | ED AT | THE |
| TEMECULA SAT | ELLITE CAMPUSES. | | |
| | | | |
| THE STUDENT | EMERGENCY FUND PROVIDES ASSISTANCE TO STUDENTS | S WHO | |
| ENCOUNTER UN | FORESEEN FINANCIAL EMERGENCIES OR CATASTROPHIC | C EVEN | TS THAT |
| DISRUPT THEI | R PROGRESS TOWARDS A DEGREE. | | |
| | | | |
| THE ASI LEAD | ERSHIP FUND PROVIDES FUNDING FOR STUDENT ORGA | NIZATI | ons' |
| ON-CAMPUS EV | ENTS AND FOR STUDENT ATTENDANCE AT IN-STATE A | ND | |
| OUT-OF-STATE | PROFESSIONAL CONFERENCES. | | |
| | | | |
| FORM 990, PA | RT VI, SECTION B, LINE 11B: | | |
| AN ELECTRONI | C FORM OF THE 990 IS EMAILED TO EACH BOARD MEI | MBER F | OR REVIEW |
| PRIOR TO FIL | ING. THE FORM 990 IS ALSO REVIEWED BY THE EXEC | CUTIVE | DIRECTOR |
| AND THE JOIN | T AUDIT COMMITTEE PRIOR TO FILING. | | |
| | | | |
| FORM 990, PA | RT VI, SECTION B, LINE 12C: | | |
| BOARD MEMBER | S AND STAFF ARE REQUIRED TO ANNUALLY DISCLOSE | AND S | IGN A |
| CONFLICT OF | INTEREST POLICY AGREEMENTS. THE CONFLICT OF I | NTERES' | T POLICY IS |
| DISCUSSED DU | RING THE FIRST MEETING OF THE FISCAL YEAR AT I | WHICH | TIME THE |

Schedule L (Form 990 or 990-EZ) 2019

BOARD MEMBERS AND STAFF SIGN CONFLICT OF INTEREST FORMS.

Schedule O (Form 990 or 990-EZ) (2019)

Name of the organization ASSOCIATED STUDENTS, INC. OF CALIFORNIA Employer identification 33-0556915

STATE UNIVERSITY SAN MARCOS

CONFLICT OF INTEREST ISSUES GO THROUGH A THREE PERSON REVIEW WHERE QUESTIONS REGARDING A POSSIBLE BREAK OF POLICY ARE BROUGHT TO THE PROGRAM

ALL FORMS ARE REVIEWED AND SIGNED BY THE EXECUTIVE DIRECTOR. ALL RELATED

DIRECTOR OR THE EXECUTIVE DIRECTOR

ALL DIRECTORS WHO HAVE CONTROL OVER A DEPARTMENT BUDGET AND MEMBERS OF THE BOARD OF DIRECTORS ARE REMINDED THROUGHOUT THE YEAR THAT THEY MUST BE DILIGENT IN THE APPLICATION OF THE CONFLICT OF INTEREST POLICY AND WITHDRAW THEMSELVES WHEN APPROPRIATE. THE APPLICATION OF THE CONFLICT OF INTEREST POLICY IS EVIDENCED BY THOSE OCCASIONAL TIMES WHEN VOTING MEMBERS OF THE INTERNAL OPERATIONS COMMITTEE OR THE BOARD OF DIRECTORS RECUSE THEMSELVES ON ISSUES IN WHICH THEY MAY BE PERSONALLY INVOLVED

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

ALL PERSONNEL OF THE ORGANIZATION ARE EMPLOYEES OF AND ARE PAID BY CSUSM CORPORATION. THE ORGANIZATION THEN REIMBURSES CSUSM CORPORATION. ALL COMPENSATION IS DETERMINED FOLLOWING THE GUIDELINES SET FORWARD BY CSUSM CORPORATION. DEPENDING ON THE BASIS FOR THE COMPENSATION ADJUSTMENT, DATA IS COLLECTED FROM VARIOUS SOURCES, INCLUDING COMPARABILITY STUDIES OF RECOMMENDED COST OF LIVING PERCENTAGE ADJUSTMENTS, EQUITY ADJUSTMENT AND/OR A CHANGE IN JOB DUTIES. THE INFORMATION WITH RECOMMENDATIONS IS THEN PRESENTED TO THE ASI PERSONNEL COMMITTEE AS AN ACTION ITEM AND, THUS RECORDED IN THE MINUTES; AND THE UNIVERSITY VICE PRESIDENT OF STUDENT AFFAIRS FOR REVIEW. ALL OFFICIAL CHANGES ARE SIGNED BY CSUSM CORPORATION ACCORDINGLY

FORM 990, PART VI, SECTION C, LINE 18:

(f)
Direct controlling
entity

(e)

(d) Totalinco

(state or

(c)
Legal domicile (state of foreign country)

THE ORGANIZATION DOCUMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE

15300218 310575 20557.002

2019 Open to Public Inspection

Related Organizations and Unrelated Partnerships

Complete if the organization answerd Ver's or Form 990, Part IV, Into 39, 54, 58b, 36, or 37.

Attach to Form 990.

SCHEDULE R Form 990)

ASSOCIATED STUDENTS, INC. OF CALIFORNIA STATE UNIVERSITY SAN MARCOS

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

(a)
Name, address, and EIN (if applicable)
of disregarded entity

2019.05050 ASSOCIATED STUDENTS, INC. O 20557_01

(f)
Direct controlling pentity

(e)
Public charity
status (if section
501(c)(3))

(d) Exempt Code section

(c) Legal domicile (state or foreign country)

(b) Primary activity

Identification of Related Tax-Exempt Organizations organizations

(a)
Name, address, and EIN
of related organization

ALIFORNIA

MINISTRATION AND SINESS SERVICES GHER EDUCATION

| Schedule O (Form 990 or 990-EZ) (2019) | Page 2 |
|--|---|
| Name of the organization ASSOCIATED STUDENTS, INC. OF CALIFORNIA STATE UNIVERSITY SAN MARCOS | Employer identification number 33-0556915 |
| WHEN RESPONDING TO A PUBLIC INSPECTION REQUEST FOR ANY OR | GANIZATIONAL |
| DOCUMENT OR FORM 990, THE ORGANIZATION WILL FULFILL SUCH | REQUEST IN A |
| TIMELY FASHION WITHOUT INQUIRING AS TO THE REASON FOR THE | PUBLIC INSPECTION |
| REQUEST. | |
| | |
| FORM 990, PART VI, SECTION C, LINE 19: | |
| THE DOCUMENTS ARE AVAILABLE (FOR INSPECTION OR COPYING) A | T THE MAIN OFFICE |
| DURING NORMAL BUSINESS HOURS. COPIES OF PRIOR YEARS' FORM | 990 AND AUDITED |
| FINANCIAL STATEMENTS ARE AVAILABLE (FOR INSPECTION OR COP | YING) AT THE MAIN |
| OFFICE DURING NORMAL BUSINESS HOURS AND POST IT TO THE WE | BSITE. WHEN |
| RESPONDING TO A PUBLIC INSPECTION REQUEST FOR ANY ORGANIZ | ATIONAL DOCUMENT |
| OR FORM 990 BY ANYONE, THE ORGANIZATION WILL FULFILL SUCH | REQUEST IN A |
| TIMELY FASHION WITHOUT INQUIRING AS TO THE REASON FOR THE | PUBLIC INSPECTION |
| REQUEST. | |
| | |
| FROM 990, PART IX, LINE 5-10: | |
| AMOUNTS REPORTED REPRESENT DISBURSEMENTS TO OTHER EXEMPT | RELATED |
| ORGANIZATIONS FOR SERVICES RENDERED TO THE FILING ORGANIZ | ATION. THE |
| FILING ORGANIZATION DOES NOT REPORT EMPLOYEES UNDER PART | V, LINE 2A AS |
| IT HAS ENTERED INTO CONTRACT AGREEMENTS WITH RELATED ORGA | NIZATIONS FOR |
| FINANCIAL AND ADMINISTRATIVE SUPPORT SERVICES CONDUCTED U | NDER THE |
| DIRECTION OF THE FILING ORGANIZATION. | |
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| 38 | dule O (Form 990 or 990-EZ) (2019) |
| 300218 310575 20557.002 2019.05050 ASSOCIATED STUDENTS | s, INC. O 20557_01 |

39 JADRAISING & GRANTS or Paperwork Reduction Act Notice, see the Instructions

| ASSO Schedule R (Form 990) 2019 STAT | ASSOCIATED STUDENTS, INC. OF CALIFORNIA STATE UNIVERSITY SAN MARCOS | ENTS, | INC. OF C | CALIFOR | AIA | | | | 33-05 | 33-0556915 | Page 2 |
|--|--|--|------------------------------|--|------------------------------|-----------------------------|-----------------------------------|--|--|--|--|
| 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. | ganizations Taxable artnership during the t | as a Partn ax year. | ership.Complete if | the organizal | ion answered " | Yes" on Form | 990, Part IV, li | ле 34, весац | use it had one or r | nore related | _ |
| (a) | (q) | (o) | (p) | (e) | | (μ) | (6) | (h) | (i) | 0 | (k) |
| Name, address, and EIN of related organization | Primary activity | Legal domidie (state or foreign country) | Direct controlling entity | Predominant income (related, unrelated, excluded from tax under sections 512-514) | | Share of total income | Share of end-of-year assets | Elisaro portionade albications? Yes No | amount in box 20 of Schedule 1 K-1 (Form 1085) | X managing le partner? 5) Yes No | General or Percentage managing ownership parner? |
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| Identification of Related Quantizations Taxable as a Corporation or Trust Complete if the organization answeed "Yes" on Form 990, Part IV, Ine 34, because it had one or more related organizations treated as a corporation or trust during the tax year. | ganizations Taxable | as a Corpo | wation or Trust. Co | omplete if the | organization ar | swered "Yes" | on Form 990, | Part IV, line: | 34, because it ha | d one or mo | re related |
| (e) | | | | | (p) | | | (4) | | (H) | Section |
| Name, address, and EIN of related organization | Z c | Ë | Primary activity | (state or foreign country) | Direct controlling entity | (Ccorp, Scorp, or trust) | | Share of total income | Share of end-of-year assets | Percentage ownership | compression 3 |
| | | | | *************************************** | | | + | 1 | | | Yes |
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33-0556915 ASSOCIATED STUDENTS, INC. OF CALIFORNIA STATE UNIVERSITY SAN MARCOS

| Columb C | y entit | | h one or more re | 990, Part IV, line 34, 350 | , or 36. in Parts IHV? |
|--|---|--|---------------------------------|----------------------------|--|
| Transition Part P | a Receipt of (i) interest, (ii) annuties, (iii) royaltes, or (iv) rent b Gift, grant, or capital contribution to related organization(s) of Gift, grant, or capital contribution from related organizations of Loans or loan guarantees to or for related organizations) | from a controlled entity (s) | | | |
| or or gan tration(4) and or gan tration(4) and or gan tration(5) gan training conserver meteororing. Training to an array of a 158.005T OP P 634,158.005T OP S 33,943.5HARE O | Loans or loan guarantees by related organization(s) Dividends from related organization(s) | anization(s) | | | |
| Color of organization(s) | Sale of assets to related organization(s) Purchase of assets from related organization(s) | | | | |
| or or parastron(s) and or parastron(s) on on with must complete this line, including convered relationships and transaction thresholds, type (sa) Transaction Transaction Transaction Transaction thresholds Transaction threshold | Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets to | relate | | | |
| on on who must complete this line, including covered relationships and transaction thresholds. Transport Tran | ipment, or other es or membersh | Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations for related organizati | tion(s) | | |
| Transaction formulate this line, including covered relationships and transaction thresholds. Transaction formulation (d) | es or membersh quipment, mailin yees with relate | Performance of services or membership or fundraising solicitations by related organizations of facilities, equipment, mailing lists, or other assets with related organization(s). Sharing of paid employees with related organization(s). | tion(s) | | |
| Translation | o related organi | Peimbursement paid to related organization(s) for expenses | | | |
| Transaction Amount molect | or property to re or property from or property from | | the telegraphic transfer at | is line including covered | relationships and transaction thresholds |
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| SAN MARCOS S 33,943. SHARE OF INVESTMENT | TATE UNI | R) CALIFORNIA STATE UNIVERSITY SAN MARCOS | α | 590,211. | COST OF SERVICES |
| | STATE UNIVERSITY | | Ø | | OF INVESTMENT |
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| | | | 41 | | Schedule R (Form 990) 2019 |

33-0556915

ASSOCIATED STUDENTS, INC. OF CALIFORNIA
Schedule R[com:980] 2019 STATE UNIVERSITY SAN MARCOS
PATM Unrelated Organizations Taxable as a Partership Compete if the organization answeed "ves" on Form 950, PatM, Ine 37.

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Legal domicile (state or foreign ex

42

43 2019.05050 ASSOCIATED STUDENTS, INC. O 20557_01

3/5/21 Reports

| Name * | Caleb Standley |
|--|--|
| Email * | Stand015@cougars.csusm.edu |
| Position on Board * | COBA |
| Highlights and successes related to your | Met with constituents |
| position (i.e. meetings, past events, new | Office Hours |
| campus/communuity partners) * | Sat on committees |
| | Student Success and retention committee |
| | Met with sustainability rep about removal. |
| | VPFAS met with students |
| What ASI Committees are you currently sitting on? * | Internal Operations |
| Updates on ASI Committees: * | We did not remove the sustainability rep. |
| What University Committees are you currently sitting on? * | Student Grievance Committee |
| Updates on University Committees * | Student Grievance has not met |
| Other University committees you're sitting on, but are not listed above: | Student Success and retention- Working on mapping committees. Joint Audit Met and confirmed audit. Also extended Aldrich. |
| Upcoming Events and New Initiatives/Collaborations * | r |

Areas of concern related to your position and r its constituents. * Requestor Name * Julia Glorioso Email * asichabss2@csusm.edu This request is for: BOD What is the initiative? Credit/no credit When is it taking Starting March 12th place? When should Monday, March 8, 2021 promotion START * When should Friday, March 19, 2021 promotion END Where do you want Instagram Feed Post this posted? * Instagram Story How many times Two posts for Instagram. Thinking one post on the feed and one on the story. would you like the One post would be about credit/no credit and what it's about and what info posted? * students' options are, and the next would be a reminder on the story that students can start petitioning on March 12th. Maybe another post when the last day to petition is later on in the semester? Is this a collaboration? No

If yes, who are the

partners?

Who is the intended audience? *

All CSUSM students

What information Info is attached in the files. And also the link:

needs to be shared

https://www.csusm.edu/enroll/20_21_policy_adjust/students/grading.html

with the audience? *

Is there anything else

we should know about

this request? *

If needed, upload any files you want to share.



<u>screen_shot_20210223_at_10.00.08_pm.png_279.91_KB · PNG</u>

Attach a File



csu_san_marcos_mail__new_policy_allows_expanded_use_of_credit_nocredit_gr ading.pdf_278.37 KB · PDF

Name *

Sarah Ortiz

Email *

ortiz252@cougars.csusm.edu

Position on Board *

Diversity and Inclusion

related to your position

Highlights and successes I got to reach out to the Ethnic Studies Department and we are going over a collaboration with CHABBS.

(i.e. meetings, past

events, new

campus/communuity

partners) *

What ASI Committees are you currently sitting on?

• Student Advocacy Committee

*

Updates on ASI

We have a meeting this Friday, going over how to stay connected to

Committees: *

students.

What University

• General Education Committee (GEC)

Committees are you

• Graduation Initiative Steering Committee

currently sitting on? *

• Student Grievance Committee

Updates on University Committees *

GEC: The proposal, AIS – 410 – United States History Through Indigenous Lenses: Pre–Contact to the Present, with the step of General Education Committee Chair has been approved and is moving on to the Dean of Academic Programs step.

TA – 328 – Stage to Screen–was not approved, explanations appeared to be lacking in thoroughly on three points: 1) the focus on all of the identity markers may not be conducive to deep examinations, 2) assignments and activities necessitated description of "how" students were going to go about developing critical consciousness (e.g., tools, approaches, prompts), and 3) examples of student tasks (not the assignment descriptions) were not always centered within equity, social justice.

TA 300: Theatre for Social Change-did not get approved This course is promising for a D&E course, however, requires major revision. Overall, the syllabus and the assignments need to be annotated in detail and the material needs to be connected to the rubric, showing how each criterion is met. • SLOs and course objectives do not reflect D&E criteria.

GISC: Begin developing recommendations for SSRC's consideration for near-term action that will get our students across the finish line.

SGC: haven't heard from them

Other University committees you're sitting on, but are not listed above:

Major Migration Workgroup: more emphasis on GISC

Upcoming Events and

As mentioned before, D&I are working with CHABBS folks on Anti-Racism event, D&I working on Unheard Changes (waiting on Jake for history

Initiatives/Collaborations approval)

Email *

New

Areas of concern related to your position and its constituents. *

None at the moment, just how are we putting us out there in order to communicate with students.

asichabss2@csusm.edu

Name * Julia Glorioso

Position on Board * **CHABSS Representative**

Highlights and successes related to your position (i.e. meetings, past events, new campus/communuity partners) *

Met with Dr. Perez and the diversity and inclusion representatives to discuss anti-racism event. Met with Leo Melena and Denise Barham from CHABSS.

What ASI Committees are you currently sitting on? *

Student Advocacy Committee

| Updates on ASI Committees: * SAC: had a roundtable discussion diving into the CSSA resolutions. What University Committees are you currently sitting on? * • Academic Policy Committee (APC) • Student Affairs Committee (SAC) • Graduation Initiative Steering Committee • Student Grievance Committee |
|---|
| currently sitting on? * Student Affairs Committee (SAC) Graduation Initiative Steering Committee |
| |
| Updates on University Committees * SAC: No meeting this week. Last week discussed SGC policy and Cougar Courses. GISC: none SGC: none APC: No meeting this week, met last week and discussed credit hour policy. |
| Other University committees you're sitting on, but are not listed above: CHABSS Student Academic Success Taskforce: Met last weel and this week, Worked on developing student survey. |
| Upcoming Events and New Meet the CHABSS Deans Event Initiatives/Collaborations * CHABSS Alumni Panel Event |
| Areas of concern related to your UPD and mental health position and its constituents. * |

| Name * | Alexandra Chavez |
|---------------------|------------------------|
| Email * | achavez61900@gmail.com |
| Position on Board * | CHABSS Representative |

| Highlights and successes related to your position (i.e. meetings, past events, new campus/communuity partners) * | -Selected a date and time for CHABSS Alumni Panel Event and communicated with all alumni participating. -Julia and I met with Chris and Sarah from Diversity and Inclusion to discuss our anti-racism event, the format of it, and the potential films we may screen for the event. -Touched base with Dylan today as well. |
|--|---|
| What ASI Committees are you currently sitting on? * | Student Advocacy Committee |
| Updates on ASI Committees: * | -CSSA Discussions and Questions -UPD funding |
| What University Committees are you currently sitting on? * | Student Affairs Committee (SAC) |
| Updates on University Committees * | NA |
| Other University committees you're sitting on, but are not listed above: | CHABSS Diversity Working Group -Discussing timeline of events for DIAA awards. (Diversity Inclusion Excellency Awards) -Redefining diversity and inclusion to our standards. -Beginning the brainstorming process for new strategic planning. |
| Upcoming Events and New Initiatives/Collaborations * | -CHABSS Meet the Dean Event is coming up shortlyAnti-Racism collab still in the works. |
| Areas of concern related to your position and its constituents. * | NA |

Lauren Gonzalez

Name *

| Email * | gonza823@cougars.csusm.edu |
|--|--|
| Position on Board * | CSTEM representative |
| Highlights and successes related to your position (i.e. meetings, past events, new campus/communuity partners) * | -Campfire meeting was great! I got to learn a lot about some members of ASI and I think they were able to get to know me as well -Laurie Schmelzer and I created a template of what to include when asking CSTEM students to create a self profile to post, the first will be coming soon within the next following weeks and hopefully one to come out each week! -Meeting with Dylan to discuss putting me on more committees within ASI and the University, I am excited to start them! |
| What ASI Committees are you currently sitting on? * | Internal OperationsElections Committee |
| Updates on ASI Committees: * | -Elections committee meeting was canceled for the week but there is a Meet the Candidates zoom meeting on Thursday for students to meet the candidates. -I was recently placed on Internal operations so no updates from myself currently |
| What University Committees are you currently sitting on? * | Budget and Long-range Planning (BLP) |
| Updates on University Committees * | I was just placed BLP so no new updates so far as I haven't been apart of a meeting yet. |
| Upcoming Events and New Initiatives/Collaborations * | -No upcoming events -Initiative: Student profiles for those in CSTEM weekly/bi- weekly posting of students and what they are doing within |

| | their major. I want it to focus on their projects and areas of research that are notable and students of CSUSM can recognize. |
|--|--|
| Areas of concern related to your position and its constituents. * | I am not too sure about the areas of concern yet |
| | |
| Name * | Christopher King |
| Email * | asidandi1@csusm.edu |
| Position on Board * | Diversity and Inclusion Representative |
| Highlights and successes related to your position (i.e. meetings, past events, new campus/communuity partners) * | Developing a new project for the ASI website! |
| What ASI Committees are you currently sitting on? * | Internal OperationsAwards CommitteeStudent Advocacy Committee |
| Updates on ASI Committees: * | Presented to the SAC committee on the idea I had for the ASI website. It is a way for students to communicate more directly with the BOD. Awards committee solidified the format and concepts for TLAN and is motivated to move forward with our current objective of preparation. |
| What University Committees are you currently sitting on? * | Student Fee Advisory Committee |

| Updates on University Committees * | No new updates. |
|--|---|
| Other University committees you're sitting on, but are not listed above: | Instructionally Related Activities |
| Upcoming Events and New Initiatives/Collaborations * | Working with the CHABSS representatives on an anti-racism event. Unheard Changes posts are coming well underway. |
| Areas of concern related to your position and its constituents. * | Passing a resolution on UPD reformation and other topics. Better effective communication and representation on student issues. |
| Name * | Jacqueline Montano |
| Email * | asicoba2@csusm.edu |
| Position on Board * | Coba Rep |
| Highlights and successes related to your position (i.e. meetings, past events, new campus/communuity partners) * | Busy busy week, Last minute NCHEA Meeting and BLP meetings(!), and Elections began(!!), plus Women's Leadership Symposium(!!!) and to top it all off midterms! |
| What ASI Committees are you currently sitting on? * | Internal Operations Student Advocacy Committee Elections Committee |
| Updates on ASI Committees: * | Internal Operations; we are in-between meetings, Tim has shared with us the master budget that is up for approval Elections; Elections campaigning season has begun. We had a |
| | great first event and have two more events next week. |

SAC;

| What University Committees are you currently sitting on? * | Budget and Long-range Planning (BLP) North County Higher Education Alliance (NCHEA) |
|--|--|
| Updates on University Committees * | BLP; working on 3 and 10 year working plans and best course of actions for the school to not effect too many students as requirements are changed |
| | NCHEA; We had a last minute meeting with some amazing news, Credit for Prior Learning has been approved at Palomar and is in motion at MiraCosta. |
| Other University committees you're sitting on, but are not listed above: | WLS; event is currently happening! Our closing Speaker is Gail Cole-Avent. We still have spots available and open to all! Thank you to MCT for their amazing social media |
| Upcoming Events and New Initiatives/Collaborations * | Coffee with the candidates next Tuesday 9am Meet the Candidates Thursday 7pm |
| Areas of concern related to your position and its constituents. * | Constituents are eager to get back on campus and ready for answers that can be shared for how that may look |