

Dr. Ann Bersi, Chair Nevada State Tax Commission

Dr. Matthew J. Ceppi President's Designee Cal State San Marcos

Mr. David Chang Hampton Inn San Diego/ San Marcos

Mr. Tres Conrique Rancho Santa Fe Technology

Dr. Linda L. Hawk Cal State San Marcos

Mr. Brandon Losey Dowling & Yahnke Wealth Management Alumni Member

Mr. Dimitris Magemeneas Edward Jones

Ms. DawnMarie Myers Student Member

Dr. Graham Oberem Cal State San Marcos

Ms. Susan Schnepf Attorney at Law

Dr. Camille P. Schuster Faculty Member

Dr. Sharon D. Whitehurst-Payne Community Member

Dr. Ernest E. Zomalt, Vice Chair Community Member **Regular Meeting of the Board of Directors** 

June 10, 2014 - 3:00 p.m. - 4:30 p.m.

Via Teleconference: (760) 750-8300, Conf ID 4555 (Note New Conf ID)

Physical Location: UARSC Conference Room (Note New Location)

#### **AGENDA**

I. Introduction of New Executive Director (Hawk)

II. Convening of the Regular Board Meeting (Bersi)

A. Consideration of Minutes February 27, 2014 Regular Meeting (Attachment A)

**III.** Committee Reports

A. Finance & Operations Committee (Bersi)

B. Joint Audit Committee (Losey)

C. Nominating and Governance Committee (Zomalt)

IV. Consent Agenda

A. Quarterly Financial Report 03/31/14 (Svatora) (Attachment B)

B. Form 990 Tax Return FY 12/13 Ratification (Svatora) (Attachment C)

C. Delegation of Authority Policy – Signature Authority Page Revision (Svatora) (Attachment D)

D. New Delegation of Authority Policy effective 07/01/14 (Svatora) (Attachment E)

E. Procurement Policy Revision (Svatora) (Attachment F)

F. Revision to Officers FY 13/14 (Zomalt) (Attachment G)

G. Nomination of New Chairperson – Sharon Whitehurst-Payne (Zomalt)

V. Action Items

A. Proposed Rebalance of Reserves (Svatora) (Attachment H)

B. Starbucks Remodel Financing Request (Svatora) (Attachment I)

C. FY 14/15 Operating Budget & Resolution (Svatora) (Attachment J)

D. Compensation Administration Guidelines - Sponsored Projects (Hinojosa) (Attachment K)

E. Exiting CalPERS Healthcare & Post-Retirement Medical Program Resolution (Hinojosa & Svatora) (Attachment L)

VI. Administration Report (Newberg)

VII. University Update (Hawk)

VIII. Recognition of Exiting Board Members – Bersi and Schuster (Zomalt)

IX. Adjournment of Regular Meeting

Next Meeting (Annual and Regular Meeting): September 4, 2014, 4:00 p.m., Center for Children & Families Classroom

## **ATTACHMENT A**

Minutes of the February 27, 2014 Regular Meeting



# Minutes of the Regular Meeting of the Board of Directors February 27, 2014, 4:00 p.m.

Center for Children and Families

#### Attendees:

Members: Ann Bersi (Chair), David Chang, Tres Conrique, Linda Hawk, Dimitris

Magemeneas, DawnMarie Myers, Susan Schnepf, Camille Schuster, Sharon

Whitehurst-Payne, Ernest Zomalt (Vice Chair)

Absent:

Matthew Ceppi, Brandon Losey, Graham Oberem

Staff:

Sarah Derho, Michelle Hinojosa, Grant Hubbard, Dora Knoblock, Greg Svatora

Guests:

Kent Gibson, University Consultant, Dave Hanson, Sodexo, Annie Macias, San

Marcos University Corporation, Rick Nargi, Sodexo, Donna Provost, Sodexo,

Jamie Rose, San Marcos University Corporation

#### **Convening of the Regular Meeting**

A special presentation was provided to the Board, excluding staff, by University Consultant, Kent Gibson, on the 5-year Strategic Plan prior to the regular Board Meeting.

A quorum being present, Chair Bersi called the meeting to order at 4:00 p.m. Bersi welcomed University Consultant, Kent Gibson, and provided a welcome to the new Board members joining today, Dawn Myers and Dimitris Magemeneas (not yet present). She also welcomed members of sister auxiliary San Marcos University Corporation (UCorp), Annie Macias and Jamie Rose sitting in on today's meeting.

#### **Changes to Agenda**

The order of the Agenda was changed so that the Campus Partner Presentation, Agenda Item VI, followed the Closed Session, Agenda Item III. A special recognition of Executive Director Knoblock followed Agenda Item VI.

#### Minutes of the November 14, 2013 Regular Meeting

A motion was made and seconded (Conrique/Schnepf) to approve the November 14, 2013 Regular meeting minutes. Motion carried.

#### **Closed Session**

At 4:05 p.m., a motion was made and seconded (Conrique/Zomalt) to enter into a Closed Session. Motion carried. The purpose of the Closed Session conducted by Hawk was to present to the Board the steps she plans to undertake in finding a replacement Executive Director for UARSC as Knoblock is retiring on April 30, 2014. All UARSC staff

members and guests in attendance, with the exception of Gibson, were excused by Chair Bersi.

#### Reconvening of the Regular Board Meeting

Chair Bersi reconvened the regular Board meeting at 4:18 p.m. *Magemeneas entered* 4:18 p.m. and was welcomed to the Board.

#### **Campus Partner Presentation**

Bersi welcomed Campus Partners, Sodexo to the meeting and introduced Dave Hanson, Vice President of Operations, Rick Nargi, Regional Manager, and Donna Provost, General Manager. Sodexo gave a presentation on campus dining services to include accomplishments, the annual expectation meeting updates, hiring of employees and student employees, the University Student Union (USU) kitchen space, the Taste of the Union Event, the voluntary meal plan program and sales, and dining services finances and called for questions.

Discussion ensued. Board members inquired about the following: target level for student employee participation, the coordination agreement regarding the kitchen, the non-exclusive catering environment on campus, the voluntary meal plan program, the Panda Express sub-contract, and student programming. Conrique inquired as to whether Sodexo was aware of UARSC's budget goals. Schnepf asked Sodexo how the UARSC Board would know what Sodexo needs from the Board to succeed. Schuster asked what it is that the organization is trying to accomplish with food services and noted that the new food facilities are not close to parking and the frustration of finding food on campus as the majority of the student population are working students, with only 10% being campus residents. Conrique added that a partnership is important, knowing Sodexo's goals and programming, because UARSC would like to see a better than average performance from its partners and understand how we can help Sodexo's success for a win-win scenario. Conrique also wants to see Sodexo's business plan to understand where they are and where they are going and what steps they are trying to take, emphasizing that If UARSC doesn't understand their plans, decisions can be made at the campus level that are detrimental to Sodexo's success. Conrique stressed that transparency is important and there should be a collaborative effort between Sodexo and UARSC.

Sodexo stated that though there is no target for student participation, there is a desire to keep student employment at a high level. Sodexo student employment at CSUSM is currently twice the average of other schools Sodexo manages dining services for, at 77%. Many student employees are starting to work with Sodexo full-time and in leadership/management roles and there is opportunity for growth within the company.

The coordination agreement is currently under review with UARSC and sister auxiliary UCorp regarding handling events in the USU. Sodexo shared that student groups will be allowed to use the kitchen for no charge under Sodexo's supervision.

Sodexo shared the monumental effort and significant investment to bring subcontractor Panda Express to campus that was desired by the student population.

Discussion was held regarding the voluntary meal plan program and the fact that there is no resident dining program.

Sodexo stated that they are a standalone entity and don't feed into UARSC's goals. Sodexo was expecting a loss coming into CSUSM at the old Dome food area, which finished at a deficit of \$252,000 this year, and are expecting to turn the loss around with the opening of the new food concepts in the new USU and engagement and marketing with the student community. Magemeneas noted that it is hard to stay in business running with a deficit and it is imperative to figure out what the students want and suggested the possibility of Sodexo participating in the Senior Experience Program.

Hanson stated that he can put together a document for the UARSC Board outlining Sodexo's plans and goals for CSUSM Dining and that Sodexo does have a business plan that he can translate it into a business plan for UARSC. Knoblock suggested this as an item for the September meeting.

There was discussion regarding the challenge of operating catering in a non-exclusive environment on campus, with no incentive for faculty/students to use the catering services offered by Sodexo. There is no fixed revenue stream and this is very non-traditional model for Sodexo with 99.9% of campuses that Sodexo serves having catering exclusivity. Conrique again brought up transparency and asked that Sodexo share this information with the campus, so that everything the campus does helps support Sodexo's success and that decisions made on campus don't make Sodexo's success more difficult.

Gibson pointed out that with the before and after snapshot of the operation starting out in the Dome, that it is remarkable that Sodexo has done so well. There are solid fixed costs of operating the food concepts and Sodexo would like as much traffic as possible. Sodexo stated that they would love to be part of the million dollar walk through campus when families are visiting.

It was noted that the USU has only been open for a few weeks and much remains to be seen. Bersi thanked Sodexo for their report and congratulated them for opening the new food concepts in the USU on time.

#### **University Update, Administration and Committee Reports**

#### **Finance and Operations Committee**

Bersi reported. The Finance & Operations Committee met on February 18, 2014 and reviewed the Quarterly Financials ended 12/31/13 and the Revision to the Property Control Policy and Procedures which will be considered for action later in the meeting.

#### **Administration Update**

Knoblock reported. The UARSC Common Financial System (CFS) Conversion Project, converting UARSC Accounting from CostPoint to PeopleSoft is coming along nicely and the go live date is still on target for July 1, 2014. The ultimate goal is to streamline business process and provide access to a dynamic data warehouse that will accommodate various reporting needs. One year from now, all the auxiliaries will be operating in PeopleSoft, business processes will be standardized, redundancies eliminated, improved risk mitigation and compliance and increased access to financial data. Training sessions were announced to the University Community yesterday for both current users and non-PeopleSoft users. On February 4<sup>th</sup>, the Office of Sponsored Projects began holding office hours on campus to support the faculty and staff with preaward services. Initial reactions have been positive. UARSC hopes to capture additional faculty members interested in submitting proposals and that this new service will provide more accessibility and convenience to our campus clients. The Center for Children and Families (CCF) reached its highest enrollment rate of 159 children, 110 of which are CSUSM-affiliated children and 49 children from the surrounding community.

#### University Update

Hawk reported on behalf of Ceppi. The new University Student Union opened on January 21, 2014. Hawk acknowledged the hard work that Knoblock and the UARSC team did with the opening of the new food concepts. Updates in the student housing area is that an addendum to the Agreement for a Quad phase III was recently signed. This will add an addition 300 beds in fall 2015, putting 1,500 students on campus. The North City project is fully developed and they are going to develop some additional projects, a hybrid non-student apartment complex with retail space and a theatre. President Haynes gave her 10<sup>th</sup> Annual Report to the Community address which was on KPBS. She was also interviewed on the Roger Hedgecock show, highlighting all the great things that have happened on campus since her Presidency. Hawk reported on the construction of the new Student Health Services building next to the parking structure which will be online at the end of this calendar year. She discussed student health and the affordable care act and noted that mental health services are huge. The School of Nursing will also be moving out of the San Marcos Ambulatory Care building across the street by January 1, 2015 when their lease ends and into the third floor of University Hall. She reported on a new project going forward to the Board of Trustees for a full court gymnasium with 1,400 seats and 1,000 floor seats. The Department of Athletics recently submitted an NCAA Division II application for membership and part of being accepted is having the proper facilities. Part of the funding will come from the \$4 million in reserves at the Clarke Field House and partly from the alternative consultation for student success fee. \$25 of that fee was earmarked to rebuild the gym and the students set it as a priority. Construction is slated to begin in summer with the first home game in fall 2016. CSUSM will know by the end of this year if it accepted into the NCAA Division II.

#### **Action Items**

#### Quarterly Financial Report 12/31/13

Svatora reviewed the Quarterly Financial Report ended 12/31/13 and the details of the summary provided in the packet. He noted that since 2010, the CSUSM Foundation have been on our accounts as all of their projects and investment needs were managed by UARSC, but starting July 1, 2014, with the implementation of PeopleSoft, they will have their own bank accounts and investments. As of next year, the campus will be charging back fees to the Foundation. Overall, UARSC is close to target in operating revenues at \$770,000. UARSC operating expenses of \$817,000 are over budget primarily due to the Finance Director position which was budgeted at half-time and is now full-time back at UARSC. In addition, the annual business insurance is paid in full at the beginning of the year at \$31,000. The bottom line is that net revenues are at (\$47,000) vs. budget amount of \$10,500. He noted the slight variance in net indirect activity in grants and contracts and some for investment income which will offset some of that amount. Zomalt asked at what point action will be taken to mitigate the \$46,000 shortfall. Svatora noted that the shortfall is closer to being \$20,000 in that accrued investment interest income of \$10,000 had not been booked and that \$16,000 of the annual business insurance was included in the expenses. Also, the cyclical nature of grants and contracts is such that they build up during the second half of the fiscal year, but are spread out evenly in the budget. Whitehurst-Payne inquired as to whether a deficit was expected at the end of the year. Management will be providing a mid-year report and are anticipating breaking even. Hawk noted that Svatora will provide the best recommendations to end June 30 at break-even which is close. Bersi called for questions. A motion comes moved and seconded from the Finance & Operations Committee to approve the Quarterly Financial Report ended 12/31/13 as presented. Motion carried.

#### **Revision to Property Control Policy**

Svatora reviewed the major revisions proposed to the Property Control Policy presented in the packet, including changing the amount for capitalizing which used to exclude the grants and contracts but will now be added to the accounting process to record and track, non-capitalized equipment amount has been changed from \$1,500 to \$2,500 and UARSC will be able to use the campus property tagging system, as well as computer maintenance agreements. These updates are similar to the campus' policy and limits. Bersi called for questions. A motion comes moved and seconded from the Finance & Operations Committee to approve the proposed revisions to the Property Control Policy as presented. Motion carried.

#### Proposed FY 14/15 Meeting Calendar

Knoblock reviewed the proposed FY 14/15 Board meeting calendar. A motion was made and seconded (Whitehurst-Payne/Zomalt) to approve the proposed FY 14/15 meeting calendar as presented. Motion carried.

#### **Special Recognition of Executive Director Dora Knoblock**

Bersi awarded Knoblock with a plaque in recognition for her years of service to UARSC, highlighted her contributions to UARSC over the past almost six years and offered

congratulations on her retirement. Zomalt highlighted Dora's contributions to the campus over her 25-year career, prior to her leadership at UARSC.

#### Adjournment

The next Regular Board meeting is scheduled for May 22, 2014 at 4:00 p.m. As agreed earlier in the meeting, the next meeting will be held at the new USU with an optional tour offered.

The meeting adjourned by acclamation at 5:45 p.m.

Respectfully submitted, Sarah Derho

| I, Bella Newberg, Secretary, hereby certify that the above Minutes were approved by the University        |
|---|
| Auxiliary and Research Services Corporation Board of Directors at a regular meeting held on May 22, 2014, |
| at San Marcos, California.  |
|   |
|   |

| Secretary | Date |
|-----------|------|

## **ATTACHMENT B**

Quarterly Financial Report 03/31/14 and Summary

## **University Auxiliary and Research Services Corporation**

#### **Summary of 3/31/14 Financial Statements**

#### Statement of Financial Position (pg 1) and Net Asset Summary (pg 2)

- <u>Assets:</u> Total assets at 3/31/14 were \$20,576,482, up \$43,512 from the 12/31/13 quarterly financial report total. There were only minor and insignificant changes in the asset account balances during the quarter.
- <u>Liabilities</u>: Total liabilities at 3/31/14 increased by \$245k primarily due to a \$215 increase in vendor accounts payable and accrued expenses at the close of the quarter. Cash and short-term investments held on behalf of the CSUSM Foundation remained steady at \$8 million.
- Net Assets: Page 2 of the financial statements provides a breakout of the Net Assets shown on Page 1, the Statement of Financial Position. The total amount of Operating Reserves was \$895k at 3/31/14 vs \$898k at 12/31/13. A proposal is being made to the Finance/Ops committee to recommend a rebalance of the reserves in order to strengthen the Working Capital balance. This will be discussed in more detail at the committee meeting. The balances in the other net asset categories remained basically unchanged from the prior 12/31/13 quarter balances.

#### **Program Revenue Activity Summary (pg 3)**

- <u>Total Grants and Contracts</u> fiscal year-to-date activity through the quarter ending 3/31/14 was approximately \$5.6 million vs a budgeted amount of \$5.4 million.
- <u>Campus and Designated Programs</u> gross fiscal year-to-date revenue activity through the quarter ending 3/31/14 was approximately \$1.8 million, matching the budgeted amount.

#### Net Operating Revenue Summary (pg 4)

• Net administrative fee recovery from Grants and Contracts generated net fiscal year-todate indirect recovery revenues of \$890k for the quarter ending 3/31/14, which was

- slightly above budget by \$20k. The annual amount of indirect sharing to the campus was accrued at a fiscal year-to-date amount \$301k for the quarter ending 3/31/14.
- <u>Campus Program and Business Service Fee Revenues</u>: Campus Program admin fee fiscal year-to-date revenue was \$115k for the quarter 3/31/14 vs budgeted amount of 90k. The business service fee for CSUSM Foundation was accrued at the fiscal year-to-date amount of \$112,500 for the quarter.
- <u>Bookstore Net Revenue</u>: Fiscal year-to-date commissions of bookstore net revenues were slightly below budget at \$340k vs a budgeted amount of \$368k.
- <u>Investment Income</u>: Fiscal year-to-date investment income was \$31k, matching the budgeted year-to-date amount of \$31k for the quarter ending 3/31/14.
- <u>UARSC Operating Expenses</u> through 3/31/14 was \$1,316,376 vs the budget amount of \$1,159,500 resulting in an overage of \$157k. Approximately \$48k relates to the Finance Director position being a full-time vs a budget position level of half-time. UARSC is working with the campus to obtain funds from FY 12/13 foregone indirect to help offset the overage during this transition year for fiscal operations.
- <u>Net Operating Revenues</u> through the quarter ending 3/31/14 was \$10k vs a budgeted amount of \$77k and is shown on the Statement of Financial Position and Net Asset Summary.

# UARSC Statement of Financial Position March 31, 2014

|  | Deleves             |                     | Quarter      |
|--|---------------------|---------------------|--------------|
| Assets                                       | Balance<br>03/31/14 | Balance<br>12/31/13 | (Decrease)   |
| Cash and Short-Term Investments-(UARSC)      | \$ 5,751,332        | \$ 5,473,234        | \$ 278,098   |
| Cash and Short-Term Investments-(CSUSMF)     | 8,090,801           | 8,059,886           | 30,915       |
| Accts Receivable-Sponsored Programs          | 704,659             | 768,312             | (63,653)     |
| Other Receivables                            | 201,573             | 268,715             | (67,142)     |
| Notes Receivables                            | 250,000             | 250,000             | (0.72.2)     |
| Other Assets                                 | 108,658             | 139,664             | (31,006)     |
| CCF-Bldg & Fixtures (Net)                    | 5,284,158           | 5,375,199           | (91,041)     |
| Property & Equipment (Net)                   | 185,301             | 197,960             | (12,659)     |
| Total Assets                                 | \$ 20,576,482       | \$ 20,532,970       | \$ 43,512    |
| Liabilities & Net Assets                     |                     |                     | THE STATE OF |
| Liabilities:                                 |                     |                     |              |
| Accounts Payable and Accrued Expenses        | \$ 2,077,066        | \$ 1,861,845        | \$ 215,221   |
| Due to CSUSMF - Cash and Short-Term Invest's | 8,090,801           | 8,059,886           | 30,915       |
| Deferred Revenue                             | 521,846             | 572,727             | (50,881)     |
| Post-Retiree Health Benefit Accrual          | 1,632,734           | 1,582,905           | 49,829       |
| Total Liabilities                            | \$ 12,322,448       | \$ 12,077,364       | \$ 245,085   |
| Net Assets:                                  |                     |                     |              |
| Unrestricted:                                |                     |                     |              |
| Operating Reserves                           | \$ 895,482          | \$ 898,312          | \$ (2,830)   |
| Designated Programs                          | 478,301             | 565,392             | (87,091)     |
| Campus Programs                              | 1,401,073           | 1,465,460           | (64,388)     |
| Current Year Net Asset Activity              | 9,719               | (46,717)            | 56,436       |
| CCF-Bldg & Fixtures                          | 5,284,158           | 5,375,199           | (91,041)     |
| Equipment                                    | 185,301             | 197,960             | (12,659)     |
| Total Unrestricted Net Assets                | \$ 8,254,035        | \$ 8,455,607        | \$ (201,572) |
|  | ψ 0,231,033         |                     | y (201,372)  |
| Temporarily Restricted                       | 35                  |                     | -            |
| Permanently Restricted                       | 4                   |                     |              |
| Total Net Assets                             | \$ 8,254,035        | \$ 8,455,607        | \$ (201,572) |
| Total Liabilities & Net Assets               | \$ 20,576,482       | \$ 20,532,970       | \$ 43,513    |

## UARSC Net Asset Summary Detail March 31, 2014

| Unrestricted Net Assets                | 3  | Balance<br>3/31/2014 | 1   | Balance<br>2/31/2013 | - 1 | Quarter<br>ncrease/<br>Decrease) |
|--|----|----------------------|-----|----------------------|-----|----------------------------------|
| <b>Operating Reserves</b>              |    |                      |     |                      |     |                                  |
| Audit Disallowance                     | \$ | 350,000              | \$  | 350,000              | \$  | -                                |
| <b>Commercial Operations</b>           |    | 200,000              |     | 200,000              |     | -                                |
| Working Capital                        |    | 13,065               |     | 15,895               |     | (2,830)                          |
| Capital Development                    |    | 332,417              | 0 1 | 332,417              |     | (0)                              |
| <b>Total Operating Reserves</b>        | \$ | 895,482              | \$  | 898,312              | \$  | (2,830)                          |
| <b>Designated Programs</b>             |    |                      |     |                      |     |                                  |
| Inventories-Food Service               |    | -                    |     | -                    |     | -                                |
| Other DesignatedPrograms               |    | 478,301              |     | 565,392              |     | (87,091)                         |
| <b>Total Designated Programs</b>       | \$ | 478,301              | \$  | 565,392              | \$  | (87,091)                         |
| <b>Campus Programs</b>                 |    | 1,401,073            |     | 1,465,460            |     | (64,387)                         |
| CCF Bldg & Fixtures                    |    | 5,284,158            |     | 5,375,199            |     | (91,041)                         |
| Equipment                              |    | 185,301              |     | 197,960              |     | (12,659)                         |
| <b>Current Year Net Asset Activity</b> |    | 9,719                |     | (46,717)             |     | 56,436                           |
| <b>Total Other Net Assets</b>          | \$ | 6,880,252            | \$  | 6,991,903            | \$  | (111,650)                        |
|  |    |                      |     |                      |     |                                  |
| TOTAL UNRESTRICTED NET ASSETS          | \$ | 8,254,035            | \$  | 8,455,607            | \$  | (201,571)                        |

UARSC
Program Revenue Activity Summary
7/1/13 to 3/31/14

|                               |              |   |                  |            |   |              |                 |       |         | Comparison o |           | or FYTD Actual | ual to    |         |
|-------------------------------|--------------|---|------------------|------------|---|--------------|-----------------|-------|---------|--------------|-----------|----------------|-----------|---------|
|                               | Annual       |   | Quarter 3        |            |   |              | scal Year To Da | te    |         |              | Prior     | Current        |           | %       |
|                               | Budget       | 1   | 1/1/14 - 3/31/14 |            |   | 7            | //1/13 - 3/31/1 | 4     |         |              | FYTD      | FYTD           |           | Inc.    |
| Program Activity              | FY 13/14     | Budget  | Actual           | Variance   |   | Budget       | Actual          | Varia | nce     | 3            | 3/31/2013 | 3/             | 31/2014   | (Dec.)  |
|                               |              |   |                  |            |   |              |                 |       |         |              |           |                |           |         |
| Grants/Contracts              |              |   |                  |            |   |              |                 |       |         | 1.5          |           |                |           | Part of |
| Federal                       | \$ 6,034,000 | \$ 1,508,500  | \$ 1,951,685     | \$ 443,185 | 5 | 4,525,500    | \$ 4,878,553    | \$ 35 | 53,053  | \$           | 4,537,598 | \$             | 4,878,553 | 8%      |
| State/Private/Other           | 1,130,000    | 282,500   | 247,901          | (34,599)   |   | 847,500      | 714,014         | (13   | 33,486) |              | 1,058,391 |                | 714,014   | -33%    |
| Total Grants/Contracts        | \$ 7,164,000 | \$ 1,791,000  | \$ 2,199,585     | \$ 408,585 | 5 | \$ 5,373,000 | \$ 5,592,566    | \$ 21 | 19,566  | \$           | 5,595,989 | \$             | 5,592,566 | 0%      |
|                               |              | Co. (Salara Salara |                  |            |   |              |                 |       |         |              |           |                |           |         |
| Campus/Designated Programs    | \$ 2,415,000 | \$ 603,750  | \$ 902,018       | \$ 298,268 | 1 | 1,811,250    | \$ 1,815,425    | \$    | 4,175   | \$           | 2,667,796 | \$             | 1,815,425 | -32%    |
|                               |              |   |                  |            |   |              |                 |       |         |              |           |                |           | 7.4     |
| <b>Total Program Revenues</b> | \$ 9,579,000 | \$ 2,394,750  | \$ 3,101,603     | \$ 706,853 | 1 | 5 7,184,250  | \$ 7,407,991    | \$ 22 | 23,741  | \$           | 8,263,785 | \$             | 7,407,991 | -10%    |

UARSC Net Operating Revenue Summary 7/1/13 to 3/31/14

|  |    |                  |    |            |                  |                       |    |                 |    |                  |              |                   |                 |               |         | Curre            | nt FY    | TD Actual         |           |
|--|----|------------------|----|------------|------------------|-----------------------|----|-----------------|----|------------------|--------------|-------------------|-----------------|---------------|---------|------------------|----------|-------------------|-----------|
|  |    | Annual           |    |            |                  | Quarter 3             |    |                 |    |                  | Fisca        | l Year To Da      | te              |               |         | Prior            |          | Current           | %         |
|  |    | Budget           |    |            | 1/1/14 - 3/31/14 |                       |    |                 |    | 7/1              | /13 - 3/31/1 | 4                 |                 | 12.5          | FYTD    |                  | FYTD     | Inc.              |           |
| Revenue  |    | FY 13/14         |    | Budget     | Actual           |                       | 1  | Variance        |    | Budget Act       |              | Actual            | Actual Variance |               | 3/31/13 |                  | 03/31/14 |                   | (Dec.)    |
| Grant/Contract Admin Fees<br>Less: Unallowance Reserve | \$ | 1,160,000        | 07 | 290,000    | \$               | 347,765               | \$ | 57,765          | \$ | 870,000          | \$           | 889,796<br>-      | \$              | 19,796        | \$      | 856,402          | \$       | 889,796           | 4%<br>0%  |
| Less: University Sharing                               |    | (402,000)        |    | (100,500)  |                  | (100,500)             |    | -               |    | (301,500)        |              | (301,500)         |                 | -             |         | (449,923)        |          | (301,500)         | -33%      |
| Net Grant/Contract Admin Fees                          | \$ | 758,000          |    | 189,500    | \$               | 247,265               | \$ | 57,765          | \$ | 568,500          | \$           | 588,296           | \$              | 19,796        | \$      | 406,479          | \$       | 588,296           | 45%       |
| Admin Fees - Campus Programs                           |    | 120,000          |    | 30,000     |                  | 38,878                |    | 8,878           |    | 90,000           |              | 114,985           |                 | 24,985        |         | 212,968          |          | 114,985           | -46%      |
| Business Service Revenue                               |    | 150,000          | -  | 37,500     |                  | 37,500                |    | -               |    | 112,500          |              | 112,500           |                 |               |         | 59,464           |          | 112,500           | 89%       |
| Bookstore Net Revenue                                  |    | 409,000          |    | 163,600    |                  | 134,551               |    | (29,049)        |    | 368,100          |              | 340,197           |                 | (27,903)      |         | 350,444          |          | 340,197           | -3%       |
| Food Service - Net Oper Revenue/Commissions            |    | (39,000)         |    | (9,750)    |                  | (7,900)               |    | 1,850           |    | (29,250)         |              | (24,437)          |                 | 4,813         |         | (109,935)        |          | (24,437)          | -78%      |
| Food Service - Net Contract Revenue Investment Income  |    | 80,000<br>41,000 |    | 20,000     |                  | 63,592<br>19,052      |    | 43,592<br>8,802 |    | 60,000<br>30,750 |              | 119,814<br>31,054 |                 | 59,814<br>304 |         | 67,612<br>32,365 |          | 119,814<br>31,054 | 0%<br>-4% |
|  |    |                  | Ш  |            |                  | Andrew & Constitution |    | 1,000           |    |                  |              |                   |                 | 246000000     |         |                  |          |                   | STORE ST  |
| Leases/Mgmt Fees/Support                               |    | 48,000           |    | 12,000     |                  | 22,839                |    | 10,839          |    | 36,000           |              | 43,686            |                 | 7,686         |         | 38,682           |          | 43,686            | 13%       |
| Total Revenue  | \$ | 1,567,000        |    | \$ 453,100 | \$               | 555,777               | \$ | 102,677         | \$ | 1,236,600        | \$           | 1,326,095         | \$              | 89,495        | \$      | 1,058,079        | \$       | 1,326,095         | 25%       |
| Expenses: UARSC Operations                             | \$ | 1,546,000        |    | \$ 386,500 | \$               | 499,343               | \$ | (112,843)       | \$ | 1,159,500        | \$           | 1,316,376         | \$              | (156,876)     | \$      | 1,324,147        | \$       | 1,316,376         | -1%       |
| Net Operating Revenues                                 | \$ | 21,000           |    | \$ 66,600  | \$               | 56,434                | \$ | (10,166)        | \$ | 77,100           | \$           | 9,719             | \$              | (67,381)      | \$      | (266,068)        | \$       | 9,719             | -104%     |

Comparison of Prior FYTD Actual to

## **ATTACHMENT C**

Form 990 Tax Return FY 12/13 Ratification

#### EXTENDED UNTIL MAY 15, 2014

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

Department of the Treasury Internal Revenue Service

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

| A             | For the               | $_2$ 2012 calendar year, or tax year beginning $$ JUL $$ $$ $$ 1 $$ , $$ $$ $$ $$ 2 $$ 0 $$ 1 $$ $$ and ending | JUN 30, 2013                  |                               |
|---------------|-----------------------|--|-------------------------------|-------------------------------|
| В             | Check if applicable   | C Name of organization   | D Employer identific          | cation number                 |
|               | applicab              | " UNIVERSITY AUXILIARY AND RESEARCH  |                               |                               |
|               | Addre<br>chang        | SERVICES CORPORATION   |                               |                               |
|               | Name                  | Doing Business As  | 33-0                          | 397688                        |
| Ī             | Initial<br>return     |  | ite E Telephone numbe         | <del></del>                   |
|               | Terminated            | 435 E. CARMEL STREET   |                               | 750-4700                      |
|               | Amen                  | City, town, or post onice, state, and ZIP code   | G Gross receipts \$           | 9,757,240.                    |
| _             | Application<br>pendic | BAN MARCOS, CA 920/6   | H(a) Is this a group re       |                               |
|               | ponda                 | F Name and address of principal officer:DURA KNOBLOCK  | for affiliates?               | Yes X No                      |
|               |                       | SAME AS C ABOVE  | H(b) Are all affiliates inc   | luded? Yes No                 |
|               |                       | 7 // -/  | 527 If "No," attach a         | list. (see instructions)      |
|               |                       | te: ► WWW.CSUSM.EDU/UARSC  | H(c) Group exemptio           |                               |
| <u>K</u>      | Form of               |  | ear of formation: 1990 N      | 🖊 State of legal domicile: CA |
| P             | art I                 | Summary  |                               |                               |
| ø             | 1                     | Briefly describe the organization's mission or most significant activities: ${f TO}$ ${f PROVI}$               | DE FINANCIAL                  | AND PROGRAM                   |
| Governance    |                       | ADMINISTRATIVE SUPPORT TO CALIFORNIA STATE U   | NIVERSITY SAN                 | MARCOS.                       |
| ii.           | 2                     | Check this box 🕨 📖 if the organization discontinued its operations or disposed of m                            | nore than 25% of its net as   |                               |
| ŏ             | 3                     | Number of voting members of the governing body (Part VI, line 1a)  | 3                             | 1.3                           |
| ত             | 4                     | Number of independent voting members of the governing body (Part Vi, line 1b)                                  | 4                             | 8                             |
| es            |                       | Total number of individuals employed in calendar year 2012 (Part V, line 2a)                                   |                               | 689                           |
| VI.           |                       | Total number of volunteers (estimate if necessary)   |                               | 114                           |
| Activities &  | 7 a                   | Total unrelated business revenue from Part Vill, column (C), line 12   |                               | 0.                            |
| 4             | 1                     | Net unrelated business taxable income from Form 990-T, line 34   |                               | 0.                            |
|               |                       |  | Prior Year                    | Current Year                  |
| a)            | 8                     | Contributions and grants (Part VIII, line 1h)  | 7,789,329.                    | 7,527,060.                    |
| Revenue       | 9                     | Program service revenue (Part VIII, line 2g)   | 3,332,302.                    | 1,526,200.                    |
| eve           | 10                    | Investment income (Part VIII, column (A), lines 3, 4, and 7d)  | 37,344.                       | 47,360.                       |
| ď             | 11                    | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)                                       | 1,258,750.                    | 515,643.                      |
|               |                       | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)                             | 12,417,725.                   | 9,616,263.                    |
|               |                       | Grants and similar amounts paid (Part IX, column (A), lines 1-3)   | 48,627.                       | 94,662.                       |
|               |                       | Benefits paid to or for members (Part IX, column (A), line 4)  | 0.                            | 0.                            |
| Ø             | 1                     | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)                              | 6,427,933.                    | 6,351,516.                    |
| 13e           | 16a                   | Professional fundraising fees (Part IX, column (A), line 11e)  | 0.                            | 0.                            |
| Expenses      | Ь                     | Total fundraising expenses (Part IX, column (D), line 25)  |                               |                               |
| ŭ             | 17                    | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)   | 6,414,108.                    | 4,020,152.                    |
|               |                       | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)                                      | 12,890,668.                   | 10,466,330.                   |
|               |                       | Revenue less expenses. Subtract line 18 from line 12   | -472,943.                     | -850,067.                     |
| Net Assets or | 1                     |  | Beginning of Current Year     | End of Year                   |
| ets           | 20                    | Total assets (Part X, line 16)   | 22,137,260.                   | 19,374,852.                   |
| ASS<br>88     | 21                    | Total liabilities (Part X, line 26)  | 12,015,285.                   | 11,004,132.                   |
| i set         | 22                    | Net assets or fund balances. Subtract line 21 from line 20   | 10,121,975.                   | 8,370,720.                    |
| P             | art II                | Signature Block  | 20/222/5/00                   | 0,0,0,,100                    |
| 1             |                       | Ities of perjury, I declare that I have examined this return, including accompanying schedules and sta         | tements, and to the best of m | v knowledge and belief, it is |
|               |                       | t, and complete. Declaration of preparer (other than officer) is based on all information of which prep        |                               | , momoge and belief, is to    |
|               | ,                     |  |                               |                               |
| Sig           | n                     | Signature of officer   | Date                          |                               |
| He            |                       | GREG SVATORA, CFO  |                               |                               |
|               | ·                     | Type or print name and title   |                               |                               |
|               |                       | Print/Type preparer's name Preparer's signature  | Date Check                    | PTIN                          |
| Pai           | d I                   | Print/Type preparer's name  CHRISTOPHER M. PEKULA  Preparer's signature  CLtoph ~ CLL                          | 05/01/14 il sell-employe      | P00734965                     |
|               | parer                 | Firm's name MCGLADREY LLP  | Firm's EIN                    | 42-0714325                    |
|               | ` ;                   | Firm's address 515 S. FLOWER STREET, 41ST FLOOR  | THE JULY                      |                               |
|               | - 1                   | LOS ANGELES, CA 90071  | Phone no 2                    | 13-330-4800                   |
| Ma            | v the IF              | S discuss this return with the preparer shown above? (see instructions)  | 1, 1000 10.                   | X Yes No                      |
|               |                       |  |                               |                               |

| Pa | rt III Statement of Program Service Accomplishments  |
|----|--|
|    | Check if Schedule O contains a response to any question in this Part III   |
| 1  | Briefly describe the organization's mission:   |
|    | SEE SCHEDULE O   |
|    |  |
|    |  |
|    | Did the organization undertake any significant program services during the year which were not listed on   |
| 2  |  |
|    | the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.  |
| 3  | Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No  |
| J  | If "Yes," describe these changes on Schedule O.  |
| 4  | Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.                             |
| '  | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and                     |
|    | revenue, if any, for each program service reported.  |
| 4a | (Code: ) (Expenses \$ 891,141. including grants of \$ ) (Revenue \$ )  |
|    | OPERATION OF THE CAMPUS FOOD SERVICE AND BOOKSTORE ACTIVITIES FOR THE  |
|    | STUDENTS, FACULTY, AND STAFF OF CALIFORNIA STATE UNIVERSITY SAN MARCOS.  |
|    |  |
|    |  |
|    |  |
|    |  |
|    |  |
|    |  |
|    |  |
|    |  |
|    |  |
|    | 1 217 848 04 662 1 526 200   |
| 4b | (Code: ) (Expenses \$ 1,217,848. Including grants of \$ 94,662.) (Revenue \$ 1,526,200.) PROVIDE FINANCIAL AND ADMINISTRATIVE SUPPORT SERVICES TO VARIOUS CAMPUS |
|    | PROGRAMS AND ACTIVITIES INCLUDING THE PHILIANTHROPIC FOUNDATION,   |
|    | STUDENT HOUSING, AND ASSOCIATED STUDENTS ORGANIZATIONS. OTHER CAMPUS   |
|    | PROGAMS FOR WHICH SERVICES WERE PROVIDED INCLUDE THE CALIFORNIA INDIAN   |
|    | CULTURAL AND SOVEREIGNTY CENTER , INSTITUTE FOR PALLIATIVE CARE,   |
|    | FACULTY RESEARCH DEVELOPMENT, AND VARIOUS COMMUNITY OUTREACH PROGRAMS.   |
|    |  |
|    |  |
|    |  |
|    |  |
|    |  |
|    |  |
| 4c | (Code:) (Expenses \$ 6,545,213. including grants of \$) (Revenue \$)   |
|    | ADMINISTRATION OF RESEARCH AND TRAINING GRANTS AWARDED TO THE CAMPUS   |
|    | FACULTY FROM VARIOUS FEDERAL, STATE, AND OTHER GOVERNMENTAL AGENCIES   |
|    | AND PRIVATE FOUNDATIONS. FEDERAL GRANTS TOTALED \$6.3 MILLION WHILE  |
|    | STATE AND LOCAL GOVERNMENT AGENCY GRANTS TOTALED \$800,000. GRANTS AND AWARDS FROM PRIVATE FOUNDATIONS AND OTHER NON-GOVERNMENTAL ENTITIES                       |
|    | AWARDS FROM PRIVATE FOUNDATIONS AND OTHER NON-GOVERNMENTAL ENTITIES TOTALED \$500,000.   |
|    | 101ABED \$300,000.   |
|    |  |
|    |  |
|    |  |
|    |  |
|    |  |
| 4d | Other program services (Describe in Schedule O.)   |
|    | (Expenses \$ including grants of \$ ) (Revenue \$ )  |
| 4e | Total program service expenses ► 8,654,202.  |
|    | Form <b>990</b> (2012)   |

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#### UNIVERSITY AUXILIARY AND RESEARCH SERVICES CORPORATION

Form 990 (2012) SERVICES COR
Part IV Checklist of Required Schedules

|        |  |      |          | 1               |
|--------|--|------|----------|-----------------|
| 1      | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  |      | Yes      | No              |
| ^      | If "Yes," complete Schedule A  | 1    | X        | ļ               |
| 2      | Is the organization required to complete Schedule B, Schedule of Contributors?  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for  | 2    |          | <u></u>         |
| J      | public office? If "Yes," complete Schedule C, Part I   | 3    |          | х               |
| 4      | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect   |      |          | .,,             |
|        | during the tax year? If "Yes," complete Schedule C, Part II  | 4    |          | Х               |
| 5      | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or   | 94   |          | x               |
| 6      | similar amounts as defined in Revenue Procedure 98-197 // "Yes," complete Schedule C, Part //  | 5    |          | Δ.              |
| 6      | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6    |          | х               |
| 7      | Did the organization receive or hold a conservation easement, including easements to preserve open space,  |      |          | <del></del>     |
| •      | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II   | 7    |          | Х               |
| 8      | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete   |      |          | <b></b>         |
|        | Schedule D, Part III   | 8    |          | Х               |
| 9      | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for  |      |          |                 |
|        | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?  |      |          |                 |
|        | If "Yes," complete Schedule D, Part IV   | 9    |          | X               |
| 10     | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent  |      |          | Ψ,              |
| 4.4    | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V   | 10   |          | X               |
| 11     | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.  |      |          |                 |
| а      | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,  |      |          |                 |
| -      | Part VI  | 11a  | Х        |                 |
| b      | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total  |      |          |                 |
|        | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  | 11b  |          | X               |
| C      | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total   |      |          |                 |
|        | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII   | 11c  |          | X               |
| d      | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in   |      |          | 1,7             |
|        | Part X, line 16? If "Yes," complete Schedule D, Part IX  | 11d  | Х        | X               |
| e<br>f | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  | 11e  | -21      |                 |
| 1      | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X   | 11f  | х        |                 |
| 12a    | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete  |      |          | <b>-</b>        |
| ,      | Schedule D, Parts XI and XII   | 12a  | Х        |                 |
| b      | Was the organization included in consolidated, independent audited financial statements for the tax year?  |      |          |                 |
|        | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  | 12b  | Х        |                 |
| 13     | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  | 13   | <u> </u> | X               |
|        | Did the organization maintain an office, employees, or agents outside of the United States?  | 14a  |          | Х               |
| d      | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,  |      |          |                 |
|        | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV  | 14b  |          | Х               |
| 15     | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization  | 1710 |          | <del>  **</del> |
|        | or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV  | 15   |          | Х               |
| 16     | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals   |      |          |                 |
|        | located outside the United States? If "Yes," complete Schedule F, Parts III and IV   | 16   |          | Х               |
| 17     | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,  |      |          |                 |
|        | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I   | 17   |          | Х               |
| 18     | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines   |      |          | v               |
| 40     | 1c and 8a? If "Yes," complete Schedule G, Part II  | 18   |          | X               |
| 19     | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III   | 19   |          | х               |
| 20a    | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  | 20a  |          | X               |
|        | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?   | 20b  |          |                 |
|        |  |      |          |                 |

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#### 33-0397688

#### UNIVERSITY AUXILIARY AND RESEARCH SERVICES CORPORATION

Form 990 (2012) SERVICES CORPORATI
Part IV Checklist of Required Schedules (continued)

| 1   |   |            | Yes                    | No       |
|-----|---|------------|------------------------|----------|
| 21  | Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the   |            |                        |          |
|     | United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II   | 21         | İ                      | X        |
| 22  | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22         | х                      |          |
| 23  | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current  |            |                        |          |
|     | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J   | 23         | х                      |          |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the   |            |                        |          |
|     | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25   | 24a        | :                      | Х        |
| b   | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?   | 24b        |                        |          |
|     | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease  |            |                        |          |
|     | any tax-exempt bonds?   | 24c        |                        |          |
| d   | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?   | 24d        |                        |          |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a  |            |                        |          |
|     | disqualified person during the year? If "Yes," complete Schedule L, Part I  | 25a        |                        | X        |
| b   | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and  |            |                        |          |
|     | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete   |            |                        | <u> </u> |
|     | Schedule L, Part I  | 25b        |                        | X        |
| 26  | Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified   |            |                        | ,,       |
|     | person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II   | 26         |                        | X        |
| 27  | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial  |            |                        |          |
|     | contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member   |            |                        | Х        |
|     | of any of these persons? If "Yes," complete Schedule L, Part III  | 27         | -                      | Α.       |
| 28  | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV   |            |                        |          |
| _   | instructions for applicable filing thresholds, conditions, and exceptions):   | 200        |                        | х        |
| a   |   | 28a<br>28b |                        | X        |
| b   | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,   | 200        | -                      |          |
| ·   |   | 28c        |                        | х        |
| 29  | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  | 29         | <b></b>                | X        |
| 30  | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation   |            |                        |          |
| 00  | contributions? If "Yes," complete Schedule M  | 30         |                        | Х        |
| 31  | Did the organization liquidate, terminate, or dissolve and cease operations?  |            |                        |          |
|     | If "Yes," complete Schedule N, Part I   | 31         |                        | Х        |
| 32  | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete  |            |                        |          |
|     | Schedule N, Part II   | 32         |                        | Х        |
| 33  | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations  |            |                        |          |
|     | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I   | 33         |                        | X        |
| 34  | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and   |            |                        |          |
|     | Part V, line 1  | 34         | X                      |          |
|     | Did the organization have a controlled entity within the meaning of section 512(b)(13)?   | 35a        |                        | Х        |
| b   | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity   | <u> </u>   |                        |          |
|     | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2   | 35b        |                        |          |
| 36  | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2                       | 36         |                        | x        |
| 37  | Did the organization conduct more than 5% of its activities through an entity that is not a related organization  |            |                        |          |
|     | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  | 37         |                        | Х        |
| 38  | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  |            |                        |          |
|     | Note. All Form 990 filers are required to complete Schedule O   | 38         | Х                      |          |
|     |   |            | $\alpha \alpha \alpha$ | (0040)   |

Form **990** (2012)

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| Ves   No   No   No   No   No   No   No   N   |    | Check if Schedule O contains a response to any question in this Part V   |                                       |   |               |              |               |
|--|----|--|---------------------------------------|---|---------------|--------------|---------------|
| tal Exercite the number reported in Box 3 of Form 1096, Enter-O-I not applicable 15 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0  |    |  | ********                              | <u> </u>                                |               | Yes          | No            |
| b Enter the number of Forms W2G Included in the 1s. Enter of Incl applicable in Co. Did the organization concept with backup, withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2s. Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, lead for the calculation of the Committee of        | 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   | 1a                                    | 239                                     |               | ,,,,,        |               |
| c Did the organization comply with backup withholding use for reportable payments to vendors and reportable gamining (gamiling) withings to prize withmers?  2a Exter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements.  3a Exter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements.  3b If at least one is reported on line 2a, did the organization file all firequired federal employment tax returns?  3b If the canadization have unrelated business gross income of \$1 bill one of the sea instructions?  3c If the veginization have unrelated business gross income of \$1 bill of the organization file \$2 bill one or the without the veginization file or the sea interest in or a signature or other authority over, a financial account is a foreign country (such as a bank account, securities account, or other financial account)?  4c If "Yes," in a fire the name of the foreign country.  5c If "Yes," the the same of the foreign country (such as a bank account, securities account, or other financial accounts?  5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax wheter transaction?  5c If "Yes," to line 5a or 5b, did the organization file Form 8885-17  5d Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any orbifity that were not tax deductible as charitable contributions?  5c If "Yes," to line 5a or 5b, did the organization file Form 8885-17  5d If "Yes," to line 5a or 5b, did the organization file Form 8885-17  5d If "Yes," to line 5a or 5b, did the organization file Form 8885-17  5d If "Yes," to line the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any any oblifity that are promably greater than \$100,000, and did the organization solicit and any observation and party for goods and saviles provided to the payor?  5d If "Yes," the first property of the property for which it was re | b  |  |                                       | 0                                       |               |              |               |
| gambling) winnings to prize winners?  a Enter the number of employees exported 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  filed for the calendar year ending with or within the year covered by this return  which is the east one is reported on line 2a, did the organization life all required federal employment tax returns?  Note, if the sum of lines 1 and and 2 is greater than 250, you may be required to e-flex (see Instructions)  by If Yea, 1 and 3 till dea Form 950-71 for this year? If 1/%, *provide an explanation is proved on the authority over, a financial account is a foreign country (such as a bank account, securities account, or other financial account)?  4a Alany time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account is a foreign country (such as a bank account, securities account, or other financial accounts?  5b If Yes, 1 and 1         |    |  | eporta                                | ble gaming                              |               |              |               |
| 2a Enter the number of employees reported on From W.S. Transmittal of Wage and Tax Statements, 2a 6.89 b 1 feature fleed for the caendrad year anding with or within the year covered by this return fleed for the caendrad year anding with or within the year covered by this return.  b 14 least one is reported on line 2a, did the organization file all required federal employment ax returns?  Note: If the sum of lines 1 and 26 is greater in an 250, you may be required to effect a employment ax returns?  Note: If the sum of lines 1 and 26 is greater in an 250, you may be required to effect of the comparison of the comparis       |    |  |                                       |   | 1c            | Х            |               |
| file for the calendary year ending with or within the year covered by this return.      1  | 2a |  | 1                                     | ·                                       |               |              |               |
| b It a least one is reported on line 2a, did the organization file all required feeral employment tax returns?  Note. If the sum of lines 1 and 2a is greater than 250, you may be required to 4-reflig (see Instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a X  X  3b If Yes, 'has it filed a Form 950-T for this year' if 'No', 'provide an explanation in Schedube O  4a At any time during the celerady year, did the organization have an inderest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  4a At any time the relame of the foreign country   Such as a bank account, securities account, or other financial account.  5b If Yes, 'to life the relame of the foreign country   Such as a bank account, securities account, or other financial accounts.  5c Using a was the file of the organization will be a schedule on the file of the design of the country.  5c Was the organization have the foreign country   Such as a bank account, securities account, or other financial accounts.  5c Using a was a such a such as a such as a bank account, securities account, or other financial accounts?  5c Was the organization self exclusion of the such self-time during the tax year?  5c Was the organization self-time foreign country (such as a bank account, security).  5c If Yes, 'to line Sa of 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c Was the organization in control to the organization will be such self-time and shelf-time during the tax year?  5c Was the organization in control the organization in file form 8890 and services provided to the payor?  5c Was the organization in control or of the value of the goods or services provided?  7c Variant organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7d Was the organization make any taxable during the year pay premiums o       |    | · · · · · · · · · · · · · · · · · · ·  | 2a                                    | 689                                     |               |              |               |
| Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3  | b  |  | rns?                                  |   | 2b            | Х            |               |
| b If "Yes," has it filed a Form 990-T for this year? If "Wo," provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a  5 if "Yes," enter the name of the foreign country:  5 See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial account?  5 See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Account?  5 See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Account?  5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5 Did by the state of 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 chariable contributions?  6 Did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that may receive deductible contributions?  6 Did the organization that may receive deductible contributions of the state of the goods or services provided?  7 Organizations that may receive deductible contributions under section 170(e).  8 If "Yes," did the organization neceive apyment in axcess of \$15 made party as a contribution and party for goods and services provided to the payon.  7 Organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to tile Form 8282?  7 Organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to tile Form 8282?  8 Did the organization received a contribution of qualified intellectual property.  9 D    |    |  |                                       |   |               |              |               |
| 4a A any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, content financial account)?  See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts.  8 Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5 If "Yes," to line 5 aor 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5 If "Yes," to line 5 aor 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5 If "Yes," to line 5 aor 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5 If "Yes," to line 5 aor 5b, did the organization file Form 8866-17  6 Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(b).  8 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  9 Organizations that may receive deductible contributions under section 170(b).  10 Id the organization receive apayment in axxess of \$75 made partly as a contribution of promote property for which it was required to file Form 82822 filed during the year plant of the organization receive any funds, directly or indirectly, to paymeniums on a personal benefit contract?  7 The plant of the organization receive any funds, directly or indirectly, to paymeniums on a personal benefit contract?  7 The plant of the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7 The plant of the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7 The plant of the organization, during the year, pay premiums, directly or indirectly,        | За | Did the organization have unrelated business gross income of \$1,000 or more during the year?  |                                       |   | За            |              | X             |
| the fire the name of the foreign country   №    b   11 "Yes," enter the name of the foreign country: ▶   №    See instructions for filing requirements for Form TD F 99.22.1, Report of Foreign Bank and Financial Accounts.  5a   Was the organization a party to a prohibited tax shetter transaction at any time during the tax year?  5b   Did any taxable party notify the organization that it was or is a party to a prohibited tax shetter transaction?  5b   X  | b  | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O   |                                       |   | 3b            |              |               |
| b If "Yes," enter the name of the foreign country:     See instructions for filling requirements for Form TD F 99.22.1, Report of Foreign Bank and Financial Accounts.   See instructions for filling requirements for Form TD F 99.22.1, Report of Foreign Bank and Financial Accounts.   See instructions for filling requirements for Form TD F 99.22.1, Report of Foreign Bank and Financial Accounts.   See instructions for filling requirements for Form TD F 99.22.1, Report of Foreign Bank and Financial Accounts.   See instructions for filling requirements for Form TD F 99.22.1, Report of Foreign Bank and Financial Accounts.   See instructions for the work of the proparization file Form B868.7   See     See         | 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other  | author                                | rity over, a                            |               |              |               |
| See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts.  4 Was the organization a party to a prohibited tax shetter transaction?  5 X X Did any taxable party notify the organization that it was or is a party to a prohibited tax shetter transaction?  5 Did any taxable party notify the organization file Form 8886-17  6 Does the organization for any 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?  5 If "Yes," did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 If "Yes," did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 If "Yes," did the organization include with every solicitation and party for goods and services provided to the payor?  7 Organization seeke a payment in excess of \$75 made partly as a contribution and party for goods and services provided to the payor?  8 If "Yes," indicate the organization notify the donor of the value of the goods or services provided?  9 Did the organization seek, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  1 If "Yes," indicate the number of Forms 8282 filed during the year  1 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  9 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  1 If the organization making during the year personal payment in expending organization file form payment in the payment property of the payment property of the payment property of the      |    | financial account in a foreign country (such as a bank account, securities account, or other financial   | accou                                 | nt)?                                    | 4a            |              | X             |
| 5a X x be organization a party to a prohibited tax shelter 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?  5b X (If Yes;* to line 5a or 5b, did the organization file Form 88661??  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?  6b If Yes;* did the organization include with every solicitation an express statement that such contributions or gitts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  7 Organization state may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  7 Organization state and exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8262?  10 If the organization receive any funds, directly, or pay premiums on a personal benefit contract?  10 Did the organization received any funds, directly, or langified personal property for which it was required?  11 Did the organization received any funds, directly or indirectly, on a personal benefit contract?  12 Did the organization received any funds, directly or indirectly, on a personal benefit contract?  13 Did the organization received a contribution of qualified intellectual property, did the organization file Form 1998-07  75 Separating organizations maintaining donor advised funds.  15 Did the organization make any taxable distributions under section 4966?  16 Did the organization make any taxable distributions under section 4966?  17 Did Gross receipts, included on Form 990. Part VIII, line 12 Did     | b  | If "Yes," enter the name of the foreign country: ►   |                                       |   |               |              |               |
| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  6b X  6i 1"Yes," to line Sa or 5b, did the organization the Form 8889-17  5c 2  5c 3  5c 4  5c 4  5c 5  5c 5  5c 5  5c 5  5c 6  5c 7  5c 6  5c 7  5c 8  5c 9  5c       |    | The state of the s |                                       |   |               |              |               |
| ti "Yes," to line 5a or 5b, did the organization file Form 8886-7?  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?  6 b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 a Did the organization neckee a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  8 If "Yes," did the organization neckee a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  9 If "Yes," did the organization neckee a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  10 If "Yes," did the organization neckee a payment in excess of \$75 made partly as a contribution and partly for goods and services provided?  10 Did the organization neckee and partly the donor of the value of the goods or services provided?  11 To I To  | 5a |  |                                       |   | 5a            |              |               |
| be 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?  by If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a) Did the organization nective a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  b) If "Yes," did the organization notify the donor of the value of the goods or services provided?  c) Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d) If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 X  f) Did the organization received a contribution of qualified intellectual property, did the organization in file Form 8899 as required?  g) If the organization received a contribution of qualified intellectual property, did the organizations. Bid the supporting organizations maintaining donor advised funds and section 509(s)(3) supporting organizations. Bid the supporting organization and any taxable distributions under section 4966?  Soponsoring organization make any taxable distributions under section 4966?  9a  Did the organization make a distribution to a donor, donor advisor, or related person?  9b  10c Section 501(s)(7) organizations. Enter:  a) Initiation fees and capital contributions included on Part VIII, line 12  a) Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a  Section 501(s)(2) qualified nonprofit health insurance issuers.  a) Is the organization incloses to issue qualified health plans in more than one state?  Note. See the instruc     | b  |  |                                       |   | 5b            |              | X             |
| b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(p).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly to goods and services provided to the payor?  7 b if "Yes," did the organization notify the donor of the value of the goods or services provided?  5 b if "Yes," did the organization notify the donor of the value of the goods or services provided?  5 b if "Yes," indicate the number of Forms 8292 filed during the year  6 b if e Form 8282?  7 c X  7 d if "Yes," indicate the number of Forms 8292 filed during the year  6 b if the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 c X  9 if the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-07  8 your stream of the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-07  8 your stream of granizations maintaining donor advised funds and section 509(a)3 supporting organizations. Did the supporting organization maintaining donor advised funds and section 509(a)3 supporting organizations. Did the supporting organization make any taxable distributions under section 966?  9 b Did the organization make any taxable distribution of cars of the supporting organizations. Did the supporting organization make any taxable distribution of an organization, have excess business holdings at any time during the year?  9 sponsoring organization make any taxable distributions under section 966?  9 b Did the organization make any taxable distribution or during the year supporting organizations. Did the propanization is provided on Part VIII, line 12  6 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  6 Gross income from members or shareholders  6 Gross      | C  | If "Yes," to line 5a or 5b, did the organization file Form 8886-T?   |                                       |   | 5c            |              |               |
| b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  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?  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  c 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?  7b Job Control of the value of the goods or services provided?  7c X X  d If "Yes," indicate the number of Forms 8282 filed during the year  7c Did the organization for forms 8282 filed during the year  7c Did the organization, during the year, pay premiums, directly, or pay premiums on a personal benefit contract?  7c X  1 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7r X      | 6a |  |                                       |   |               |              |               |
| were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c). a Did the organization series a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  5 If "Yes," idid the organization notify the donor of the value of the goods or services provided?  6 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8252?  7 If "Yes," indicate the number of Forms 8252 filed during the year  8 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  9 Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  1 Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  10 Did the organization make any taxable distributions under section 4966?  9 Section 501(c)(7) organizations. Enter:  10 Initiation fees and capital contributions included on Part VIII, line 12  10 Gross income from members or shareholders  11 Did Section 501(c)(7) organizations. Enter:  12 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12 Section 501(c)(2) organizations. Enter:  13 Fif "Yes," enter the amount of fax-exempt interest received or accrued during the year  12 Did the organization included to issue qualified health plans in more than one state?  13 Note. See the instructions for additional information the organization must report on Schedule O.  14 Enter the amount of ferserves the organization in       |    |  |                                       |   | <u>6a</u>     | <b> </b>     | <u>X</u>      |
| 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? 7 b If "Yes," idd the organization notify the donor of the value of the goods or services provided?  C Did the organization sell, exchange, or otherwise dispose of tanglible personal property for which it was required to file Form 8282?  A If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 t Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 t If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-0?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-0?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?  Did the organization make any taxable distributions under section 4966?  Did the organization make any taxable distributions under section 4966?  Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12  Section 501(c)(7) organizations. Enter:  Gross income from members or shareholders  B Section 501(c)(7) organizations. Enter:  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  Section 501(c)(7) organizations. Enter:  Section 501(c)(7) organizations. Enter:  B Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If Yes, "enter the amount of feserves the organization in required to maintain b      | b  |  |                                       | _                                       |               |              |               |
| 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?  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 required to file Form 8282?  d if "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization, during the year, pay premiums, directly, to pay premiums on a personal benefit contract?  7c  | _  |  |                                       | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,     | 6b            |              |               |
| 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 required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c  |    | - ,,,  |                                       |   |               |              | v             |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c   |    |  |                                       |   |               |              |               |
| to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7th X X 1 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7th X X 1 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  7th X X 1 If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  9a b Did the organization make any taxable distributions under section 4966?  9b b Did the organization make any taxable distributions or advise, or related person?  9c Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, fine 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  |    |  |                                       |   | /b            | <del> </del> |               |
| d if "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7 IX  X JUI 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 1098-C7  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, are donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 49667.  b Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  11a  B Gross income from members or shareholders  b Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts, is the organization filing Form 990 in lieu of Form 1041?  12a  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13b  If "Yes," 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 in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves on hand  13b  C Enter the a       | Ç  |  |                                       |   | 70            |              | v             |
| e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C7  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  D Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts, is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  12b  | 4  |  | 1                                     |   | /C            |              |               |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  9 b D D D D D D D D D D D D D D D D D D   |    |  | <del></del>                           | 1<br>>†2                                | 70            |              | x             |
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| a Gross income from members or shareholders  | a  | Initiation fees and capital contributions included on Part VIII, line 12   | 10a                                   |   |               |              |               |
| a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b c Enter the amount of reserves on hand 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 in Schedule O 14b   | b  | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  | 10b                                   |   |               |              |               |
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| 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. 13a 1s the organization licensed to issue qualified health plans in more than one state? 13a 15a 16a 17a 18a 18a 18a 18a 18a 18a 18a 18a 18a 18  |    |  |                                       |   | ļ             | . 1          |               |
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| a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  c Enter the amount of reserves on hand  13c  14a X  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  14b  |    | - · · · · · · · · · · · · · · · · · · ·  | 12b                                   |   |               |              | ĺ             |
| Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13c  14a X  b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  14b   |    | •  |                                       |   | <del></del> - |              |               |
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| c Enter the amount of reserves on hand   |    | - ,  | ایما                                  |   |               | .            | į             |
| 14a     Did the organization receive any payments for indoor tanning services during the tax year?     14a     X       b     If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O     14b     14b   |    |  |                                       |   |               | ,            | ĺ             |
| b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  |    | Diddin assessination seed to accommodate the contract of the c |                                       |   | 1/2           |              | ×             |
|  |    |  |                                       |   |               |              |               |
|  |    |  | · · · · · · · · · · · · · · · · · · · |   |               | 990          | (2012)        |

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Form 990 (2012) SERVICES CORPORATION 33-0397688 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

|          | Check if Schedule O contains a response to any question in this Part VI   |         |      | X            |
|----------|---|---------|------|--------------|
| Sec      | tion A. Governing Body and Management   |         |      | ************ |
|          |   |         | Yes  | No           |
| 1a       | Enter the number of voting members of the governing body at the end of the tax year 13  |         |      |              |
|          | If there are material differences in voting rights among members of the governing body, or if the governing   |         |      |              |
|          | body delegated broad authority to an executive committee or similar committee, explain in Schedule O.   |         |      |              |
| b        | Enter the number of voting members included in line 1a, above, who are independent1b  |         |      |              |
| 2        | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other  |         |      |              |
|          | officer, director, trustee, or key employee?  | 2       |      | X            |
| 3        | Did the organization delegate control over management duties customarily performed by or under the direct supervision   |         |      |              |
|          | of officers, directors, or trustees, or key employees to a management company or other person?  | 3       |      | Х            |
| 4        | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  | 4       |      | X            |
| 5        | Did the organization become aware during the year of a significant diversion of the organization's assets?  | 5       |      | Х            |
| 6        | Did the organization have members or stockholders?  | 6       |      | Х            |
| 7a       | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or  |         |      |              |
|          | more members of the governing body?   | 7a      |      | X            |
| b        | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or  |         |      |              |
|          | persons other than the governing body?  | 7b      |      | Х            |
| 8        | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:   |         |      |              |
| а        | The governing body?   | 8a      | Х    |              |
| b        | Each committee with authority to act on behalf of the governing body?   | d8      | X    |              |
| 9        | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the  |         |      |              |
|          | organization's mailing address? If "Yes," provide the names and addresses in Schedule O   | 9       |      | X            |
| Sec      | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)  |         |      |              |
|          | •   | ,       | Yes  | No           |
| 10a      | Did the organization have local chapters, branches, or affiliates?  | 10a     |      | X            |
| þ        | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,  |         |      |              |
|          | and branches to ensure their operations are consistent with the organization's exempt purposes?   | 10b     |      |              |
|          | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?   | 11a     | Х    |              |
|          | Describe in Schedule O the process, if any, used by the organization to review this Form 990.   |         |      |              |
| 12a      | Did the organization have a written conflict of interest policy? If "No," go to line 13   | 12a     | X    |              |
|          | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?   | 12b     | Х    |              |
| C        | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe  |         |      |              |
|          | in Schedule O how this was done   | 12c     | X    |              |
| 13       | Did the organization have a written whistleblower policy?   | 13      | X    |              |
| 14       | Did the organization have a written document retention and destruction policy?  | 14      | Х    |              |
| 15       | Did the process for determining compensation of the following persons include a review and approval by independent  |         |      |              |
|          | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?   |         | ,, l |              |
|          | The organization's CEO, Executive Director, or top management official  | 15a     | X    |              |
| b        | Other officers or key employees of the organization   | 15b     | Х    |              |
| 40       | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).   |         |      |              |
| 16a      | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a   |         |      | 37           |
|          | taxable entity during the year?   | 16a     |      | X            |
| b        | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation  |         |      |              |
|          | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's  |         |      |              |
| 200      | exempt status with respect to such arrangements? tion C. Disclosure   | 16b     |      |              |
|          |   |         |      |              |
| 17<br>₁Ω | List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an exceptation to make its Forms 1033 (or 1034 it applicable), 900, and 900 T (Section 501(a)/3)s and         |         | lo.  |              |
| 18       | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) for public inspection. Indicate how you made these available. Check all that apply | ıvallaD | IC   |              |
|          | for public inspection. Indicate how you made these available. Check all that apply.  X Own website Another's website X Upon request Other (explain in Schedule O)   |         |      |              |
| 10       |   | d fina- | oin! |              |
| 19       | Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, are statements available to the public during the tax year.                          | u iinan | cial |              |
| 20       | statements available to the public during the tax year.  State the name, physical address, and telephone number of the person who possesses the books and records of the organiza                                 | ion.    |      |              |
| 20       | GREG SVATORA, CHIEF FINANCIAL OFFICER - 760-750-4719  | ROM: 🗩  |      |              |
|          | 435 E. CARMEL STREET, SAN MARCOS, CA 92078  |         |      |              |
| 32006    |   |         | 000  |              |

232006 12-10-12

#### Form 990 (2012)

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

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

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

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

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

| (A) Name and Title         | (B) Average hours per week   | (do                            | not c                 | (C<br>Pos<br>heck<br>ss pe | ition        |                                 | one<br>h an | (D) Reportable compensation from       | (E) Reportable compensation from related | (F) Estimated amount of other  |
|----------------------------|--|--------------------------------|-----------------------|----------------------------|--------------|---------------------------------|-------------|--|--|--|
|                            | (list any<br>hours for<br>related<br>organizations<br>below<br>line) | Individual trustee or director | Institutional trustee | Officer                    | Кеу етріоуев | Highest compensated<br>employee | Former      | the<br>organization<br>(W-2/1099-MISC) | organizations<br>(W·2/1099·MISC)         | compensation<br>from the<br>organization<br>and related<br>organizations |
| (1) ANN BERSI              | 3.00   |                                |                       |                            |              |                                 |             | _                                      | ^  |  |
| DIRECTOR/CHAIR             | 4 60   | Х                              |                       |                            |              |                                 |             | 0.                                     | 0.                                       | 0.   |
| (2) TRES CONRIQUE          | 1.00   |                                |                       |                            |              |                                 |             |  |  | 0  |
| DIRECTOR                   | 2 - 2  | X                              |                       |                            | <u> </u>     |                                 | ļ           | 0.                                     | 0.                                       | 0.   |
| (3) EMILY CUTRER           | 0.50   |                                |                       |                            |              |                                 |             | ,                                      | _  | 0  |
| DIRECTOR                   |  | X                              |                       |                            |              |                                 |             | 0.                                     | 0.                                       | 0.   |
| (4) KEN GREEN              | 1.00   | ٠,                             |                       |                            |              |                                 |             | 0                                      | ς .                                      | ٥  |
| DIRECTOR                   | 1.00   | Х                              |                       |                            |              | -                               |             | 0.                                     | 0.                                       | 0.   |
| (5) LINDA HAWK<br>DIRECTOR | 1.00   | х                              |                       |                            |              |                                 |             | 0.                                     | 192,138.                                 | E1 00E   |
| (6) BRANDON LOSEY          | 1.00   | <u> </u>                       |                       |                            |              |                                 |             | V •                                    | 192,130.                                 | 51,005.  |
| DIRECTOR                   | 1.00   | Х                              |                       |                            |              |                                 |             | 0.                                     | 0.                                       | 0.   |
| (7) COLLEEN MOSS           | 1.00   | Λ                              | ļ                     |                            |              |                                 |             | V •                                    | V •                                      | V •  |
| DIRECTOR                   | 1.00   | Х                              |                       |                            |              |                                 |             | 0.                                     | 67,749.                                  | 11,867.  |
| (8) RUSSELL POWELL         | 1.00   |                                |                       |                            |              |                                 |             | · ·                                    | 0/,/45.                                  | 11,007.  |
| DIRECTOR                   | 1.00   | х                              |                       |                            |              |                                 |             | 0.                                     | 0.                                       | 0.   |
| (9) SUSAN SCHNEPF          | 1.00   |                                |                       |                            |              |                                 |             | <u></u>                                |  |  |
| DIRECTOR                   |  | х                              |                       |                            |              |                                 |             | 0.                                     | 0.                                       | 0.   |
| (10) CAMILLE SCHUSTER      | 1.00   |                                | Н                     |                            |              |                                 |             | •                                      |  |  |
| DIRECTOR                   | 1  | х                              |                       |                            |              |                                 |             | 0.                                     | 116,323.                                 | 28,234.  |
| (11) ERNEST ZOMALT         | 1.00   |                                |                       | -                          |              |                                 |             |  | •  |  |
| DIRECTOR/VICE CHAIR        |  | х                              |                       |                            |              |                                 |             | 0.                                     | 0.                                       | 0.   |
| (12) GRAHAM OBEREM         | 1.00   |                                |                       |                            |              |                                 |             |  |  |  |
| DIRECTOR                   |  | Х                              |                       |                            |              |                                 |             | 0.                                     | 146,326.                                 | 42,206.  |
| (13) DAVID CHANG           | 1.00   |                                |                       |                            |              |                                 |             | ************************************** |  |  |
| DIRECTOR                   |  | Х                              |                       |                            |              |                                 |             | 0.                                     | 0.                                       | 0.   |
| (14) MATTHEW J. CEPPI      | 1.00   |                                |                       |                            |              |                                 |             |  |  |  |
| DIRECTOR                   |  | X                              |                       |                            |              |                                 |             | 0.                                     | 159,078.                                 | 37,885.  |
| (15) DORA KNOBLOCK         | 40.00  |                                |                       |                            |              |                                 |             |  |  |  |
| SECRETARY                  |  |                                |                       | Х                          |              |                                 |             | 0.                                     | 125,262.                                 | 42,912.  |
| (16) GREG SVATORA          | 40.00  |                                |                       |                            |              |                                 |             |  |  |  |
| TREASURER/CFO              |  |                                |                       | Х                          |              |                                 |             | 145,351.                               | 0.                                       | 21,802.  |
| (17) GRANT HUBBARD         | 0.50   |                                |                       |                            |              |                                 |             |  | _  |  |
| DIR, SPONSORED PROGRAMS    |  |                                |                       |                            |              | Х                               |             | 101,799.                               | 0.                                       | 38,683.  |
| 232007 12-10-12            |  |                                |                       |                            |              |                                 |             |  |  | Form <b>990</b> (2012)   |

| Form 990 (2012) SERVICES  | CORPORA                    | TI          | 101   | 1  | ****                    | <i>,</i>    |                                  | ) LI II ( ) II                   | 33-039                                   | 7688                   | 3                                       | Page 8              |
|---|----------------------------|-------------|-------|--|-------------------------|-------------|----------------------------------|----------------------------------|--|------------------------|---|---------------------|
| Part VII Section A. Officers, Directors, Trus   |                            |             |       |  | d Hi                    | ghe         | st C                             | Compensated Employe              | es (continued)                           |                        |   |                     |
| (A)<br>Name and title   | (B) Average hours per week | (do<br>box, | not c | (C<br>Posi<br>heck i<br>ss pe                  | ition<br>more<br>rson i |             | one<br>h an                      | (D) Reportable compensation from | (E) Reportable compensation from related | 1                      | (F)<br>stima<br>mour<br>othe            | ited<br>it of       |
|   |                            |             |       |  |                         |             | organizations<br>(W-2/1099-MISC) | or<br>aı                         | npens<br>from t<br>ganizand rela         | sation<br>:he<br>ation |   |                     |
|   |                            |             |       |  |                         |             |                                  |                                  |  |                        |   |                     |
|   |                            |             |       |  |                         |             |                                  |                                  |  |                        |   |                     |
|   |                            |             |       |  |                         |             |                                  |                                  |  |                        |   |                     |
| :   |                            |             |       |  |                         |             |                                  |                                  |  |                        | *************************************** | <del>~~~~~~~~</del> |
|   |                            |             |       |  |                         |             |                                  |                                  |  |                        |   |                     |
|   |                            |             |       | •  |                         |             |                                  |                                  |  |                        | <del></del>                             |                     |
|   |                            |             |       |  |                         |             |                                  |                                  |  |                        |   |                     |
| 4b Cirk Abel  |                            |             |       |  |                         |             |                                  | 247,150.                         | 806,876                                  | 2                      | 7./                                     | 594.                |
| 1b Sub-total  c Total from continuation sheets to Part VI  d Total (add lines 1b and 1c)                          | i, Section A               |             |       |  |                         |             |                                  | 247,150.                         | 806,876                                  | •                      |   | 0.<br>594.          |
| Total number of individuals (including but no compensation from the organization                                  |                            |             |       |  |                         |             | no re                            | <u> </u>                         |  | •   2                  |   | 2                   |
|   |                            |             |       | •  |                         | *********** |                                  |                                  |  |                        | Yes                                     | No                  |
| 3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for so                     |                            |             |       | •  | •                       | •           |                                  | highest compensated e            |  | 3                      |   | х                   |
| For any individual listed on line 1a, is the su and related organizations greater than \$150                      |                            | e co        | mpe   | ensa   | tion                    | and         | oth                              | ner compensation from            | the organization                         | 4                      | х                                       |                     |
| 5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," comp                      |                            |             |       |  |                         |             | elate                            | ed organization or indiv         | idual for services                       | 5                      |   | Х                   |
| Section B. Independent Contractors  1 Complete this table for your five highest contractors                       | an an antad in a           | 1000        |       |  |                         |             |                                  | h at was aire at a sare 4 h a a  | #100 000 +f                              |                        | <i>t</i>                                |                     |
| <ol> <li>Complete this table for your five highest cor<br/>the organization. Report compensation for t</li> </ol> |                            |             |       |  |                         |             |                                  |                                  | ,  | nsation                | trom                                    |                     |
| (A)<br>Name and business  |                            | NC          |       |  |                         |             |                                  | (B) Description of s             |  | Comp                   | C)<br>ensati                            | ion                 |
|   |                            |             |       | <u>-                                      </u> |                         |             |                                  |                                  |  |                        |   |                     |
|   |                            |             |       |  |                         |             |                                  |                                  |  |                        |   |                     |
|   |                            |             |       |  |                         |             |                                  |                                  |  |                        |   |                     |
|   |                            |             |       |  |                         |             | $\downarrow$                     |                                  |  |                        |   |                     |
| Total number of independent contractors (in   | ncluding but no            | ot lin      | niter | i to i   | thos                    | e lis       | ted                              | above) who received m            | ore than                                 |                        |   |                     |

Form 990 (2012)

\$100,000 of compensation from the organization

Form 990 (2012) SERVICE
Part VIII Statement of Revenue SERVICES CORPORATION

| h  |      | Check if Schedule O cont                | tains a response                        | to any question | in this Part VIII                       |  |  | <b>.</b>   |
|--|------|---|---|-----------------|---|--|--|--|
|  |      |   |   |                 | (A)<br>Total revenue                    | (B) Related or exempt function revenue | <b>(C)</b><br>Unrelated<br>business<br>revenue | Revenue excluded<br>from tax under<br>sections 512,<br>513, or 514 |
| ats str  | 1 a  | Federated campaigns                     | 1a                                      |                 |   |  |  |  |
| ara<br>our   |      | Membership dues                         |   |                 |   |  |  |  |
| S,E  |      | Fundraising events                      |   |                 |   |  |  |  |
| ar.  |      | Related organizations                   |   |                 |   |  |  |  |
| S,E  | ı    | Government grants (contribut            |   | 052,616         |   |  |  |  |
| P.S.   | ı    | All other contributions, gifts, gran    | · <del></del>                           |                 |   |  |  |  |
| E E  |      | similar amounts not included abo        |   | 474,444         |   |  |  |  |
| Έδ   | ۵    | Noncash contributions included in lines |   |                 |   |  |  |  |
| Contributions, Gifts, Grants and Other Similar Amounts | h    | Total. Add lines 1a-1f                  |   |                 | 7,527,060.                              | 1                                      |  |  |
|  |      |   |   | Business Code   | 9                                       |  |  | 1  |
| ဗ္ဗ  | 2 a  | CAMPUS PROGRAMS                         | 5                                       | 900099          | 1,526,200.                              | 1,526,200.                             |  |  |
| e Z  | b    |   |   |                 |   |  |  |  |
| Program Service<br>Revenue                             | c    |   |   |                 |   |  |  |  |
| ev.  | d    | I                                       |   |                 |   |  |  |  |
| Pog  | е    |   |   |                 |   |  |  |  |
| Ω.   | f    | All other program service reve          | enue                                    |                 | .].                                     |  |  |  |
|  | g    | Total. Add lines 2a-2f                  |   |                 | 1,526,200.                              |  |  |  |
|  | 3    | Investment income (including            | dividends, inter-                       | est, and        |   |  |  |  |
|  |      | other similar amounts)                  |   |                 | 47,360.                                 |  | ·······  | 47,360.  |
|  | 4    | Income from investment of ta            | x-exempt bond p                         | proceeds        |   | ļ                                      |  |  |
|  | 5    | Royalties                               |   |                 |   |  |  |  |
|  |      |   | (i) Real                                | (ii) Personal   | _                                       |  |  |  |
|  | 6 a  | Gross rents                             | 145,680.                                |                 |   |  |  |  |
|  | þ    | Less: rental expenses                   | 94,104.                                 |                 |   |  |  |  |
|  | С    | Hental income or (loss)                 | 31,3/6.                                 |                 |   |  |  | E4 556   |
|  |      | Net rental income or (loss)             |   | <b>&gt;</b>     | 51,576.                                 |  |  | 51,576.  |
|  | 7 a  | Gross amount from sales of              | (i) Securities                          | (ii) Other      | -                                       |  |  |  |
|  |      | assets other than inventory             | *************************************** |                 |   |  |  |  |
|  | b    | Less: cost or other basis               |   |                 |   |  |  |  |
|  |      | and sales expenses                      |   |                 | -                                       |  |  |  |
|  |      | Gain or (loss)                          |   |                 | 4                                       |  |  |  |
|  |      | Net gain or (loss)                      |   | ······          |   |  | <del> </del>                                   |  |
| enne   | 8 a  | Gross income from fundraisin            | •                                       |                 |   |  |  |  |
| Ve l   |      | including \$                            | of                                      |                 |   |  |  |  |
| Re   |      | contributions reported on line          | ,                                       |                 |   |  |  |  |
| Other Rev  |      | Part IV, line 18                        |   |                 |   |  |  |  |
| ಕ  |      | Less: direct expenses                   |   |                 |   |  |  | 1  |
|  |      | Net income or (loss) from fund          | ~                                       |                 |   | ļ                                      |  |  |
| ĺ  | 9 а  | Gross income from gaming ac             |   |                 | 144                                     |  | 4  |  |
|  | h    | Part IV, line 19 Less: direct expenses  |   | <u> </u>        |   |  |  |  |
|  |      | Net income or (loss) from gam           |   |                 | 1                                       |  |  |  |
| l  |      | Gross sales of inventory, less          | _                                       |                 |   |  |  |  |
|  | IV a | and allowances                          |   | 125,788.        |   |  |  |  |
|  | h    | Less: cost of goods sold                |   | 46,873.         | 1                                       |  |  |  |
|  |      | Net income or (loss) from sale          |   | 20,0,5          | 78,915.                                 |  |  | 78,915.  |
| ŀ  |      | Miscellaneous Revenu                    |   | Business Code   | <del></del>                             |  |  | 70,010.  |
|  | 11 a | COMPTEGGES                              | OOKSTOR                                 | 900099          | 385,152.                                |  |  | 385,152.   |
|  | b    |   |   |                 | 1                                       |  |  |  |
| j  | c    |   |   |                 |   |  |  |  |
|  |      | All other revenue                       |   |                 |   |  |  |  |
|  | e    | Total. Add lines 11a-11d                |   | <b>&gt;</b>     | 385,152.                                |  |  |  |
|  | 12   | Total revenue. See instructions.        |   |                 | 9,616,263.                              | 1,526,200.                             | 0.   | 563,003.   |
| 232009<br>12-10-                                       | 12   |   |   |                 | *************************************** | ·                                      |  | Form <b>990</b> (2012)   |

## Form 990 (2012) SERVICES CORPO Part IX Statement of Functional Expenses

| Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). |     |     |     |   |  |  |  |  |
|--|-----|-----|-----|---|--|--|--|--|
| Check if Schedule O contains a response to any question in this Part IX  |     |     |     |   |  |  |  |  |
| Do not include amounts reported on lines 6h  | (A) | (B) | (C) | П |  |  |  |  |

|          | Check if Schedule O contains a respor  |                       | s Part IX                    | (C)                                       |  |
|----------|--|-----------------------|------------------------------|---|--|
|          | not include amounts reported on lines 6b,<br>8b, 9b, and 10b of Part VIII.                   | (A)<br>Total expenses | (B) Program service expenses | (C)<br>Management and<br>general expenses | ( <b>D)</b><br>Fundraising<br>expenses |
| 1        | Grants and other assistance to governments and   |                       |                              |   |  |
|          | organizations in the United States. See Part IV, line 21                                     |                       |                              |   |  |
| 2        | Grants and other assistance to individuals in  |                       |                              |   |  |
|          | the United States. See Part IV, line 22  | 94,662.               | 94,662.                      | ·   |  |
| 3        | Grants and other assistance to governments,  |                       |                              |   |  |
|          | organizations, and individuals outside the   |                       |                              |   |  |
|          | United States. See Part IV, lines 15 and 16  |                       |                              |   |  |
| 4        | Benefits paid to or for members  |                       |                              |   |  |
| 5        | Compensation of current officers, directors,   | 4 = 0 = 0 =           |                              | 4 - 0 - 7 0 -                             |  |
|          | trustees, and key employees  | 159,725.              |                              | 159,725.                                  |  |
| 6        | Compensation not included above, to disqualified   |                       |                              |   |  |
|          | persons (as defined under section 4958(f)(1)) and  |                       |                              |   |  |
|          | persons described in section 4958(c)(3)(B)   | - 4 BOO 18E           |                              |   |  |
| 7        | Other salaries and wages   | 4,789,175.            | 4,221,685.                   | 567,490.                                  |  |
| 8        | Pension plan accruals and contributions (include   | 107 202               | 1 = 1 000                    | 45 200                                    |  |
|          | section 401(k) and 403(b) employer contributions)  | 197,382               | 151,983.                     | 45,399.                                   |  |
| 9        | Other employee benefits  | 903,765.              | 690,754.                     | 213,011.                                  |  |
| 10       | Payroll taxes  | 301,469.              | 261,745.                     | 39,724.                                   |  |
| 11       | Fees for services (non-employees):   |                       |                              |   |  |
| а        | Management   | ~ ~ ~ ~ ~ ~           |                              | 01 105                                    |  |
| b        | Legal  | 21,425.               |                              | 21,425.                                   |  |
| C        | Accounting   | 90,500.               |                              | 90,500.                                   | ······································ |
| d        | Lobbying   |                       |                              |   |  |
| е        | Professional fundraising services. See Part IV, line 17                                      |                       |                              |   |  |
| f        | Investment management fees   |                       |                              |   |  |
| 9        | Other. (If line 11g amount exceeds 10% of line 25,   | E16 1E0               | EUE 000                      | 10,160.                                   |  |
|          | column (A) amount, list line 11g expenses on Sch O.)   | 516,158.              | 505,998.                     | 10,100.                                   |  |
| 12       | Advertising and promotion  | 474,972.              | 449,025.                     | 25,947.                                   |  |
| 13       | Office expenses  | 4/4,3/4               | 447,023.                     | 43,341.                                   |  |
| 14       | Information technology   |                       |                              |   |  |
| 15       | Royalties  | 396,801.              | 297,031.                     | 99,770.                                   |  |
| 16       | Occupancy  | 372,897.              | 371,350.                     | 1,547.                                    |  |
| 17       | Travel   | 312,051.              | 371,330.                     | 1,011                                     |  |
| 18       | Payments of travel or entertainment expenses   |                       |                              |   |  |
| 40       | for any federal, state, or local public officials  | 143,330.              | 129,892.                     | 13,438.                                   |  |
| 19<br>20 | Conferences, conventions, and meetings   | 110,000               | 227,0524                     |   |  |
| 21       | Payments to affiliates   | 441,361.              | 40,880.                      | 400,481.                                  |  |
| 22       | Depreciation, depletion, and amortization  | 494,149.              | 494,149.                     |   |  |
| 23       | Insurance  | 20,683.               |                              | 20,683.                                   |  |
| 24       | Other expenses, Itemize expenses not covered   |                       |                              |   |  |
| 1        | above. (List miscellaneous expenses in line 24e. If line                                     |                       |                              |   |  |
|          | 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) |                       |                              |   |  |
| а        | PROGRAM EXPENSES   | 358,669.              | 336,367.                     | 22,302.                                   |  |
| b        | STIPENDS/HONORARIA   | 355,855.              | 355,855.                     | *   |  |
| c        | SERVICE FEES   | 252,243.              | 172,217.                     | 80,026.                                   |  |
| d        | EQUIPMENT/FURNISHINGS  | 80,109.               | 80,109.                      |   |  |
|          | All other expenses   | 1,000.                | 500.                         | 500.                                      |  |
| 25       | Total functional expenses. Add lines 1 through 24e   | 10,466,330.           | 8,654,202.                   | 1,812,128.                                | 0.                                     |
| 26       | Joint costs. Complete this line only if the organization                                     | •                     |                              |   |  |
|          | reported in column (B) joint costs from a combined   |                       |                              |   |  |
|          | educational campaign and fundraising solicitation.   |                       |                              |   |  |
|          | Check here if following SOP 98-2 (ASC 958-720)   |                       |                              |   |  |
| 232010   | 12-10-12   |                       |                              |   | Form <b>990</b> (2012)                 |

232010 12-10-12

Form 990 (2012)

Part X | Balance Sheet Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 641,078. 450,438. Cash - non-interest-bearing 1 11,881,135. 8,251,374. 2 Savings and temporary cash investments 2 3 3 Pledges and grants receivable, net 1,549,672. 1,028,023. 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary 6 employees' beneficiary organizations (see instr). Complete Part II of Sch L ..... Assets Notes and loans receivable, net 7 29,326. 0. 8 Inventories for sale or use 40,150. 44,658. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 9,213,296. basis. Complete Part VI of Schedule D \_\_\_\_\_\_ 10a 6,244,339. 3,432,737. 5,780,559. b Less: accumulated depreciation 10b 10c 2,212,128. 3,237,070. 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 61,081. 61,081. Other assets. See Part IV, line 11 15 15 19,374,852. 22,137,260. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) ... 1,533,707. 1,574,669. Accounts payable and accrued expenses 17 17 18 18 Grants payable 902,316. 418,104. 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 9,579,262. 9,011,359. 25 Schedule D 12,015,285. 11,004,132. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here 

X

and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 10,121,975. 27 8,370,720. 27 Unrestricted net assets Temporarily restricted net assets 28 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here > 1 and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 32 10,121,975. 8,370,720. Total net assets or fund balances 33 33 22,137,260. 34 19,374,852. Total liabilities and net assets/fund balances ...

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| Pa          | rt XI Reconciliation of Net Assets   |            |       |            | ,           |
|-------------|--|------------|-------|------------|-------------|
|             | Check if Schedule O contains a response to any question in this Part XI  |            |       |            | X           |
|             |  |            | 0 61  | ~ ^        | <i>-</i> -  |
| 1           | Total revenue (must equal Part VIII, column (A), line 12)  | 1          | 9,61  | 6,2        | 63.         |
| 2           | Total expenses (must equal Part IX, column (A), line 25)   | 2          | 10,46 |            |             |
| 3           | Revenue less expenses. Subtract line 2 from line 1   | 3          | -85   |            |             |
| 4           | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))                          | 4          | 10,12 |            |             |
| 5           | Net unrealized gains (losses) on investments   | 5          | - 4   | 1,2        | 09.         |
| 6           | Donated services and use of facilities   | 6          |       |            | <del></del> |
| 7           | Investment expenses  | 7          |       |            |             |
| 8           | Prior period adjustments   | 8          |       |            |             |
| 9           | Other changes in net assets or fund balances (explain in Schedule O)   | 9          | -85   | <u>9,9</u> | <u>79.</u>  |
| 10          | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,                 |            |       |            |             |
|             | column (B))  | 10         | 8,37  | <u>0,7</u> | 20.         |
| Pai         | rt XIII Financial Statements and Reporting   |            |       |            |             |
|             | Check if Schedule O contains a response to any question in this Part XII   |            |       | ,          |             |
|             |  |            |       | Yes        | No          |
| 1           | Accounting method used to prepare the Form 990: Cash X Accrual Other   |            |       |            |             |
|             | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule     | O.         |       |            | İ           |
| 2a          | Were the organization's financial statements compiled or reviewed by an independent accountant?                    |            | 2a    |            | X           |
|             | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe     | d on a     |       |            |             |
|             | separate basis, consolidated basis, or both:   |            |       |            | ĺ           |
|             | 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 separar    |            |       |            |             |
|             | consolidated basis, or both:   |            |       |            |             |
|             | Separate basis Consolidated basis X Both consolidated and separate basis   |            |       |            |             |
| ¢           | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | e audit,   |       |            | ĺ           |
|             | review, or compilation of its financial statements and selection of an independent accountant?                     |            | 2c    | Х          |             |
|             | If the organization changed either its oversight process or selection process during the tax year, explain in Sch  |            |       |            |             |
| За          | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si |            |       |            | 1           |
|             | Act and OMB Circular A-133?  |            | За    | Х          | 1           |
| b           | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ  | ired audit |       |            |             |
|             | or audits, explain why in Schedule O and describe any steps taken to undergo such audits                           |            | 3b    | Х          |             |
| <del></del> |  |            |       | 990        | (2012)      |

#### **SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

**Public Charity Status and Public Support** 

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

UNIVERSITY AUXILIARY AND RESEARCH SERVICES CORPORATION

Employer identification number 33-0397688

| Pa   | irt I | Reason                                 | for Public Char                       | ity Status (All organiz  | ations mu      | st complet                | e this par                              | t.) See inst               | ructions.   |              | ······································ | *************************************** |              |
|------|-------|--|---------------------------------------|--|----------------|---------------------------|---|----------------------------|-------------|--------------|--|---|--------------|
| The  | organ | ization is not                         | a private foundation                  | because it is: (For lines  | 1 through      | 11, check                 | only one b                              | oox.)                      |             |              |  |   |              |
| 1    |       |  |                                       | s, or association of chur  |                |                           |   |                            | ).          |              |  |   |              |
| 2    |       | A school des                           | scribed in <b>section 17</b>          | 70(b)(1)(A)(ii). (Attach Sc  | hedule E.)     |                           |   |                            |             |              |  |   |              |
| 3    |       |  |                                       | ital service organization  |                |                           | 170(b)(1)                               | (A)(iii).                  |             |              |  |   |              |
| 4    |       | •                                      | · · · · · · · · · · · · · · · · · · · | operated in conjunction  |                |                           |   |                            | (b)(1)(A)(i | ii). Enter t | the hospita                            | al's na                                 | me,          |
|      |       | city, and stat                         |                                       |  |                | •                         |   |                            |             | •            | •                                      |   |              |
| 5    | X     | An organizat                           | ion operated for the                  | benefit of a college or u  | niversity o    | wned or or                | perated by                              | a governi                  | mental un   | it describ   | ed in                                  |   |              |
|      |       | -                                      | (b)(1)(A)(iv). (Comple                | -  | ·              |                           | ,                                       | -                          |             |              |  |   |              |
| 6    |       |  |                                       | ent or governmental uni  | it describe    | d in sectio               | n 170(b)(                               | 1)(A)(v).                  |             |              |  |   |              |
| 7    |       |  | _                                     | eives a substantial part   |                |                           |   |                            | or from the | aeneral      | public des                             | cribed                                  | in .         |
|      |       |  | ( <b>b)(1)(A)(vi)</b> . (Comple       |  |                |                           | <b>3</b>                                |                            |             | •            | ,                                      |   |              |
| 8    |       |  |                                       | section 170(b)(1)(A)(vi).  | (Complete      | Part II.)                 |   |                            |             |              |  |   |              |
| 9    |       | •                                      |                                       | eives: (1) more than 33  |                | •                         | rom contri                              | ihutions n                 | nembersh    | in fees, a   | nd aross n                             | eceint                                  | s from       |
| •    | ,     | _                                      | •                                     | nctions - subject to certa   |                |                           |   |                            |             | •            | •                                      |   |              |
|      |       |  |                                       | axable income (less sec  | -              |                           |   |                            |             |              |  |   |              |
|      |       |  | 509(a)(2). (Complete                  | •  | 11031 0 1 1 10 | in in on i bu             | JII 103005 (                            | aoquirou s                 | y tho orge  | 11112411011  | artor dario                            | 50, 10                                  | <i>,,</i> 0. |
| 10   |       |  |                                       | perated exclusively to te  | et for oubl    | lic safety S              | See sectio                              | n 509(a)(a                 | 1)          |              |  |   |              |
| 11   |       | -                                      | -                                     | perated exclusively for the pe | ,              | •                         |   |                            | -           | v out the    | nurnases                               | of one                                  | ⊇ Or         |
| 1 1  |       | _                                      | - '                                   | ations described in secti  |                |                           |   |                            |             |              |  |   |              |
|      |       |  | •                                     | organization and compl   |                | •                         |   | _). Oct <b>30</b> (        | ) (10 ii    | unon on      | con the be                             | A triat                                 |              |
|      |       | a Type                                 | ·                                     |  |                | nctionally i              |   |                            | TVE         | e III - Nor  | n-functiona                            | dly int.                                | naterne      |
| е    |       | • •                                    | •                                     | at the organization is not   | • (            | •                         | •                                       |                            |             |              |  | •                                       | ~            |
| ٠    |       |  | _                                     | han one or more public!  |                | •                         |   | •                          |             |              |  |   |              |
|      |       |  |                                       |  |                |                           |   |                            |             | 3(a)(1) OI   | SECTION                                | 13(a)(2                                 | <i>)</i> .   |
| f    |       | -                                      |                                       | tten determination from  |                | •                         |   |                            |             |              |  |   |              |
| _    |       |  | rganization, check th                 |  |                |                           |   |                            |             |              |  |   |              |
| 9    |       |  |                                       | organization accepted a  |                |                           |   |                            |             |              |  | T                                       | 1            |
|      |       |  |                                       | lirectly controls, either al   |                |                           |   |                            |             |              |  | Yes                                     | No           |
|      |       |  |                                       | upported organization?   |                |                           |   |                            |             |              |  | _                                       | -            |
|      |       |  |                                       | n described in (i) above?  |                |                           |   |                            |             |              |  |   |              |
|      |       |  |                                       | person described in (i)  |                |                           |   |                            |             |              | 11g(ii                                 | <u>) I </u>                             | 1            |
| h    |       | Provide the f                          | ollowing information                  | about the supported or   | ganization     | (s).                      |   |                            |             |              |  |   |              |
|      |       | ······································ | T                                     | T  | ı              |                           |   |                            |             |              |  |   |              |
| (i)  | Name  | of supported                           | (ii) EIN                              | (iii) Type of organization   | P /            | organization              | , , ,                                   |                            | Lorganizati | on in col. I | (vii) Amou                             | nt of m                                 | onetary      |
|      | orga  | nization                               |                                       |  |                | sted in your<br>document? | ~                                       | tion in col.<br>r support? | (i) organiz | ed in the l  | su                                     | pport                                   |              |
|      |       |  |                                       | above or IRC section (see instructions))   |                |                           |   |                            | U.S         | ,            |  |   |              |
|      |       |  |                                       |  | Yes            | No                        | Yes                                     | No                         | Yes         | No           | <del></del>                            |   |              |
|      |       |  |                                       |  |                |                           |   |                            |             |              |  |   |              |
|      |       |  |                                       |  |                |                           |   |                            |             |              |  |   |              |
|      |       |  |                                       |  |                |                           |   | İ                          |             |              |  |   |              |
|      |       |  |                                       |  |                |                           | *************************************** |                            |             |              |  | ····                                    |              |
|      |       |  |                                       |  |                |                           |   |                            |             |              |  |   |              |
|      |       |  |                                       |  |                |                           |   |                            |             |              |  |   |              |
|      |       |  |                                       |  |                |                           |   |                            |             |              |  |   |              |
|      |       |  |                                       |  |                |                           |   |                            |             | <u> </u>     |  |   |              |
|      |       |  |                                       |  |                |                           |   |                            |             |              |  |   |              |
|      |       |  |                                       |  |                |                           |   |                            |             |              |  |   |              |
|      |       |  |                                       |  | Ī              |                           | *************************************** |                            |             |              |  |   |              |
| Tota | 1     |  |                                       |  |                |                           |   |                            |             |              |  |   |              |

232021 12-04-12

Schedule A (Form 990 or 990-EZ) 2012

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2012 SERVICES CORPORATION

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

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

| Se                                      | ction A. Public Support   |                   |                      |                                      |                      | ,                  |                                     |  |
|---|---|-------------------|----------------------|--------------------------------------|----------------------|--------------------|-------------------------------------|--|
| Cale                                    | endar year (or fiscal year beginning in) 🕨  | (a) 2008          | (b) 2009             | (c) 2010                             | (d) 2011             | (e) 2012           | (f) Total                           |  |
| 1                                       | Gifts, grants, contributions, and   |                   |                      |                                      |                      |                    |                                     |  |
|   | membership fees received. (Do not   |                   |                      |                                      |                      |                    |                                     |  |
|   | include any "unusual grants.")  | 7828953.          | 7845577.             | 9060395.                             | 7789329.             | 7527060.           | 40051314.                           |  |
| 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  | 7828953.          | 7845577.             | 9060395.                             | 7789329.             | 7527060.           | 40051314.                           |  |
| 5                                       | The portion of total contributions  |                   |                      |                                      |                      |                    |                                     |  |
|   | by each person (other than a  |                   |                      |                                      |                      |                    |                                     |  |
|   | governmental unit or publicly   |                   |                      |                                      |                      |                    |                                     |  |
|   | supported organization) included  |                   |                      |                                      |                      |                    |                                     |  |
|   | on line 1 that exceeds 2% of the  |                   |                      |                                      |                      |                    |                                     |  |
|   | amount shown on line 11,  |                   |                      |                                      |                      |                    |                                     |  |
|   | column (f)  |                   |                      |                                      |                      |                    |                                     |  |
|   | Public support. Subtract line 5 from line 4.  |                   | •                    |                                      |                      |                    | 40051314.                           |  |
| *************************************** | ction B. Total Support  |                   |                      |                                      |                      | ,                  |                                     |  |
| Cale                                    | indar year (or fiscal year beginning in) 📂  | (a) 2008          | (b) 2009             | (c) 2010                             | (d) 2011<br>7789329. | (e) 2012           | (f) Total<br>40051314.              |  |
| 7                                       | Amounts from line 4   | 7828953.          | 7845577.             | 9060395.                             | 7789329.             | 7527060.           | 40051314.                           |  |
| 8                                       | Gross income from interest,   |                   |                      |                                      |                      |                    | j                                   |  |
|   | dividends, payments received on   |                   |                      |                                      |                      |                    |                                     |  |
|   | securities loans, rents, royalties  |                   |                      |                                      |                      |                    |                                     |  |
|   | and income from similar sources   | 575,632.          | 398,277.             | 176,548.                             | 183,024.             | 193,040.           | 1526521.                            |  |
| 9                                       | Net income from unrelated business  |                   |                      |                                      |                      |                    |                                     |  |
|   | activities, whether or not the  |                   |                      |                                      |                      |                    |                                     |  |
|   | business is regularly carried on  |                   |                      |                                      |                      |                    |                                     |  |
| 10                                      | Other income. Do not include gain   |                   |                      |                                      |                      |                    |                                     |  |
|   | or loss from the sale of capital  |                   |                      |                                      |                      |                    |                                     |  |
|   | assets (Explain in Part IV.)  |                   |                      | <u></u>                              |                      |                    |                                     |  |
| 11                                      | Total support. Add lines 7 through 10   |                   |                      |                                      |                      |                    | 41577835.                           |  |
|   | Gross receipts from related activities,   |                   |                      |                                      |                      | <del></del>        | ,615,623.                           |  |
| 13                                      | First five years. If the Form 990 is for  | =                 | first, second, thir  | d, fourth, or fifth ta               | ax year as a sectio  | n 501(c)(3)        | <del></del>                         |  |
| <b>6</b> ~                              | organization, check this box and stor   | here              |                      | ,,,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                      |                    | <u></u>                             |  |
|   | ction C. Computation of Publ  |                   |                      |                                      |                      |                    | 06 33                               |  |
|   | Public support percentage for 2012 (I   |                   |                      |                                      |                      | 14                 | $\frac{96.33}{94.87} \frac{\%}{\%}$ |  |
|   | Public support percentage from 2011   |                   |                      |                                      |                      |                    | <del>``</del>                       |  |
| 16a                                     | 33 1/3% support test - 2012. If the c   | -                 |                      |                                      |                      |                    |                                     |  |
|   | stop here. The organization qualifies   |                   |                      |                                      |                      |                    |                                     |  |
| D                                       | 33 1/3% support test - 2011. If the o   |                   |                      |                                      |                      |                    |                                     |  |
|   | and stop here. The organization quali   |                   |                      |                                      |                      |                    |                                     |  |
| 17a                                     | 'a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization |                   |                      |                                      |                      |                    |                                     |  |
|   |   |                   |                      |                                      |                      |                    |                                     |  |
|   | meets the "facts-and-circumstances"   |                   |                      |                                      |                      |                    |                                     |  |
| Q                                       | 10% -facts-and-circumstances test   | -                 |                      |                                      |                      |                    |                                     |  |
|   | more, and if the organization meets the   |                   |                      |                                      | •                    |                    |                                     |  |
| 10                                      | organization meets the "facts-and-circ  |                   | - '                  | ·                                    |                      |                    |                                     |  |
| 10                                      | Private foundation. If the organization   | н она поселеска г | JOX OIT HITE 13, 168 | i, 100, 17a, 0F 1/C                  | <del></del>          |                    | or 990-EZ) 2012                     |  |
|   |   |                   |                      |                                      | Julie                | WALL IN IL OLD 300 | UI UUU   CU   C                     |  |

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

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

| Calendar year (or fiscal year beginning in) > (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total membrahip fies received, (Do not include any "unusual prants", 1 2. Gross receipts from admissions, membrahing set of the companies of the comp                | Se  | ction A. Public Support                    |                   |                                       |   |                            |  |   |
|---|-----|--|-------------------|---------------------------------------|---|----------------------------|--|---|
| memberatility fees received. (Do not included any inclusions and included any inclusions of included any inclusions of included any included any included any included and included any included and included any included and included any included and included any included and included any included and included any inc                | Cal | endar year (or fiscal year beginning in) ► | (a) 2008          | (b) 2009                              | (c) 2010                                | (d) 2011                   | (e) 2012                               | (f) Total                               |
| include any 'unusual grants.')  Conse recipits from admissions, menthandiae sold or services per formed, or facilities furnished in any activity that is related to the organization's tracevempt purpose  3. Gross recipits from activities that are not an unrelated trade of business under section 513.  4. Tax revulues levied for the organization's tracevers and the paid to or expended on its behalf or expended on its behalf or expended on its behalf or expended on its behalf or expended on its behalf or expended on its behalf or expended on its behalf or expended on its behalf or expended on its behalf or expended on its behalf or expended on its behalf or expended on its behalf of the organization's benefit and either paid to or expended on its behalf of the organization without charge it is a facility of the organization without charge it is a facility of the organization without charge it is a facility of the organization of the organization without charge it is a facility of the organization of the organization is a facility of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization organ                | 1   | Gifts, grants, contributions, and          |                   |                                       |   |                            |  |   |
| 2. Cross receipts from admissions, merchandles and or services per formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose and any activity that is related to the organization's tax-exempt purpose in the part of the organization's tax-exempt purpose in the part of the organization's benefit and either paid to or expended on its behalf.  4. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.  5. The value of services or facilities furnished by a governmental unit to the organization's benefit and either paid to or expended on its behalf.  6. Total. Add lines 1 through 5   |     | membership fees received. (Do not          |                   |                                       |   |                            |  |   |
| 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 of bus- iness under section 513.  4. Tax revenues leviad 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.  5. The value of services or facilities  furnished by a governmental unit to  the organization without charge  6. Total. Add lines 1 through 5.  5. The value of services or facilities  furnished by a governmental unit to  the organization without charge  6. Total. Add lines 1 and the services  from discussified persons  1. Director included on lines 1,2, and  3. received from disqualified persons  1. Director included in lines 1,2, and  3. received from disqualified persons  1. Director included in lines 1,2, and  3. received from disqualified persons  9. Add lines 7 and 7 b  9. Add lines 7 and 7 b  9. Add lines 1 and 1 b to line year  and income from interest,  dividends, payments received or  and income from interest,  dividends, payments received or  and income from similar sources  9. Unrelated submisses baseline from  (lass section 5.11 laxes) from businesses  acquired after June 30, 1875  9. Add lines 10s and 10b  1. Net income from similar sources  9. Unrelated submisses baseline from  1. Received after June 30, 1875  9. Add lines 10s and 10b  1. Net income Do not include gain  or loss from the sale of capital  section 6. Computation of Public Support Percentage  15. Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)  1. Tell  1. Section D. Computation of Public Support Percentage  15. Public support percentage for 2012 (line 8, column (f) column line 14, and line 15 is more than 33 1.73%, and line 17 is not  more than 33 1.73%, support tests - 2012. If the organization did not check the bo                |     | include any "unusual grants.")             |                   |                                       | l                                       |                            |  |   |
| 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 business under section 513 4 Tax revenues level for the organization's breath and it is section 513 5 The value of services or facilities furnished by a governmental unit to the organization without charge 5 Total. Add lines 1 through 5 7 a Amounts included on lines 1, 2, and 3 received from desputified persons 5 mounts included on lines 1, 2, and 3 received from desputified persons 5 mounts included on lines 1, 2, and 3 received from desputified persons 5 mounts included on lines 1 and 3 received from desputified persons 5 mounts included on lines 1 and 3 received from desputified persons 6 mounts on line 1 so 1 line 3 miles of 1 miles 1 mi                | 2   | Gross receipts from admissions,            |                   |                                       |   |                            |  |   |
| any activity that is related to the organization's tax exempt purpose 3  3. Gross receipts from activities that are not an unrelated trade of business under section 513  4. Tax reverues levied for the organization's benefit and either pad to or expended on its behalf 5. The value of services or facilities furnished by a governmental unit to the organization's benefit and either pad to or expended on its behalf 6. The value of services or facilities furnished by a governmental unit to the organization without change 6. Total. Add lines 1 through 5. The Amounts included on lines 1, 2, and 3 received from disqualified persons 1. Amounts included on lines 2 and 3 received from disqualified persons 1. Amounts included on lines 2 and 3 received from disqualified persons 1. Amounts included on lines 2 and 3 received from disqualified persons 4. Add lines 1 3 for the year of the event of the shape displaced persons 4. Add lines 1 3 for the year of the event of the shape displaced persons 4. Add lines 1 3 for the year of the event of the shape of the year of the event of the shape of the year of the event of the year of the event of the year of the event of the year of year of yea                |     |  |                   |                                       |   |                            |  |   |
| organization's tax exempt purpose 3 Gross recolarist from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its bohall 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 19 Amounts included on lines 1, 2, and 3 received from disqualified persons 19 Control of the second                      |     | •  |                   |                                       |   |                            |  |   |
| 3 Gross receipts from activities that are not an unrelated trade of business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or actilities furnished by a governmental unit to the organization's benefit and either paid to or expended on its behalf 6 Total. Add lines 1 through 5 7 a Amounts included on lines 1, 2, and 3 received from disqualified persons be demands in the paid of the properties of the companization without charge 6 Total. Add lines 1 through 5 7 a Amounts included on lines 1, 2, and 3 received from disqualified persons between the paid of th                |     |  |                   |                                       |   |                            |  | ]                                       |
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|   | b   |  | <del>-</del>      |                                       |   |                            |  |   |
| 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions   |     |  |                   | · · · · · · · · · · · · · · · · · · · |   |                            |  |   |
|   | 20  | Private foundation. If the organization    | n did not check a | box on line 14, 19                    | a, or 19b, check th                     | his box and see in         | structions                             | <b>&gt;</b>                             |

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

Department of the Treasury Internal Revenue Service

Name of the organization

**Schedule of Contributors** 

Attach to Form 990, Form 990-EZ, or Form 990-PF.

UNIVERSITY AUXILIARY AND RESEARCH

OMB No. 1545-0047

2012

Employer identification number

33-0397688 SERVICES CORPORATION Organization type (check one): Filers of: Section: X 501(c)( 3 ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. 🔟 For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

religious, charitable, etc., contributions of \$5,000 or more during the year

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization UNIVERSITY AUXILIARY AND RESEARCH SERVICES CORPORATION

Employer identification number

33-0397688

| Part I | Contributors | (see instructions) | . Use duplicate copies | s of Part I if additional | space is needed. |
|--------|--------------|--------------------|------------------------|---------------------------|------------------|
|--------|--------------|--------------------|------------------------|---------------------------|------------------|

| (a)<br>No.      | (b)<br>Name, address, and ZIP + 4 | (c)<br>Total contributions | (d)<br>Type of contribution   |
|-----------------|-----------------------------------|----------------------------|---|
| 1               |                                   | \$196,491.                 | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a)<br>No.      | (b)<br>Name, address, and ZIP + 4 | (c)<br>Total contributions | (d)<br>Type of contribution   |
| 2               |                                   | \$616,150.                 | Person X Payroll  |
| (a)<br>No.      | (b)<br>Name, address, and ZIP + 4 | (c)<br>Total contributions | (d)<br>Type of contribution   |
| 3               |                                   | \$2,665,716.               | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a)<br>No.      | (b)<br>Name, address, and ZIP + 4 | (c) Total contributions    | (d)<br>Type of contribution   |
| 4               |                                   | \$1,781,842.               | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a)<br>No.      | (b)<br>Name, address, and ZIP + 4 | (c)<br>Total contributions | (d)<br>Type of contribution   |
| 5               |                                   | \$1,372,439.               | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a)<br>No.      | (b)<br>Name, address, and ZIP + 4 | (c) Total contributions    | (d)<br>Type of contribution   |
| 223452 12-21-12 |                                   | \$                         | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)   |

Name of organization UNIVERSITY AUXILIARY AND RESEARCH SERVICES CORPORATION

Employer identification number

33-0397688

| Part II | Noncash Propert | y (see instructions). | Use duplicate copies | of Part II if additional | space is needed. |
|---------|-----------------|-----------------------|----------------------|--------------------------|------------------|
|---------|-----------------|-----------------------|----------------------|--------------------------|------------------|

| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|------------------------------|--|--|----------------------|
|                              |  | \$   |                      |
| (a)<br>No.<br>irom<br>Part I | (b)  Description of noncash property given   | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received |
|                              |  | \$   |                      |
| (a)<br>No.<br>From           | (b)  Description of noncash property given   | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|                              |  | \$   |                      |
| (a)<br>No.<br>rom<br>Part I  | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|                              |  | \$   |                      |
| (a)<br>No.<br>om<br>art I    | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|                              |  | \$   |                      |
| (a)<br>No.<br>rom<br>art I   | (b) Description of noncash property given    | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|                              |  |  |                      |

Schedule B (Form 990, 990-EZ, or 990-PF) (2012) Page 4 Employer identification number Name of organization UNIVERSITY AUXILIARY AND RESEARCH 33-0397688 SERVICES CORPORATION Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) Part III Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

## Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

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

➤ Attach to Form 990. ➤ See separate instructions.

2012
Open to Public Inspection

Name of the organization

UNIVERSITY AUXILIARY AND RESEARCH SERVICES CORPORATION

Employer identification number 33-0397688

| Pa                                      | Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the   |  |   |  |  |  |  |  |
|---|--|--|---|--|--|--|--|--|
| *************************************** | organization answered "Yes" to Form 990, Part IV, line 6.  |  |   |  |  |  |  |  |
| *************************************** |  | (a) Donor advised funds  | (b) Funds and other accounts                  |  |  |  |  |  |
| 1                                       | Total number at end of year  |  |   |  |  |  |  |  |
| 2                                       | Aggregate contributions to (during year)   |  |   |  |  |  |  |  |
| 3                                       | Aggregate grants from (during year)  |  |   |  |  |  |  |  |
| 4                                       | Aggregate value at and of year   |  |   |  |  |  |  |  |
| 5                                       | Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds   |  |   |  |  |  |  |  |
|   | are the organization's property, subject to the organization's exclusive legal control?  |  |   |  |  |  |  |  |
| 6                                       | Did the organization inform all grantees, donors, and donor advise   |  |   |  |  |  |  |  |
|   | for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring   |  |   |  |  |  |  |  |
|   | impermissible private benefit? Yes No  |  |   |  |  |  |  |  |
| Pa                                      | Part II   Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.  |  |   |  |  |  |  |  |
| 1                                       |  |  |   |  |  |  |  |  |
| -                                       | Preservation of land for public use (e.g., recreation or education)  Preservation of an historically important land area   |  |   |  |  |  |  |  |
|   | Protection of natural habitat  | Preservation of a certif   |   |  |  |  |  |  |
|   | Preservation of open space   | 11000,740,0110,1014  |   |  |  |  |  |  |
| 2                                       | Complete lines 2a through 2d if the organization held a qualified of   | conservation contribution in the form of   | of a conservation easement on the last        |  |  |  |  |  |
| -                                       | day of the tax year.   | A TOTAL OF THE POST OF THE POS | or a concentration casement on the last       |  |  |  |  |  |
|   | day of the tax your.   |  | Held at the End of the Tax Year               |  |  |  |  |  |
| а                                       | Total number of conservation easements   |  |   |  |  |  |  |  |
| b                                       | Total acreage restricted by conservation easements   |  |   |  |  |  |  |  |
| c                                       | Number of conservation easements on a certified historic structu   |  |   |  |  |  |  |  |
|   | Number of conservation easements included in (c) acquired after  |  |   |  |  |  |  |  |
| u                                       | listed in the National Register  |  | L Is  |  |  |  |  |  |
| 3                                       |  |  |   |  |  |  |  |  |
| 3                                       | Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax   |  |   |  |  |  |  |  |
| 4                                       | year ▶<br>Number of states where property subject to conservation easement is located ▶ .  |  |   |  |  |  |  |  |
| 5                                       |  |  |   |  |  |  |  |  |
| 3                                       | Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?   |  |   |  |  |  |  |  |
| 6                                       |  |  |   |  |  |  |  |  |
| 7                                       | Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year   Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year   \$\bigsec\sum_{\text{sol}}\$\$                                     |  |   |  |  |  |  |  |
| 8                                       |  |  |   |  |  |  |  |  |
| ·                                       | Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)  and section 170(h)(4)(B)(ii)?  Yes  No  |  |   |  |  |  |  |  |
| 9                                       | VATE II 7 - Oomongagagaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa  |  |   |  |  |  |  |  |
| 9                                       | In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for                 |  |   |  |  |  |  |  |
|   |  | s mancial statements that describes t  | ne organization's accounting for              |  |  |  |  |  |
| Pai                                     | conservation easements.  † III   Organizations Maintaining Collections of Ar   | t Historical Treasures or Ot   | her Similar Assets                            |  |  |  |  |  |
|   | Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  |  |   |  |  |  |  |  |
| 10                                      |  |  | and halange sheet works of art                |  |  |  |  |  |
| 14                                      | If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, |  |   |  |  |  |  |  |
|   |  |  | ice of public service, provide, in Fart XIII, |  |  |  |  |  |
| la.                                     | the text of the footnote to its financial statements that describes these items.   |  |   |  |  |  |  |  |
| b                                       | If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical  |  |   |  |  |  |  |  |
|   | treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts  |  |   |  |  |  |  |  |
|   | relating to these items:   |  |   |  |  |  |  |  |
|   | (i) Revenues included in Form 990, Part VIII, line 1   |  |   |  |  |  |  |  |
| _                                       | (ii) Assets included in Form 990, Part X   |  |   |  |  |  |  |  |
| 2                                       | If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide   |  |   |  |  |  |  |  |
|   | the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:  |  |   |  |  |  |  |  |
| a                                       | Revenues included in Form 990, Part VIII, line 1   |  |   |  |  |  |  |  |
| b                                       | Assets included in Form 990, Part X  |  | <b>&gt;</b> \$                                |  |  |  |  |  |

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Schedule D (Form 990) 2012

| UNIVERSITY   | AUXILIARY          | AND | RESEARCH |
|--------------|--------------------|-----|----------|
| CEDVITCEC CC | TAO TIME A GOOD OF |     |          |

| Pai | र ।।। Organizations Maintaining C                           | Collections of A                       | rt, Histo    | orical Tr     | easures, e    | or Othe    | er Similar       | Asse      | <b>ts</b> (continue                   | ∋d)                                     |
|-----|---|--|--------------|---------------|---------------|------------|------------------|-----------|---------------------------------------|---|
| 3   | Using the organization's acquisition, accessi               | on, and other record                   | is, check    | any of the    | following tha | at are a s | ignificant use   | e of its  | collection i                          | tems                                    |
|     | (check all that apply):                                     |  |              |               |               |            |                  |           |                                       |   |
| а   | Public exhibition   | d                                      | ı <u>L</u> l | oan or exc    | hange progr   | ams        |                  |           |                                       |   |
| þ   | Scholarly research  | е                                      |              | ther          |               |            |                  |           |                                       |   |
| C   | Preservation for future generations                         |  |              |               |               |            |                  |           |                                       |   |
| 4   | Provide a description of the organization's co              | ollections and explai                  | n how the    | ey further t  | he organizati | ion's exe  | mpt purpose      | in Parl   | XIII.                                 |   |
| 5   | During the year, did the organization solicit of            | r receive donations                    | of art, his  | torical trea  | sures, or oth | er simila  | rassets          | ·         | 7                                     |   |
| ,   | to be sold to raise funds rather than to be ma              |  |              |               |               |            |                  |           | Yes                                   | <u> No</u>                              |
| Pai | t IV Escrow and Custodial Arran                             |  | ete if the o | organizatio   | n answered    | "Yes" to   | Form 990, P      | art IV, i | ne 9, or                              |   |
|     | reported an amount on Form 990, Pa                          |  |              |               |               |            |                  |           |                                       |   |
| 1a  | Is the organization an agent, trustee, custod               |  |              |               |               |            |                  |           | ٦                                     |   |
|     | on Form 990, Part X?  |  |              |               |               |            |                  | L         | Yes                                   | L No                                    |
| b   | If "Yes," explain the arrangement in Part XIII              |  |              |               |               |            |                  |           |                                       |   |
|     |   |  |              |               |               |            |                  |           | Amount                                |   |
|     | Beginning balance   |  |              |               |               |            |                  |           |                                       | <del></del>                             |
|     | Additions during the year                                   |  |              |               |               |            |                  |           |                                       |   |
| e   | Distributions during the year                               |  |              |               |               |            | 1 1              |           |                                       | <del></del>                             |
| f   | Ending balance  |  |              |               |               |            | <u>If</u>        |           | T                                     |   |
|     | Did the organization include an amount on F                 |  |              |               |               |            |                  |           | Yes                                   | LNo                                     |
|     | If "Yes," explain the arrangement in Part XIII.             |  |              |               |               |            |                  |           |                                       |   |
| Par | t V   Endowment Funds. Complete i                           | ······································ | <del></del>  | ······        |               |            |                  | en haale  | 4-3 Carrer                            |   |
|     | (Sandan tana afarana baharan                                | (a) Current year                       | (b) Pri      | or year       | (c) Two yea   | IS DACK    | (d) Three year   | SDACK     | (e) Four yo                           | ars Dack                                |
| 1a  | Beginning of year balance                                   |  |              |               |               |            |                  |           |                                       |   |
| b   | Contributions   |  |              |               |               |            |                  |           |                                       |   |
| C   | Net investment earnings, gains, and losses                  |  |              |               |               |            |                  |           |                                       |   |
|     | Grants or scholarships                                      |  |              |               |               |            |                  |           |                                       |   |
| е   | Other expenditures for facilities                           |  |              |               |               |            |                  |           |                                       |   |
|     | and programs  |  |              |               |               |            |                  |           |                                       |   |
|     | Administrative expenses                                     |  |              |               |               |            |                  |           |                                       |   |
| g   | End of year balance   |  | a line de    | l / c         | V) baid as    | 1          |                  |           | · · · · · · · · · · · · · · · · · · · | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ |
| 2   | Provide the estimated percentage of the current             | •                                      |              | , column (a   | i)) neiu as:  |            |                  |           |                                       |   |
| a   | Board designated or quasi-endowment ▶ Permanent endowment ▶ | %                                      | <u></u> %    |               |               |            |                  |           |                                       |   |
| b   | Temporarily restricted endowment                            | <sup>76</sup>                          |              |               |               |            |                  |           |                                       |   |
| С   | The percentages in lines 2a, 2b, and 2c shou                | ·····                                  |              |               |               |            |                  |           |                                       |   |
| 32  | Are there endowment funds not in the posse                  | ,                                      | ation that   | are held a    | nd administr  | ared for t | he organizat     | ion       |                                       |   |
| Ja  | by:   | ssion of the digatile                  | alion that   | ale lieru a   | nu aumminst   | sieu ioi i | ne organizat     | IOH       | Γv                                    | es No                                   |
|     | (i) unrelated organizations                                 |  |              |               |               |            |                  |           | 3a(i)                                 | 65 110                                  |
|     | (ii) related organizations                                  |  |              |               |               |            | **************** | ********* | 3a(ii)                                | -                                       |
| b   | If "Yes" to 3a(ii), are the related organizations           | s listed as required o                 | n Schedi     | de R2         |               |            |                  |           |                                       | _                                       |
| 4   | Describe in Part XIII the intended uses of the              |  |              |               |               |            |                  |           |                                       |   |
| Par |   |  |              |               |               |            |                  |           | <del></del>                           |   |
| L   | Description of property                                     | (a) Cost or o                          |              | (b) Cost      | or other      | (c) A      | ccumulated       |           | (d) Book v                            | alue                                    |
|     |   | basis (investr                         |              | basis         |               |            | oreciation       |           | (4) 130011                            | 4.45                                    |
| 1a  | Land  |  |              |               |               |            |                  | _         |                                       |   |
|     | Buildings   | 4 4 4 4 4                              | 220.         |               |               |            | 335,218          | 3.        | 3,767                                 | ,002.                                   |
| C   | Leasehold improvements                                      | ···                                    |              |               |               |            | 319,606          | 5.        | 1,767                                 | ,346.                                   |
|     | Equipment   |  | 124.         | ·····         | ,             | 1,:        | 277,913          | 3.        | 246                                   | ,211.                                   |
|     | Other   |  |              |               |               |            |                  |           |                                       | ····                                    |
|     | . Add lines 1a through 1e. (Column (d) must e               | qual Form 990, Part                    | X, columi    | n (B), line 1 | 0(c).)        |            |                  |           | 5,780                                 | ,559.                                   |
|     |   |  |              |               |               |            | Sc               | hedule    | D (Form 9                             | 90) 2012                                |

| Schedule D (Form 990) 2012 SERVICES COR   |  |  |   | 0337000 Page 3         |
|---|--|--|---|------------------------|
| Part VII Investments - Other Securities. See (a) Description of security or category (including name of security) | Form 990, Part X, lin (b) Book value     |  | duation: Cost or end                    | d-of-year market value |
|   | (b) BOOK VAILE                           | (C) MEMICA OF VE                       | iluation. Cost of Che                   |                        |
| (1) Financial derivatives   |  |  |   |                        |
| (2) Closely-held equity interests   |  |  | *************************************** |                        |
| (3) Other   |  |  |   |                        |
| (A)   |  |  |   |                        |
| (B)   |  |  |   |                        |
| (C)   |  |  |   |                        |
| (D)   |  |  |   |                        |
| (E)   |  |  |   |                        |
| (F)   |  |  |   |                        |
| (G)   |  |  |   |                        |
| (H)   |  | ······································ |   |                        |
| (i) Tatal (Cal (b) must savel form 000 Part V sal (D) line 10 \   |  |  |   |                        |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)  Part VIII Investments - Program Related. See    | F  | 10                                     |   |                        |
| (a) Description of investment type  | b Form 990, Part X, II<br>(b) Book value | ne 13.                                 | Aluation: Cost or and                   | d-of-year market value |
|   | (b) DOOK VAIUE                           | (C) Method of Va                       | iluation. Cost of en                    | Jorycai Harket Value   |
| (1)   |  |  |   |                        |
| (2)   |  |  |   |                        |
| (3)   |  |  |   |                        |
| (4)   |  |  |   |                        |
| (5)   |  |  |   |                        |
| (6)   | · · · · · · · · · · · · · · · · · · ·    |  |   |                        |
| (7)   |  |  |   |                        |
| (8)   |  |  |   |                        |
| (9)   |  |  |   |                        |
| (10)  |  |  |   |                        |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  |  |  |   |                        |
| Part IX Other Assets. See Form 990, Part X, line 1:   |  |  |   | 4) 50                  |
| (a) D   | escription                               |  |   | (b) Book value         |
| (1)   |  |  |   |                        |
| (2)   |  |  |   |                        |
| (3)   |  |  |   |                        |
| (4)   |  |  |   |                        |
| (5)   |  |  |   |                        |
| (6)   |  |  |   |                        |
| (7)   |  |  |   |                        |
| (8)   |  |  |   |                        |
| (9)   |  |  |   |                        |
| (10)  |  |  |   |                        |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line   | 15.)                                     |  |   |                        |
| Part X Other Liabilities. See Form 990, Part X, lin   | e 25.                                    |  |   |                        |
| 1. (a) Description of liability   |  | (b) Book value                         |   |                        |
| (1) Federal income taxes  |  |  |   |                        |
| (2) POST RETIREMENT BENEFITS  |  | 1,483,436.                             |   |                        |
| (3) DUE TO SAN MARCOS FOUNDATI  | ON                                       | 7,527,923.                             |   |                        |
| (4)   |  |  |   |                        |
| (5)   |  |  |   |                        |
| (6)   |  |  |   |                        |
| (7)   |  |  |   | •                      |
| (8)   |  |  |   |                        |
| (9)   |  |  |   |                        |
| (10)  |  |  |   |                        |
| (11)  |  | ·                                      | •                                       |                        |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 2   | 25.)                                     | 9,011,359.                             |   |                        |

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

Schedule D (Form 990) 2012

UNIVERSITY AUXILIARY AND RESEARCH 33-0397688 Page 4 SERVICES CORPORATION Schedule D (Form 990) 2012 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 10,460,516. Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: -41,209. a Net unrealized gains on investments 2a 744,485. b Donated services and use of facilities 2b c Recoveries of prior year grants 2c 140,977. d Other (Describe in Part XIII.) 2d 844,253. e Add lines 2a through 2d 2e 9,616,263. Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 11,351,792. Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 744,485. a Donated services and use of facilities \_\_\_\_\_ **b** Prior year adjustments 2b c Other losses 2¢ d Other (Describe in Part XIII.) 2d 885,462. e Add lines 2a through 2d 2е Subtract line 2e from line 1  $10.466.3\overline{30}$ . Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) 0. 10,466,330. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part

X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2: THE ORGANIZATION IS A QUALIFIED NONPROFIT ORGANIZATION

THAT IS GENERALLY EXEMPT FROM FEDERAL AND STATE INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SECTION 23701(D) OF THE

CALIFORNIA REVENUE AND TAXATION CODE. THIS EXEMPTION IS FOR ALL INCOME TAXES EXCEPT FOR THOSE ASSESSED ON UNRELATED BUSINESS INCOME (UBI), IF ANY. IN ORDER TO MAINTAIN THAT STATUS, THE ORGANIZATION IS PRECLUDED FROM MAKING CERTAIN EXPENDITURES, PRINCIPALLY IN SUPPORT OF POLITICAL PARTIES.

MANAGEMENT BELIEVES THAT NO SUCH EXPENDITURES HAVE BEEN MADE. THE

Schedule D (Form 990) 2012

Part XIII Supplemental Information (continued)

ORGANIZATION IS NOT A PRIVATE FOUNDATION.

THE ORGANIZATION ADOPTED ACCOUNTING GUIDANCE RELATING TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH IS PRIMARILY CODIFIED IN FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICATION (ASC) 740. THE ORGANIZATION FILES A FORM 990 (RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX) ANNUALLY. WHEN THESE RETURNS ARE FILED, IT IS HIGHLY CERTAIN THAT SOME POSITIONS TAKEN WOULD BE SUSTAINED UPON EXAMINATION BY THE TAXING AUTHORITIES, WHILE OTHERS ARE SUBJECT TO UNCERTAINTY ABOUT THE MERITS OF THE TAX POSITION TAKEN OR THE AMOUNT OF THE POSITION THAT WOULD ULTIMATELY BE SUSTAINED. EXAMPLES OF TAX POSITIONS COMMON TO THE ORGANIZATION INCLUDE SUCH MATTERS AS THE TAX-EXEMPT STATUS OF THE ENTITY AND VARIOUS POSITIONS RELATIVE TO POTENTIAL SOURCES OF UBI. UBI IS REPORTED ON FORM 990-T, AS APPROPRIATE. THE BENEFIT OF TAX POSITION IS RECOGNIZED IN THE FINANCIAL STATEMENTS IN THE PERIOD DURING WHICH, BASED ON ALL AVAILABLE EVIDENCE, MANAGEMENT BELIEVES IT IS MORE LIKELY THAN NOT THAT THE POSITION WILL BE SUSTAINED UPON EXAMINATION, INCLUDING THE RESOLUTION OF APPEALS OR LITIGATION PROCESSES, IF ANY.

TAX POSITIONS ARE NOT OFFSET OR AGGREGATED WITH OTHER POSITIONS. TAX

POSITIONS THAT MEET THE MORE-LIKELY-THAN-NOT RECOGNITION THRESHOLD ARE

MEASURED AS THE LARGEST AMOUNT OF TAX BENEFIT THAT IS MORE THAN

50 PERCENT LIKELY TO BE REALIZED ON SETTLEMENT WITH THE APPLICABLE TAXING AUTHORITY. THE PORTION OF THE BENEFITS ASSOCIATED WITH TAX POSITIONS TAKEN THAT EXCEEDS THE AMOUNT MEASURED AS DESCRIBED ABOVE IS

REFLECTED AS A LIABILITY FOR UNRECOGNIZED TAX BENEFITS IN THE ACCOMPANYING STATEMENTS OF FINANCIAL POSITION, ALONG WITH ANY ASSOCIATED INTEREST AND PENALTIES THAT WOULD BE PAYABLE TO THE TAXING AUTHORITIES UPON

Schedule D (Form 990) 2012

| Schedule D (Form 990) 2012   SERVICES CORPORATION   33         | 5-039/000 Page 5 |
|--|------------------|
|  |                  |
| EXAMINATION. AS OF JUNE 30, 2013 AND 2012, THE ORGANIZATION HA | AS ADDRESSED     |
| UNCERTAINTY IN ITS INCOME TAX POSITION UNDER THE GUIDANCE, ANI | THERE ARE        |
| NO UNRECOGNIZED/DERECOGNIZED TAX BENEFITS REQUIRING AN ACCRUAL |                  |
|  |                  |
|  |                  |
| PART XI, LINE 2D - OTHER ADJUSTMENTS:                          |                  |
| RENT EXPENSES - NETTED TO REVENUE                              | 94,104.          |
| COST OF GOODS SOLD - NETTED TO REVENUE                         | 46,873.          |
| TOTAL TO SCHEDULE D, PART XI, LINE 2D                          | 140,977.         |
| 20212 20 20122020 27 11111 1127 2210 22                        |                  |
|  | <del></del>      |
| PART XII, LINE 2D - OTHER ADJUSTMENTS:                         |                  |
| COST OF GOODS SOLD - NETTED TO REVENUE                         | 46,873.          |
| RENT EXPENSE - NETTED TO REVENUE                               | 94,104.          |
| TOTAL TO SCHEDULE D, PART XII, LINE 2D                         | 140,977.         |
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#### SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States 2012

Department of the Treasury internal Revenue Service

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

Attach to Form 990.

Open to Public Inspection

| Name of the organization      | UNIVERSITY SERVICES (   |                    |                                       | EARCH                                   |   |  |  | Employer identification number 33-0397688 |
|-------------------------------|---|--------------------|---------------------------------------|---|---|--|--|---|
| Part I General Info           | ormation on Grants ar   |                    | <u> </u>                              |   |   |  |  | 33 0377000                                |
| 2 Describe in Part IV         | tion maintain records to<br>ard the grants or assis<br>the organization's pro | tance?             | *-*                                   |   |   |  |  |   |
| Part II Grants and            | Other Assistance to (   | Governments and    | l Organizations in th                 | e United States. C                      | complete if the org                     | anization answered "\  | Yes" to Form 990, Part                 | IV, line 21, for any                      |
| recipient tha                 | t received more than \$   | 5,000. Part II can | be duplicated if addit                | tional space is need                    | ded.                                    |  |  |   |
| 1 (a) Name and add<br>or gove | • ,   | <b>(b)</b> EIN     | (c) IRC section if applicable         | (d) Amount of cash grant                | (e) Amount of<br>non-cash<br>assistance | (f) Method of<br>valuation (book,<br>FMV, appraisal,<br>other) | (g) Description of non-cash assistance | (h) Purpose of grant<br>or assistance     |
|                               |   |                    |                                       | :                                       |   |  |  |   |
|                               |   |                    |                                       |   |   |  |  |   |
|                               | ***************************************                                       |                    |                                       |   |   |  |  |   |
|                               | ***************************************                                       |                    |                                       |   |   |  |  |   |
|                               |   |                    |                                       |   |   |  |  |   |
|                               |   |                    | · · · · · · · · · · · · · · · · · · · |   |   |  |  |   |
|                               |   |                    |                                       |   |   |  |  |   |
|                               | of section 501(c)(3) ar   |                    |                                       |   |   |  |  | <u> </u>                                  |
| 3 Enter total number          | of other organizations  |                    |                                       | *************************************** |   |  |  | Schedule I (Form 990) (2012               |

# UNIVERSITY AUXILIARY AND RESEARCH

SERVICES CORPORATION 33-0397688

Page 2 Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (e) Method of valuation (book, FMV, appraisal, other) (b) Number of (c) Amount of (d) Amount of non-(f) Description of non-cash assistance recipients cash grant cash assistance CAL STATE SAN MARCOS STUDENT SCHOLARSHIPS 81 94,662 O CASH VALUE Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information. SCHEDULE I, PART I, LINE 2: GRANTS GIVEN TO CSUSM ARE FOR STUDENT SCHOLARSHIPS AND THE UNIVERSITY MONITORS THE FUNDS GIVEN TO EACH STUDENT. THE FINANCIAL AID OFFICE OF THE UNIVERSITY QUALIFIES APPLICANTS FOR SCHOLARSHIPS BASED ON CRITERIA OVER WHICH UARSC HAS NO CONTROL. EXPENDITURES ON GRANTS AND CONTRACTS ARE CLOSELY MONITORED BY THE UARSC STAFF TO COMPLY WITH SPONSOR REQUIREMENTS.

Schedule I (Form 990) (2012)

#### SCHEDULE J (Form 990)

## **Compensation Information**

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

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

2012

Open to Public Inspection

Name of the organization

Department of the Treasury

internal Revenue Service

► Attach to Form 990. ► See separate instructions.
UNIVERSITY AUXILIARY AND RESEARCH

Employer identification number 33-0397688

SERVICES CORPORATION **Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 3 Indicate which, if any, of the following the filing organization 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 J Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? X 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) and 501(c)(4) organizations must complete lines 5-9. 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? X X b Any related organization? If "Yes" to line 5a or 5b, describe in Part III. 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? Х 6a X b Any related organization? If "Yes" to line 6a or 6b, describe in Part III. 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Х 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III X

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

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Schedule J (Form 990) 2012

Regulations section 53.4958-6(c)?

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

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

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

|                      |      | (B) Breakdown of         | W-2 and/or 1099-MI                        | SC compensation                           | (C) Retirement and             | (D) Nontaxable | (E) Total of columns |   |
|----------------------|------|--------------------------|---|---|--------------------------------|----------------|----------------------|---|
| (A) Name and Title   |      | (i) Base<br>compensation | (ii) Bonus &<br>incentive<br>compensation | (iii) Other<br>reportable<br>compensation | other deferred<br>compensation | benefits       | (B)(i)-(D)           | reported as deferred<br>in prior Form 990 |
| (1) LINDA HAWK       | (i)  | 0.                       | 0.  | 0.  | 0.                             | 0.             | 0.                   | 0.  |
| DIRECTOR             | (ii) | 192,138.                 | 0.  | 0.  | 36,758.                        | 14,247.        | 243,143.             | 0.  |
| (2) GRAHAM OBEREM    | (i)  | 0.                       | 0.  | 0.  | 0.                             | 0.             | 0.                   | 0.  |
| DIRECTOR             | (ii) | 146,326.                 | 0.  | 0.  | 27,929.                        | 14,277.        | 188,532.             | 0.  |
| (3) MATTHEW J. CEPPI | (i)  | 0.                       | 0.  | 0.  | 0.                             | 0.             | 0.                   | 0.  |
| DIRECTOR             | (ii) | 159,078.                 | 0.  | 0.  | 30,445.                        | 7,440.         | 196,963.             | 0.  |
| (4) DORA KNOBLOCK    | (i)  | 0.                       | 0.  | 0.  | 0.                             | 0.             | 0.                   | 0.  |
| SECRETARY            | (ii) | 125,262.                 | 0.  | 0.  | 23,932.                        | 18,980.        | 168,174.             | 0.  |
| (5) GREG SVATORA     | (i)  | 145,351.                 | 0.  | 0.  | 0.                             | 21,802.        | 167,153.             | 0.  |
| TREASURER/CFO        | (ii) | 0.                       | 0.  | 0.  | 0.                             | 0.             | 0.                   | 0.  |
|                      | (i)  |                          |   |   |                                |                |                      |   |
|                      | (ii) |                          |   |   |                                |                |                      |   |
|                      | (i)  |                          |   |   |                                |                |                      |   |
|                      | (ii) |                          |   |   |                                |                |                      |   |
|                      | (i)  |                          |   |   |                                |                |                      |   |
|                      | (ii) |                          |   |   |                                |                |                      |   |
| -                    | (i)  |                          |   |   |                                |                |                      |   |
|                      | (ii) |                          |   |   |                                |                |                      |   |
|                      | (i)  |                          |   |   |                                |                |                      |   |
|                      | (ii) |                          |   |   |                                |                |                      |   |
|                      | (i)  |                          |   |   |                                |                |                      |   |
|                      | (ii) |                          |   |   |                                |                |                      |   |
|                      | (i)  |                          |   |   |                                |                |                      |   |
|                      | (ii) |                          |   |   |                                |                |                      |   |
| -                    | (i)  |                          |   |   |                                |                |                      |   |
|                      | (ii) |                          |   |   |                                |                |                      |   |
|                      | (i)  |                          |   |   |                                |                |                      |   |
|                      | (ii) |                          |   |   |                                |                |                      |   |
|                      | (i)  |                          |   |   |                                |                |                      |   |
|                      | (ii) |                          |   |   |                                |                |                      |   |
| -                    | (i)  |                          |   |   |                                |                |                      |   |
|                      | (ii) |                          |   |   |                                |                |                      |   |

Schedule J (Form 990) 2012

| Schedule J (Form 990) 2012 SERVICES CORPORATION  | 33-0397688   | Page 3     |
|--|--|------------|
| Part III Supplemental Information  |  |            |
| Complete this part to provide the information, explanation, or descriptions required for additional information.   | Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this par | rt for any |
| auditional situation.  |  |            |
|  |  |            |
| PART I, LINE 3:  |  |            |
|  |  |            |
| THE OFFICERS LISTED ON SCHEDULE J ARE EMPLO  | עספס אס שטס סטואשטיי   |            |
| THE OFFICERO DISTED ON SCHEDOLE O ARE EMPLO  | OBER OF THE REMAIND  |            |
| ORGANIZATION, CALIFORNIA STATE UNIVERSITY S  | AN MARCOS. THE RELATED   |            |
| ORGANIZATION HAS POLICIES IN PLACE WHICH AR  | E USED TO DETERMINE  |            |
| COMPENSATION. THROUGH THE RELATED ORGANIZA   | TION'S EXECUTIVE COMPENSATION  |            |
| COMMITTEE - WHICH IS COMPRISED OF THE UNIVE  | RSITY PRESIDENT WHO SERVES AS AN   |            |
| EX-OFFICIO MEMBER OF THE BOARD - COMPENSATI  | ON FOR THE ORGANIZATION'S  |            |
| OFFICERS IS REVIEWED ON AN ANNUAL BASIS. TH  | IE REVIEW OF CURRENT SALARY  |            |
| LEVELS FOR EACH EXECUTIVE EMPLOYEE IS PERFO  | ORMED BY ANALYZING EXECUTIVE   |            |
| COMPENSATION OF OTHER SIMILAR AUXILIARY ORG  | SANIZATIONS WITHIN THE CALIFORNIA  |            |
| STATE UNIVERSITY SYSTEM, AS WELL AS SURVEYS  | S OF OTHER NON-PROFIT CHARITABLE   |            |
| ORGANIZATIONS OF SIMILAR ASSET SIZE AND FUN  | ICTIONS. THE EXECUTIVE   |            |
| COMPENSATION COMMITTEE THEN RECOMMENDS THE   | APPROPRIATE SALARY LEVELS TO THE   |            |
| ORGANIZATION'S BOARD OF DIRECTORS FOR APPRO  |  |            |
| The state of the s |  |            |
|  |  |            |
|  |  |            |

#### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

UNIVERSITY AUXILIARY AND RESEARCH SERVICES CORPORATION

Employer identification number 33-0397688

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE UNIVERSITY AUXILIARY AND RESEARCH SERVICES CORPORATION IS A

NON-PROFIT TAX EXEMPT ORGANIZATION ESTABLISHED TO PROVIDE

ADMINISTRATIVE AND OTHER BUSINESS SERVICES TO CALIFORNIA STATE

UNIVERSITY SAN MARCOS. SERVICES INCLUDE THE ADMINISTRATION OF RESEARCH

AND TRAINING GRANT AWARDS TO CAMPUS FACULTY, AND OPERATION OF VARIOUS

CAMPUS COMMERCIAL OPERATIONS INCLUDING THE BOOKSTORE AND FOOD SERVICES.

OTHER SERVICES PROVIDED INCLUDE FINANCIAL MANAGEMENT SUPPORT TO OTHER

CAMPUS ENTITIES AND PROGRAMS SUCH AS THE PHILANTHROPIC FOUNDATION,

STUDENT HOUSING, STUDENT GOVERNMENT, AND OTHER ACTIVITIES THAT FALL

WITHIN THE MISSION OF THE UNIVERSITY.

FORM 990, PART VI, SECTION B, LINE 11: AN ELECTRONIC FORM OF THE 990 IS

EMAILED TO EACH BOARD MEMBER FOR REVIEW PRIOR TO FILING. THE FORM 990 IS

ALSO REVIEWED BY THE EXECUTIVE DIRECTOR PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: AT THE BEGINNING OF EACH FISCAL
YEAR ALL MEMBERS OF THE AUXILIARY'S BOARD OF DIRECTORS ARE REQUIRED TO SIGN
A CONFLICT OF INTEREST STATEMENT. THIS POLICY ALSO APPLIES TO ALL DIRECTOR
LEVEL POSITIONS, INCLUDING THE EXECUTIVE DIRECTOR, AND ALL OTHER POSITIONS
THAT HAVE SIGNIFICANT EXPOSURE AND/OR DECISION MAKING AUTHORITY TO WARRANT
REGULAR MONITORING OF THE CONFLICT OF INTEREST ACTIVITIES.

FORM 990, PART VI, SECTION B, LINE 15: THROUGH THE ORGANIZATION'S

EXECUTIVE COMPENSATION COMMITTEE - WHICH IS COMPRISED OF THE UNIVERSITY

PRESIDENT WHO SERVES AS AN EX-OFFICIO MEMBER OF THE BOARD - COMPENSATION

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2012)

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| Schedule O (Form 990 or 990 EZ) (2012)  | Page 2                                    |
|---|---|
| Name of the organization UNIVERSITY AUXILIARY AND RESEARCH SERVICES CORPORATION | Employer identification number 33-0397688 |
| FOR THE ORGANIZATION'S OFFICERS IS REVIEWED ON AN ANNUAL                        | BASIS. THE REVIEW                         |
| OF CURRENT SALARY LEVELS FOR EACH EXECUTIVE EMPLOYEE IS P                       | ERFORMED BY                               |
| ANALYZING EXECUTIVE COMPENSATION OF OTHER SIMILAR AUXILIA                       | RY ORGANIZATIONS                          |
| WITHIN THE CALIFORNIA STATE UNIVERSITY SYSTEM, AS WELL AS                       | SURVEYS OF OTHER                          |
| NON-PROFIT CHARITABLE ORGANIZATIONS OF SIMILAR ASSET SIZE                       | AND FUNCTIONS.                            |
| THE EXECUTIVE COMPENSATION COMMITTEE THEN RECOMMENDS THE                        | APPROPRIATE SALARY                        |
| LEVELS TO THE ORGANIZATION'S BOARD OF DIRECTORS FOR APPRO                       | VAL.                                      |
|   |   |
| FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCU                       | MENTS, CONFLICT                           |
| OF INTEREST POLICY, FINANCIAL STATEMENTS, AND FORMS 990 (                       | FROM THE PREVIOUS                         |
| THREE YEARS) ARE AVAILABLE FOR INSPECTION OR COPYING AT T                       | HE ORGANIZATION'S                         |
| MAIN OFFICE DURING NORMAL BUSINESS HOURS WITHOUT INQUIRIN                       | IG AS TO THE REASON                       |
| FOR THE PUBLIC INSPECTION REQUEST.  |   |
|   |   |
| FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:                               |   |
| TRANSFER OF NET ASSETS TO RELATED ORG - CAL STATE                               |   |
| UNIVERSITY SAN MARCOS   | -859,979.                                 |
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#### SCHEDULE R (Form 990)

Part I

Department of the Treasury internal Revenue Service

## **Related Organizations and Unrelated Partnerships**

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

► See separate instructions.

OMB No. 1545-0047 2012 Open to Public Inspection

Name of the organization

UNIVERSITY AUXILIARY AND RESEARCH SERVICES CORPORATION

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

Employer identification number 33-0397688

| (a)  | (b)   | (c)  | (d)                           | (e)   |  | (f)                 |                 |  |
|--|---|--|-------------------------------|---|--|---------------------|-----------------|--|
| Name, address, and EiN (if applicable) of disregarded entity   | Primary activity  | Legal domicile (state of foreign country)                                  | or Total inco                 | 1   | r assets Direct c  | ontrolling<br>ntity | 3               |  |
|  |   |  |                               |   |  |                     |                 |  |
|  |   |  |                               |   |  |                     |                 |  |
|  |   |  |                               |   |  |                     |                 |  |
|  |   |  |                               |   |  |                     |                 |  |
|  |   |  |                               |   |  |                     |                 |  |
| Part II Identification of Related Tax-Exempt Organizations during the tax year.)   | ations (Complete if the organization  | answered "Yes" to Form 990   | ), Part IV, line 34 b         | ecause it had one   | Ţ · · · · · · · · · · · · · · · · · · ·  | npt                 |                 |  |
|  | ations (Complete if the organization  (b)  Primary activity   | answered "Yes" to Form 990  (c)  Legal domicile (state or foreign country) | (d) Exempt Code section       | (e) Public charity status (if section                               | (f) Direct controlling   | Section cont        | rolled<br>tity? |  |
| (a)  Name, address, and EIN  of related organization   | (b) Primary activity  | (c) Legal domicile (state or   | (d)<br>Exempt Code            | (e)<br>Public charity   | (f) Direct controlling entity  | Section cont        | rolled<br>tity? |  |
| (a)  Name, address, and EIN  of related organization  CALIFORNIA STATE UNIVERSITY SAN MARCOS -   | (b) Primary activity  CALIFORNIA STATE  | (c) Legal domicile (state or   | (d)<br>Exempt Code            | (e) Public charity status (if section                               | (f) Direct controlling entity TRUSTEES OF  | Section cont        | rolled          |  |
| organizations during the tax year.)  (a)  Name, address, and EIN  of related organization  CALIFORNIA STATE UNIVERSITY SAN MARCOS -  33-0535371, 333 S. TWIN OAKS VALLEY ROAD,   | (b) Primary activity  CALIFORNIA STATE UNIVERSITY - HIGHER  | (c) Legal domicile (state or foreign country)                              | (d)<br>Exempt Code<br>section | (e) Public charity status (if section 501(c)(3))                    | (f) Direct controlling entity TRUSTEES OF CALIFORNIA STATE   | Section cont        | rolled<br>tity? |  |
| organizations during the tax year.)  (a)  Name, address, and EIN  of related organization  CALIFORNIA STATE UNIVERSITY SAN MARCOS -  33-0535371, 333 S. TWIN OAKS VALLEY ROAD,  SAN MARCOS, CA 92096   | (b) Primary activity  CALIFORNIA STATE  | (c) Legal domicile (state or   | (d)<br>Exempt Code            | (e) Public charity status (if section                               | (f) Direct controlling entity TRUSTEES OF CALIFORNIA STATE UNIVERSITY  | Section cont        | rolled<br>tity? |  |
| (a) Name, address, and EIN of related organization  CALIFORNIA STATE UNIVERSITY SAN MARCOS - 33-0535371, 333 S. TWIN OAKS VALLEY ROAD, SAN MARCOS, CA 92096 SAN MARCOS UNIVERSITY CORPORATION -  | (b) Primary activity  CALIFORNIA STATE UNIVERSITY - HIGHER EDUCATIONAL INSTITUTION  | (c) Legal domicile (state or foreign country)                              | (d)<br>Exempt Code<br>section | (e) Public charity status (if section 501(c)(3))                    | (f) Direct controlling entity  TRUSTEES OF CALIFORNIA STATE UNIVERSITY  TRUSTEES OF  | Section cont        | rolled<br>tity? |  |
| (a) Name, address, and EIN of related organization  CALIFORNIA STATE UNIVERSITY SAN MARCOS - 33-0535371, 333 s. TWIN OAKS VALLEY ROAD, SAN MARCOS, CA 92096 SAN MARCOS UNIVERSITY CORPORATION - 33-0971982, 333 s. TWIN OAKS VALLEY RD., SAN   | (b) Primary activity  CALIFORNIA STATE UNIVERSITY - HIGHER EDUCATIONAL INSTITUTION ON-CAMPUS PROGRAM                                  | (c) Legal domicile (state or foreign country)  CALIFORNIA                  | (d)<br>Exempt Code<br>section | (e) Public charity status (if section 501(c)(3))  GOVERNMENT        | (f) Direct controlling entity  TRUSTEES OF CALIFORNIA STATE UNIVERSITY TRUSTEES OF CALIFORNIA STATE  | Section cont        | No              |  |
| (a) Name, address, and EIN of related organization  CALIFORNIA STATE UNIVERSITY SAN MARCOS - 33-0535371, 333 S. TWIN OAKS VALLEY ROAD, SAN MARCOS, CA 92096 SAN MARCOS UNIVERSITY CORPORATION - 33-0971982, 333 S. TWIN OAKS VALLEY RD., SAN MARCOS, CA 92096  | (b) Primary activity  CALIFORNIA STATE UNIVERSITY - HIGHER EDUCATIONAL INSTITUTION  | (c) Legal domicile (state or foreign country)                              | (d)<br>Exempt Code<br>section | (e) Public charity status (if section 501(c)(3))                    | (f) Direct controlling entity  TRUSTEES OF CALIFORNIA STATE UNIVERSITY  TRUSTEES OF  | Section cont        | rolled<br>tity? |  |
| (a) Name, address, and EIN of related organization  CALIFORNIA STATE UNIVERSITY SAN MARCOS - 33-0535371, 333 S. TWIN OAKS VALLEY ROAD, SAN MARCOS, CA 92096 SAN MARCOS UNIVERSITY CORPORATION - 33-0971982, 333 S. TWIN OAKS VALLEY RD., SAN MARCOS, CA 92096 ASSOCIATED STUDENTS, INC CALIFORNIA STATE  | (b) Primary activity  CALIFORNIA STATE UNIVERSITY - HIGHER EDUCATIONAL INSTITUTION  ON-CAMPUS PROGRAM MANAGEMENT                      | (c) Legal domicile (state or foreign country)  CALIFORNIA                  | (d)<br>Exempt Code<br>section | (e) Public charity status (if section 501(c)(3))  GOVERNMENT        | (f) Direct controlling entity  TRUSTEES OF CALIFORNIA STATE UNIVERSITY TRUSTEES OF CALIFORNIA STATE UNIVERSITY   | Section cont        | No              |  |
| (a)  Name, address, and EIN of related organization  CALIFORNIA STATE UNIVERSITY SAN MARCOS - 33-0535371, 333 S. TWIN OAKS VALLEY ROAD, SAN MARCOS, CA 92096 SAN MARCOS UNIVERSITY CORPORATION - 33-0971982, 333 S. TWIN OAKS VALLEY RD., SAN MARCOS, CA 92096 ASSOCIATED STUDENTS, INC CALIFORNIA STATE UNIVERSITY SAN MARCOS - 33-0556915, 333 S.  | (b) Primary activity  CALIFORNIA STATE UNIVERSITY - HIGHER EDUCATIONAL INSTITUTION  ON-CAMPUS PROGRAM MANAGEMENT  STUDENT LEADERSHIP, | (c) Legal domicile (state or foreign country)  CALIFORNIA  CALIFORNIA      | (d) Exempt Code section  115  | (e) Public charity status (if section 501(c)(3))  GOVERNMENT        | (f) Direct controlling entity  TRUSTEES OF CALIFORNIA STATE UNIVERSITY TRUSTEES OF CALIFORNIA STATE UNIVERSITY TRUSTEES OF                             | Section cont        | No              |  |
| (a)  Name, address, and EIN of related organization  CALIFORNIA STATE UNIVERSITY SAN MARCOS - 33-0535371, 333 S. TWIN OAKS VALLEY ROAD, SAN MARCOS, CA 92096 SAN MARCOS UNIVERSITY CORPORATION - 33-0971982, 333 S. TWIN OAKS VALLEY RD., SAN MARCOS, CA 92096 ASSOCIATED STUDENTS, INC CALIFORNIA STATE UNIVERSITY SAN MARCOS - 33-0556915, 333 S. TWIN OAKS VALLEY RD., SAN MARCOS, CA 92096 | (b) Primary activity  CALIFORNIA STATE UNIVERSITY - HIGHER EDUCATIONAL INSTITUTION  ON-CAMPUS PROGRAM MANAGEMENT                      | (c) Legal domicile (state or foreign country)  CALIFORNIA                  | (d)<br>Exempt Code<br>section | (e) Public charity status (if section 501(c)(3))  SOVERNMENT LINE 5 | (f) Direct controlling entity  TRUSTEES OF CALIFORNIA STATE UNIVERSITY TRUSTEES OF CALIFORNIA STATE UNIVERSITY TRUSTEES OF CALIFORNIA STATE            | Section cont        | No X            |  |
| organizations during the tax year.)  (a)  Name, address, and EIN of related organization  CALIFORNIA STATE UNIVERSITY SAN MARCOS - 33-0535371, 333 s. TWIN OAKS VALLEY ROAD, SAN MARCOS, CA 92096  SAN MARCOS UNIVERSITY CORPORATION - 33-0971982, 333 s. TWIN OAKS VALLEY RD., SAN MARCOS, CA 92096  ASSOCIATED STUDENTS, INC CALIFORNIA STATE UNIVERSITY SAN MARCOS - 33-0556915, 333 s.     | (b) Primary activity  CALIFORNIA STATE UNIVERSITY - HIGHER EDUCATIONAL INSTITUTION  ON-CAMPUS PROGRAM MANAGEMENT  STUDENT LEADERSHIP, | (c) Legal domicile (state or foreign country)  CALIFORNIA  CALIFORNIA      | (d) Exempt Code section  115  | (e) Public charity status (if section 501(c)(3))  SOVERNMENT LINE 5 | (f) Direct controlling entity  TRUSTEES OF CALIFORNIA STATE UNIVERSITY TRUSTEES OF CALIFORNIA STATE UNIVERSITY TRUSTEES OF CALIFORNIA STATE UNIVERSITY | Section cont        | No X            |  |

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

Schedule R (Form 990) 2012

Schedule R (Form 990) 2012

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

| (a)  | (b)              | (c)                                       | (d)                       | (e)  | (f) | (g)                     | (        | h)                   | (i)  | (j)    | (k)                    |
|--|------------------|---|---------------------------|--|-----|-------------------------|----------|----------------------|--|--------|------------------------|
| Name, address, and EIN of related organization | Primary activity | Legal<br>domicile<br>(state or<br>foreign | Direct controlling entity | ct controlling Predominant income Share of |     | Shara of total Shara of |          | portion-<br>cations? | Code V-UBI Gene<br>amount in box man<br>20 of Schedule |        | Percentag<br>ownership |
|  |                  | country)                                  |                           | sections 512-514)                          |     | 833613                  | Yes      | No                   | 1  | Yes No |                        |
|  |                  |   |                           |  |     |                         |          |                      |  |        | }                      |
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

| (a) Name, address, and EIN of related organization | <b>(b)</b><br>Primary activity | (c) (d)  Legal domicile (state or foreign entity (C c |          | (e) Type of entity (C corp, S corp, or trust) | (f)<br>Share of total<br>income | (g) Share of end-of-year assets | (h)<br>Percentage<br>ownership | (i<br>Sec<br>512(t<br>contr<br>enti | tion<br>b)(13)<br>rolled<br>tity? |
|--|--------------------------------|---|----------|---|---------------------------------|---------------------------------|--------------------------------|-------------------------------------|-----------------------------------|
|  |                                | country)  | country) |   |                                 | 455615                          |                                | Yes                                 | No                                |
|  |                                |   |          |   |                                 |                                 |                                |                                     |                                   |
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|  |                                | 3/  |          |   |                                 | <u> </u>                        | - 1-1- D (F                    |                                     |                                   |

Schedule R (Form 990) 2012

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

| Not   | ote. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.            |      | · · · · · · · · · · · · · · · · · · · |       |                             |            | Yes      | No |
|---|---|------|---------------------------------------|-------|-----------------------------|------------|----------|----|
| 1   | During the tax year, did the organization engage in any of the following transactions with one or |      |                                       |       |                             | 11.75      |          |    |
| а   | Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity      |      |                                       |       |                             | 1a         |          | Х  |
| b   | Gift, grant, or capital contribution to related organization(s)                                   |      |                                       |       |                             | 1b         | X        |    |
| С   | Gift, grant, or capital contribution from related organization(s)                                 |      |                                       |       |                             | 1c         | X        |    |
| đ   | Loans or loan guarantees to or for related organization(s)  |      |                                       |       |                             | 1d         |          | X  |
| е   | Loans or loan guarantees by related organization(s)   |      |                                       |       |                             | 1e         |          | Х  |
|   |   |      |                                       | ,     |                             | 1.754      |          |    |
| f   | Dividends from related organization(s)  |      |                                       |       |                             | 1f         |          | X  |
| g   | Sale of assets to related organization(s)   |      |                                       |       |                             | 1g         |          | X  |
| h   | Purchase of assets from related organization(s)   |      |                                       |       |                             | 1h         |          | X  |
| Ī   | Exchange of assets with related organization(s)   |      |                                       |       |                             | 1i         |          | Х  |
| j   | Lease of facilities, equipment, or other assets to related organization(s)                        |      |                                       |       |                             | 1j         | Х        |    |
|   |   |      |                                       |       |                             |            |          |    |
| k   | Lease of facilities, equipment, or other assets from related organization(s)                      |      |                                       |       |                             | 1k         |          | Х  |
| I   | Performance of services or membership or fundraising solicitations for related organization(s)    |      |                                       |       |                             | 11         | Х        |    |
| n   | n Performance of services or membership or fundraising solicitations by related organization(s)   |      |                                       |       |                             | 1m         |          | X  |
| n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) |   |      |                                       |       |                             |            |          | X  |
| o Sharing of paid employees with related organization(s)  |   |      |                                       |       |                             |            |          | X  |
|   |   |      |                                       |       |                             |            |          |    |
| р   | Reimbursement paid to related organization(s) for expenses  |      |                                       |       |                             | 1p         | X        |    |
| q   | Reimbursement paid by related organization(s) for expenses  |      |                                       |       |                             | 1q         | Х        |    |
|   |   |      |                                       |       |                             |            |          |    |
| r   | Other transfer of cash or property to related organization(s)                                     |      |                                       |       |                             | 1r         | <u> </u> | X  |
| ş   | Other transfer of cash or property from related organization(s)                                   |      |                                       |       |                             | 1s         |          | X  |
|   | If the answer to any of the above is "Yes," see the instructions for information on who must cor  |      |                                       |       |                             |            |          |    |
|   | (a) (b)   |      | (c)                                   |       | (d)                         |            |          |    |
|   | Name of other organization Transac  | tion | Amount involved                       |       | Method of determining amoun | t involved |          |    |
|   | type (a   | 3-S) |                                       |       |                             |            |          |    |
|   |   |      |                                       |       |                             |            |          |    |
| 1) (  | CALIFORNIA STATE UNIVERSITY SAN MARCOS J  |      | 145,680.                              | CASH  | VALUE                       |            |          |    |
|   |   |      | 4 500 650                             |       |                             |            |          |    |
| 2) (  | CALIFORNIA STATE UNIVERSITY SAN MARCOS P  |      | 4,732,659.                            | CASH  | VALUE                       |            |          |    |
| ·   | CALIFORNIA STATE UNIVERSITY SAN MARCOS Q  |      | 719,197.                              | CACH  | יייי דעני                   |            |          |    |
| 3)  | CABIFORNIA STATE ONIVERSITI SAN MARCOS Q  |      | 117,171.                              | CASII | VALUE                       |            |          |    |
| 4)  |   |      |                                       |       |                             |            |          |    |
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| 5)  |   |      |                                       |       |                             |            |          |    |
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| 6)  |   |      |                                       |       |                             |            |          |    |

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

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

| (a)                    | (b)              | (c)               | (d)   | (e)<br>Are all<br>partners se<br>501 (c)(3)<br>orgs.? | (f)      | (g)         | (h)     | (i)  | (j)                   | (k)        |
|------------------------|------------------|-------------------|---|---|----------|-------------|---------|--|-----------------------|------------|
| Name, address, and EIN | Primary activity | Legal domicile    | Predominant income<br>(related, unrelated,<br>excluded from tax<br>under section 512-514) | Are all<br>partners se                                | Share of | Share of    | Disprop | code V-UBI<br>amount in box 2<br>of Schedule K-<br>(Form 1065) | General d             | Percentage |
| of entity              | -                | (state or foreign | (related, unrelated,  | 501(c)(3)   | total    | end-of-year | tionat  | amount in box 2  | Olmanagin<br>Dartner? | ownership  |
| ·                      |                  | country)          | under section 512-514)  | Van Ni  | income   | assets      | Yes     | (Form 1065)  | Yes No                | 1          |
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## UNIVERSITY AUXILIARY AND RESEARCH

| Schedule R                              | (Form 990) 2012            | SERVICES   | CORPORATION  | 33-0397688 Page 5 |
|---|----------------------------|--|--|-------------------|
| Part VII                                | Supplemental Infor         | mation   |  | T ago o           |
| <u> </u>                                | Complete this part to pro- | vide additional info   | rmation for responses to questions on Schedule R (see instru | ctions).          |
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# **ATTACHMENT D**

Delegation of Authority Policy Signature Authority Page Revision



#### **DELEGATION OF AUTHORITY**

#### **Background and Purpose**

The University Auxiliary and Research Services Corporation is engaged in a variety of transactions that require prudent control over the authorization to execute documents that obligate the Corporation or which otherwise confirm financial or contractual transactions.

This statement lists the document types and corresponding signatories required thereon to authorize the transaction associated with each type of document.

#### Policy

The Executive Director is authorized to establish written management guidelines consistent with and in implementation of this policy statement, including delegation of authority granted through this policy.

Those with delegated authority may re-delegate in writing to officers, employees or agents of the Corporation, with the approval of the Executive Director and the Board Chairman.

Attached is a description of document types and corresponding authorized signatures.

The undersigned Secretary hereby certifies that the foregoing is a full, true and correct copy of the policy of the Board of Directors of the University Auxiliary and Research Services Corporation duly made at a regular Board meeting on March 26, 2009.

Dora Knoblock, Socretary

03-26.09

Policy Revision Dates: 03/26/09 Issue Date: 10/18/01

Delegation of Authority Policy and Signature Authority

Page 1 of 2

|   | Account Transactions  |  |
|---|---|--|
|   | Bank and Investment Account Transfers, Withdrawals, Deposits  | Grant Hubbard  |
|   | Two signatures required on transfers/withdrawals  | <del>Dora Knoblock</del> <u>Bella Newberg</u>                |
|   |   | Greg Svatora   |
|   | Contractual Documents   |  |
|   | Agreements or contracts, including property conveyances, service agreements, leases, licenses in the ordinary course of | Grant Hubbard  |
|   | business of UARSC   | <del>Dora Knoblock</del> Bella Newberg                       |
|   |   | Greg Svatora   |
|   | Expenditure Request/Authorization   |  |
|   | Procurement documentation, including check requests, requisitions, purchase orders in the ordinary course of            | Deborah Davis  |
|   | business of UARSC   | Grant Hubbard  |
|   |   | <del>Dora Knoblock</del> Bella Newberg                       |
| - |   | Greg Svatora   |
|   |   | Michelle Hinojosa  |
|   | Under \$500   | Jan Cushman  |
|   | Under \$1,000   | Annemarie Broderson  |
|   | Under \$1,000   | Erin Lane  |
| - | Under \$1,000   | Patti Kastner  |
|   | Under \$1,000   | Michelle Meeks   |
| ŀ | Negotiable Instruments – Under \$5,000  |  |
|   | Commercial checks, sight drafts, other negotiable instruments   | Deborah Davis  |
|   |   | Michelle Hinojosa  |
|   | *   | Grant Hubbard  |
|   |   | <del>Dora Knoblock Bella Newberg</del>                       |
|   |   | Greg Svatora   |
| - | Negotiable Instruments – More than \$5,000  |  |
|   | Commercial checks, sight drafts, other negotiable instruments   | Deborah Davis  |
|   | Two signatures required on checks over \$5,000  | Michelle Hinojosa  |
|   |   | Grant Hubbard  |
|   |   | <del>Dora Knoblock</del> <u>Bella Newberg</u>                |
|   | Other   | Greg Svatora   |
| - | Any transactions outside the ordinary course of business of UAR   | SC will be presented to the Finance and Operations Committee |
|   | for review and determination of whether Board action is require   |  |

# **ATTACHMENT E**

New Delegation of Authority Policy Effective 07/01/14



#### **DELEGATION OF AUTHORITY**

#### **Background and Purpose**

The University Auxiliary and Research Services Corporation is engaged in a variety of transactions that require prudent control over the authorization to execute documents that obligate the Corporation or which otherwise confirm financial or contractual transactions.

This statement lists the document types and corresponding signatories required thereon to authorize the transaction associated with each type of document.

#### **Policy**

The Executive Director is authorized to establish written management guidelines consistent with and in implementation of this policy statement, including delegation of authority granted through this policy.

Those with delegated authority may re-delegate in writing to officers, employees or agents of the Corporation, with approval of the Executive Director and the Board Chairman.

Attached is a description of document types and corresponding authorized signatures.

|                          | regoing is a full, true and correct copy of the policy of the arch Services Corporation duly made at a regular Board |
|--------------------------|--|
| Bella Newberg, Secretary | Date   |

Policy Revision Dates: 03/26/09; 06/10/14 (effective 07/01/14)

Issue Date: 10/18/01

| Banking and Investment Transactions  |                                |                     |  |  |  |  |  |
|--|--------------------------------|---------------------|--|--|--|--|--|
| Open or Close Bank Accounts  |                                | Clint Roberts       |  |  |  |  |  |
| Transfers Between Bank Accounts Wire Transfers, Withdraw Requests  |                                | Deborah Davis       |  |  |  |  |  |
| Deposits   | Wire Transfer Request Only     | Annemarie Broderson |  |  |  |  |  |
|  | Wire Transfer Request Only     | Barbara Cervantes   |  |  |  |  |  |
|  | A/P Wire Transfer Request Only | Mercedes Wilson     |  |  |  |  |  |
| K  | A/P Wire Transfer Request Only | Kristine Roberts    |  |  |  |  |  |
| Dual Approval Requied on all Account Op<br>Dual Approval Requied on all Transfers/   |                                |                     |  |  |  |  |  |
| Contractual Documents  |                                |                     |  |  |  |  |  |
| Agreements or contracts, including prope   |                                | Bella Newberg       |  |  |  |  |  |
| service agreements, leases, MOU's with c<br>in the ordinary course of business   | ampus, licenses                | Greg Svatora        |  |  |  |  |  |
|  |                                | Grant Hubbard       |  |  |  |  |  |
| Project Agreements - Campus Programs   |                                |                     |  |  |  |  |  |
| UARSC Project Agreements related to Car  | npus Program                   | Bella Newberg       |  |  |  |  |  |
| activities administered by UARSC   |                                | Greg Svatora        |  |  |  |  |  |
|  |                                | Deborah Davis       |  |  |  |  |  |
|  |                                | Annemarie Broderson |  |  |  |  |  |
|  |                                | Barbara Cervantes   |  |  |  |  |  |
|  |                                | Dal Jola Cervantes  |  |  |  |  |  |
| Project Agreements - Sponsored Projects  |                                |                     |  |  |  |  |  |
| UARSC Project Agreements related to Gra  | nts and Contracts              | Bella Newberg       |  |  |  |  |  |
| activities administered by UARSC   |                                | Grant Hubbard       |  |  |  |  |  |
|  |                                | Jan Cushman         |  |  |  |  |  |
|  |                                | Patti Kastner       |  |  |  |  |  |
|  |                                | Deborah Davis       |  |  |  |  |  |
|  |                                |                     |  |  |  |  |  |
| xpenditure Request/Authorization - Spons   | ored Projects                  |                     |  |  |  |  |  |
| Procurement documentation, including ch<br>requisitions, purchase orders.  | eck requests,                  | Bella Newberg       |  |  |  |  |  |
| Any Dollar Amount  |                                | Grant Hubbard       |  |  |  |  |  |
|  |                                | Greg Svatora        |  |  |  |  |  |
| Description to the state of the |                                | 1-8-1               |  |  |  |  |  |
| Procurement documentation, including ch requisitions, purchase orders.   | eck requests,                  | Jan Cushman         |  |  |  |  |  |
| Amounts under \$1,000  |                                | Michelle Meeks      |  |  |  |  |  |
|  |                                | Patti Kastner       |  |  |  |  |  |
| egotiable Instruments  |                                |                     |  |  |  |  |  |
| Commercial checks, sight drafts, other neg   | otiable instruments            | Linda Hawk          |  |  |  |  |  |
| 2 signatures required on check   | s over \$5,000                 | Mary Hinchman       |  |  |  |  |  |
|  |                                | Clint Roberts       |  |  |  |  |  |
|  |                                | Nancy Suarez        |  |  |  |  |  |
|  |                                | Greg Svatora        |  |  |  |  |  |

# **ATTACHMENT F**

**Procurement Policy Revision** 



(tracked changes)

#### PROCUREMENT POLICY

This policy applies to purchase of materials, equipment, supplies, and services paid from University Auxiliary and Research Services Corporation (UARSC) administered funding sources. This policy blends efficient business practices and governing policies which satisfy the requirements of federal, state and independent auditors. Travel, retention of artists, entertainers, catering and speakers are not subject to the provisions of this policy.

#### **Policy**

All Purchase Orders must be approved by UARSC prior to commitment; accordingly, a Purchase Order form must be submitted to UARSC prior to making purchases within the guidelines of this policy and procedure.

- A. Purchases shall be made in a manner that supports and facilitates the competitive bidding process and at the lowest cost consistent with quality, specifications, service and product availability.
- B. Projects which receive external funds for support may be subject to additional agency restrictions and/or Federal Office of Management and Budget Circular No. A-110.
- C. Fitness and quality being equal, recycled products shall be considered for procurement in place of non-recycled products, whenever such products are available at not more than the cost of their non-recycle counterparts.
- D. Volume or pool purchase, annual purchase agreements and State Purchasing contracts shall be utilized when deemed to be advantageous to UARSC.

#### **Purchase Order Request Process**

A. Purchasing materials, equipment and supplies from one vendor with a total cost (excluding shipping, handling, tax and freight) that exceeds \$200 should be processed using the UARSC Purchase Order Request form. When purchasing materials, equipment and supplies from a vendor through UARSC, the UARSC Purchase Order is used.

Procurement Policy Page 1 of 3

B.A. Once the goods have been identified, the purchase should be evaluated to determine if competitive bids are required\*

#### Guidelines for purchase of Materials, Equipment and Supplies:

Materials, Equipment and Supplies under \$10,000

The authorized signer is required to submit a purchase order and a price quotation from the vendor.

\*Materials, Equipment and Supplies over \$10,000

The authorized signer is required to submit a purchase order with a minimum of three price quotations attached from vendors.

\*Materials, Equipment and Supplies over \$50,000

The authorized signer is required to submit a purchase order with three formal bids from providers based on written specifications, which recognize competitive pricing, responsiveness to specifications, and reputation of vendors.

Guidelines for purchase of Services:

\*Services over \$50,000

The authorized signer is required to submit a purchase order and/or contract with a minimum of three bids from providers based on written specifications, which recognize competitive pricing, responsiveness to specifications, and reputation of vendors.

#### \*Excluded from the Competitive Bid Process are:

Sole source purchases on a non-competitive basis will require written justification and approval. The sole source written justification should include:

- (a) Unique performance factors of the products/services specified,
- (b) Why these factors are required,
- (c) What other products have been evaluated and rejected and why

Food service and seasonal commodities. These purchases shall be made upon the basis of quotations from several reliable and convenient sources of supply. Awards

Procurement Policy Page 2 of 3

shall be made on terms most advantageous to UARSC based on quality, price, service and delivery.

Bookstore supplies and textbooks. The purchase of textbooks, certain technical materials and resale merchandise shall be made upon the basis of several reliable and convenient sources of supply. Awards shall be on terms most advantageous to UARSC based on quality, price, reliability, and delivery.

*Grant/contract purchases* governed by the terms and conditions of the executed agreement.

Retention of service contractors on an hourly time and material basis. Authorized signer's approval must be obtained prior to the retention of service contractors.

#### **Conflict of Interest**

No UARSC Board member, employee, or CSU employee shall personally derive any benefit or gain or receive preferential treatment related to the purchase of equipment, supplies or services for UARSC.

#### MBE/WBE

Some funding agencies may require the use of a process that affirmatively seeks bids from women, minority, veteran or disabled-owned businesses. The UARSC Project Director is required to seek such bids if specified in the award.

#### Restrictions

The purchase of materials, equipment, supplies and services are subject to the following restrictions:

- The purchase must be a reasonable, allocable and allowable charge.
- If the charge for a funded project is not in the approved project budget, prior approval from the funding agency may be necessary.
- Equipment purchases are generally secured using a purchase order to ensure proper handling, warranty (where appropriate), and recording for inventory purposes. If equipment is purchased and then submitted on a check request for reimbursement, UARSC has the discretion not to approve the purchase if proper information is not received or proper bidding procedures were not followed.
- Hazardous materials must be secured using a purchase order to ensure proper handling of the substances and University notification and approval.

Revision Dates: 05/29/97; 10/23/03; name change only 2009; 06/10/14

Issue Date: 06/18/92



(clean version)

#### PROCUREMENT POLICY

This policy applies to purchase of materials, equipment, supplies, and services paid from University Auxiliary and Research Services Corporation (UARSC) administered funding sources. This policy blends efficient business practices and governing policies which satisfy the requirements of federal, state and independent auditors. Travel, retention of artists, entertainers, catering and speakers are not subject to the provisions of this policy.

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A. Once the goods have been identified, the purchase should be evaluated to determine if competitive bids are required\*

Procurement Policy Page 1 of 3

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Guidelines for purchase of Services:

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- (a) Unique performance factors of the products/services specified,
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*Grant/contract purchases* governed by the terms and conditions of the executed agreement.

Retention of service contractors on an hourly time and material basis. Authorized signer's approval must be obtained prior to the retention of service contractors.

Procurement Policy Page 2 of 3

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- Hazardous materials must be secured using a purchase order to ensure proper handling of the substances and University notification and approval.

Revision Dates: 05/29/97; 10/23/03; name change only 2009; 06/10/14

Issue Date: 06/18/92

Page 3 of 3

# **ATTACHMENT G**

Revision to Officers 2013/2014



## **Proposed Revision BOARD OFFICERS 2013/2014**

Chair

Ann Bersi

**Vice Chair** 

**Ernie Zomalt** 

Secretary

Dora Knoblock Bella Newberg

**Treasurer** 

**Greg Svatora** 

# **ATTACHMENT H**

**Proposed Rebalance of Reserves** 

#### University Auxiliary and Research Services Corporation Reserve Rebalance Proposal May 22, 2014

|  | November, 2012<br>ReBalanced | Qtr 4 FY 12/13<br>Post-Retiree | FY 12/13<br>Food Service | FY 12/13<br>Food Service | FY 12/13<br>Net Operating | FY 13/14<br>Post-Retiree | FY 13/14<br>President | FY 12/13<br>President's | Balance   | Proposed<br>Reserve | Proposed<br>Reserve | Adjusted<br>Balance |
|--|------------------------------|--------------------------------|--------------------------|--------------------------|---------------------------|--------------------------|-----------------------|-------------------------|-----------|---------------------|---------------------|---------------------|
| Reserve Description                          | Amount                       | Health Allocation              | Transition               | Equip Maint              | Loss                      | Health Allocation        | CCR Alloc's           | Pepsi Support           | 3/31/14   | Allocation          | Allocation          | 3/31/14             |
| Audit Disallowance                           | 350,000                      |                                |                          |                          | -                         |                          |                       |                         | 350,000   |                     | (50,000)            | 300,000             |
| Commercial Operations                        | 200,000                      |                                |                          |                          |                           |                          |                       |                         | 200,000   |                     |                     | 200,000             |
| Working Capital                              | 500,000                      | (69,495)                       |                          |                          | (172,953)                 | (149,487)                | (75,000)              | (20,000)                | 13,065    | 182,417             | 50,000              | 245,482             |
| Capital/Campus Development                   | 415,859                      |                                | (59,930)                 | (23,511)                 |                           |                          |                       | n a w                   | 332,417   | (182,417)           | )                   | 150,000             |
| Post-Retiree Health Accrual (Liability)      | 1,413,753                    | 69,495                         |                          |                          |                           | 149,487                  |                       |                         | 1,632,735 |                     |                     | 1,632,735           |
| Total Reserves & Post Retiree Health Accrual | 2,879,612                    |                                | (59,930)                 | (23,511)                 | (172,953)                 |                          | (75,000)              | (20,000)                | 2,528,217 |                     |                     | 2,528,217           |

#### Reserve Description

Audit Disallowance Commercial Operations & Capital Equip Replace Working Capital Capital/Campus Development

Post-Retiree Health Accrual (Liability)

#### Reserve Goal

Goal is determined upon annual risk assessment on types of grants and contracts (goal 5% of annual expenses)
Goal is determined annually based on commercial operation needs for upcoming year(s)
Goal determined by 1 month of sponsored projects reimbursements plus 3 months UARSC admin
Goal determined as a benchmark amount to meet potential critical needs of UARSC and/or campus

Goal is to modify plan to exclude new employees from eligibility in order to decrease liability

Reserve Rebalance Proposal - May 2014.xlsx 5/5/2014

# **ATTACHMENT I**

Starbucks Remodel Financing Request



## Starbucks Store Remodel - Financing Request

#### **Background:**

In 2003, UARSC entered into a license agreement with Starbucks to operate a Starbucks Store on campus. The current license expires in January, 2024. The store is located in the Kellogg Library building and has been in operation there since opening in 2003.

The license agreement requires UARSC to renovate and modernize the store at such time Starbucks directs UARSC to do so. Starbucks recently visited the store site and is now directing UARSC to make refurbishment and modernization upgrades in order to meet their current operational and appearance standards. The cost of the upgrades, are estimated at approximately \$250,000. The upgrade is expected to be completed in December, 2014.

### **Financing Terms:**

UARSC is able to obtain a loan from the campus in the amount of \$250,000 in order to finance the upgrade. The loan would be for a period of 10 years and would have an "interest only" payment due in the first year of the loan. The interest rate on the loan would be 3.0%.

# Campus Loan Financing Starbucks Remodel Project

| Loan Informa          | tion       |
|-----------------------|------------|
| Loan Amount           | \$ 250,000 |
| Annual Interest Rate  | 3.00%      |
| Term of Loan in Years | 10         |
| Loan Origination Date | 7/1/2014   |
| First Payment Date    | 7/1/2015   |
| Payment Frequency     | Annual     |

| Annual Payments |            |           |            |  |  |  |  |  |  |  |
|-----------------|------------|-----------|------------|--|--|--|--|--|--|--|
| Year            | Principal  | Interest  | Total      |  |  |  |  |  |  |  |
| FY 14/15        | ~          | 7,500     | 7,500      |  |  |  |  |  |  |  |
| FY 15/16        | 24,608     | 7,500     | 32,108     |  |  |  |  |  |  |  |
| FY 16/17        | 25,347     | 6,762     | 32,108     |  |  |  |  |  |  |  |
| FY 17/18        | 26,107     | 6,001     | 32,108     |  |  |  |  |  |  |  |
| FY 18/19        | 26,890     | 5,218     | 32,108     |  |  |  |  |  |  |  |
| FY 19/20        | 27,697     | 4,411     | 32,108     |  |  |  |  |  |  |  |
| FY 20/21        | 28,528     | 3,581     | 32,108     |  |  |  |  |  |  |  |
| FY 21/22        | 29,384     | 2,725     | 32,108     |  |  |  |  |  |  |  |
| FY 22/23        | 30,265     | 1,843     | 32,108     |  |  |  |  |  |  |  |
| FY 23/24        | 31,173     | 935       | 32,108     |  |  |  |  |  |  |  |
| Total           | \$ 250,000 | \$ 46,476 | \$ 296,476 |  |  |  |  |  |  |  |

#### **Financing Recommendation:**

UARSC asks the Board of Directors to approve a motion to allow UARSC management to negotiate with the campus a loan for financing the construction costs of the Starbucks store remodel using the financing terms contained in this request.

# **ATTACHMENT J**

FY 14/15 Operating Budget & Resolution

### **University Auxiliary and Research Services Corporation**

## Projected FY 13/14 Actual and FY 14/15 Draft Net Revenue Budget (ver 5/5/14)

|  | Annual                         |     | Actual                    | P  | rojected            |      | Total                  | 1      | Budget vs     |       |    |             |   |
|--|--------------------------------|-----|---------------------------|----|---------------------|------|------------------------|--------|---------------|-------|----|-------------|---|
|  | Budget                         |     | Jul-13                    |    | Apr-14              | 1    | Projected              | Tot    | al Projected  |       | D  | raft Budget |   |
| Revenue  | FY 13/14                       | Thi | ru Mar-14                 | Th | ru Jun-14           |      | FY 13/14               | VALL : | Variance      |       |    | FY 14/15    |   |
| Grant/Contract Admin Fees Less: Unallowance Reserve Less: University Sharing | \$ 1,160,000<br>-<br>(402,000) | \$  | 889,796<br>-<br>(301,500) | \$ | 299,000 - (100,087) | \$   | 1,188,796<br>(401,587) | \$     | 28,796<br>413 |       | \$ | 1,212,572   | A |
| Net Grant/Contract Admin Fees  | \$ 758,000                     | \$  | 588,296                   | \$ | 198,913             | \$   | 787,209                | \$     | 29,209        |       | \$ | 802,532     | С |
| Admin Fees - Campus Programs   | 120,000                        |     | 114,985                   | T  | 38,328              |      | 153,313                |        | 33,313        |       | ,  | 150,000     | D |
| Business Service Revenue - CSUSMF  | 150,000                        |     | 112,500                   |    | 37,500              | 17   | 150,000                |        |               |       |    |             | Ε |
| Bookstore Net Revenue  | 409,000                        |     | 340,197                   |    | 42,151              |      | 382,348                |        | (26,652)      |       |    | 400,000     | F |
| Food Service -Revenue Offsets  | (39,000)                       |     | (24,437)                  |    | (6,176)             | N. R | (30,613)               |        | 8,387         |       |    | (30,000)    | G |
| Other Commercial Services Revenues   | 80,000                         |     | 119,814                   |    | 5,650               |      | 125,464                |        | 45,464        |       |    | 124,000     | н |
| Investment Income  | 41,000                         |     | 31,054                    |    | 10,351              | 1    | 41,405                 | 1      | 405           |       |    | 43,750      | I |
| Leases/Mgmt Fees/Support   | 48,000                         |     | 43,686                    |    | 11,247              |      | 54,933                 |        | 6,933         |       |    | 45,000      | J |
| Total Revenue  | \$ 1,567,000                   | \$  | 1,326,094                 | \$ | 337,965             | \$   | 1,664,059              | \$     | 97,059        | · · · | \$ | 1,535,282   |   |
| Expenses: UARSC Operations   | \$ 1,546,000                   | \$  | 1,316,375                 | \$ | 286,944             | \$   | 1,603,319              | \$     | (57,319)      |       | \$ | 1,480,947   |   |
| Net Operating Revenues   | \$ 21,000                      | \$  | 9,719                     | \$ | 51,021              | \$   | 60,740                 | \$     | 39,740        |       | \$ | 54,335      |   |

#### Assumptions:

- A Increase of 2% from FY 13/14 projected total revenue
- B Estimate of 2% increase from FY 13/14 shareback total. Final amount to be determined based on sharing policy.
- C Estimate of actual costs to administer sponsored projects. Final amount to be determined based on sharing policy
- D Average fee rate of 5% on total campus program expenditures of \$3 million
- E CSUSM Fndn business services moved to campus
- F Outsourced Follett bookstore commission of 12.5% on \$3.2 million gross sales
- G Outsourced Sodexo foodservice commissions at 0% for FY14/15. Portion of operating costs (utilities) covered by UARSC
- H Commissions from other outsourced commercial service providers (Pepsi, Snack Vending, Campus Coffee, WF ATM, AT&T,
- I Average investible cash balance of \$3.5 million at 1.25%
- J Rent revenue, UARSC office space, Carmel Street

# University Auxiliary and Research Services Corporation Projected FY 13/14 Operating Expenses and Draft FY 14/15 Operating Expense Budget (ver 5/5/14)

|  |      | FY 13/14  |     | Actual     | P  | rojected  | Total                                    | Actual                                  |         | DRAFT     |
|--|------|-----------|-----|------------|----|-----------|--|---|---------|-----------|
|  |      | Annual    |     | Jul '13 to | A  | pr '14 to | Projected                                | vs Budget                               | 3       | FY 14/15  |
| (e   | 1    | Budget    |     | Mar '14    |    | Jun '14   | FY 13/14                                 | Variance                                | - 1     | BUDGET    |
| Salaries and Benefits                        |      |           |     |            |    |           |  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |         |           |
| UARSC Salaries                               | \$   | 730,416   | \$  | 364,812    | \$ | 129,902   | \$ 494,714                               | (235,702)                               |         | 466,447   |
| UARSC Benefits                               | Ž.   | 280,279   | 18  | 138,546    |    | 49,363    | 187,909                                  | (92,370)                                |         | 186,579   |
| Campus Reimb Sal's & Ben's                   |      | 176,268   |     | 474,629    |    | 138,280   | 612,909                                  | 436,641                                 |         | 485,622   |
| Total Salaries and Benefits                  | \$   | 1,186,963 | \$  | 977,987    | \$ | 317,544   | \$ 1,295,531                             | \$ 108,568                              | \$      | 1,138,647 |
|  |      |           |     |            |    |           |  |   |         |           |
| Operating Expenses                           |      |           |     |            |    |           |  |   | T-Don't |           |
| ADP Payroll/Bank Fees                        | \$   | 48,500    | \$  | 35,258     | \$ | 11,753    | 47,011                                   | (1,489)                                 |         | 46,250    |
| Audit Fees                                   |      | 66,000    |     | 51,375     |    | 17,125    | 68,500                                   | 2,500                                   |         | 66,500    |
| Maint. agreements (IITS,copiers, Deltek)     | 4-14 | 62,500    |     | 50,426     |    | 17,420    | 67,846                                   | 5,346                                   | 1       | 59,700    |
| Consulting-Special Projects                  |      | 10,000    |     | 13,717     |    | 7,541     | 21,258                                   | 11,258                                  | 17      | 10,000    |
| Univ Procurment Buyer Reimb (see MOU)        |      | 33,000    |     |            |    |           | -  | (33,000)                                |         |           |
| Campus Supplies Reimb (see MOU)              |      |           |     |            |    | 20,218    | 20,218                                   | 20,218                                  |         | 16,150    |
| Meetings and Events                          |      | 7,500     |     | 4,058      |    | 1,000     | 5,058                                    | (2,442)                                 |         | 5,000     |
| Insurance - Prop, Liab, D & O                |      | 50,160    |     | 47,771     |    | 16,928    | 64,699                                   | 14,539                                  |         | 27,500    |
| Legal  | 178  | 5,000     |     |            |    |           | A 100 100 100 100 100 100 100 100 100 10 | (5,000)                                 |         |           |
| Mail/Postage                                 |      | 4,500     |     | 842        |    | 2,733     | 3,575                                    | (925)                                   |         | 4,500     |
| Memberships & Subscriptions                  |      | 500       |     | 3,736      |    |           | 3,736                                    | 3,236                                   |         | 4,700     |
| Phone  |      | 8,500     |     | 2,261      |    | 4,930     | 7,191                                    | (1,309)                                 | -       | 7,500     |
| Space Rent/Utilities                         | 100  | 55,000    |     | 38,416     |    | 12,805    | 51,221                                   | (3,779)                                 | 12.5    | 52,000    |
| Supplies and Services                        | - 6  | 25,000    |     | 33,561     |    | 2,550     | 36,111                                   | 11,111                                  |         | 32,500    |
| Travel and Professional Dev.                 |      | 1,000     | 0 H | 3,843      |    | -         | 3,843                                    | 2,843                                   |         | 5,000     |
| Recruitment                                  |      | 1,500     |     | 1,155      |    | 825       | 1,980                                    | 480                                     | 1       | 2,000     |
| Other Operating/Contingency                  |      | 3,000     |     | 51,969     |    | (42,455)  | 9,514                                    | 6,514                                   |         | 3,000     |
| Total Operating Expenses                     | \$   | 381,660   | \$  | 338,388    | \$ | 73,373    | \$ 411,761                               | 30,101                                  | \$      | 342,300   |
|  |      |           |     |            |    |           |  |   |         |           |
| Total Operating Expenses                     | \$   | 1,568,623 | \$  | 1,316,375  | \$ | 390,917   | 1,707,292                                | 138,669                                 | \$      | 1,480,947 |
| Less: FY 12/13 Foregone Exchange of Value Re | eimb |           | 27  |            |    | (103,973) |  | (103,973)                               |         |           |
| Net Operating Expenses                       | \$   | 1,568,623 | \$  | 1,316,375  | \$ | 286,944   | \$ 1,603,319                             | \$ 34,696                               |         |           |



# OPERATING BUDGET RESOLUTION FISCAL YEAR 2014-2015

The University Auxiliary and Research Services Corporation operates on a fiscal year beginning July 1 and ending June 30, and

The University Auxiliary and Research Services Corporation Board of Directors approves the operating budget for each fiscal year,

The Board of Directors of the University Auxiliary and Research Services Corporation approved the attached operating budget for the 2014-2015 fiscal year, effective July 1, 2014 and ending June 30, 2015, and

Through her signature below, University President, Karen S. Haynes, signifies her approval of said budget and authorizes University Auxiliary and Research Services Corporation management to proceed with implementation effective July 1, 2014.

| Karen S. Haynes, Ph.D. University President   | Date                                   |
|---|--|
| I hereby certify the attached operating by<br>of Directors of the University Auxiliary an<br>at a regular meeting held on May 22, 201 | ************************************** |
| Bella Newberg<br>Secretary  | Date                                   |

# **ATTACHMENT K**

Compensation
Administration Guidelines
FY 14/15



## COMPENSATION ADMINISTRATION GUIDELINES Effective July 1, 2014 – June 30, 2015

The UARSC Board approves the following wage increase guidelines for UARSC Regular Sponsored Project employees¹ subject to Principal Investigator approval and the availability of project funds (grant and contract funded employees only). Wage increase guidelines for UARSC Regular non-Sponsored Project employees for Fiscal Year 14/15 will be provided to and approved by the UARSC Board at a future meeting. Salary adjustments are available for sponsored project employees but are subject to the following guidelines:

## Wage increase not to exceed 5.0 percent

- a. All adjustments will be calculated as a percentage of current annual gross wages and must be submitted on an Employment Authorization Form (EAF).
- b. Increases will not be granted without the completion of an annual performance appraisal in the past year. Annual performance appraisals are completed either on a fiscal year basis, project year basis, or position anniversary date. The annual performance appraisal schedule will be decided by the Principal Investigator or Department Director and will communicate this schedule to the UARSC Director, Human Resources and Payroll Services.
- c. Employees with a score of less than 3.00 (below expectations) on their annual performance appraisal will not be eligible for a performance based adjustment.
- d. Employees with less than 6 months of service during the performance appraisal period will not be eligible for a wage increase. This will only apply to annual performance appraisals completed on a fiscal year or project year basis.
- e. Any employee determined to be significantly above the market rate for their position (15% or greater), will be excluded from receiving a wage increase.

All forms are available on UARSC's website at www.csusm.edu/uarsc.

 $<sup>^{1}</sup>$  The following categories are not covered by these guidelines: Student Assistant, Graduate Assistant, and University Faculty.

## **UARSC COMPENSATION GUIDELINES SINCE FY 2004-05**

| CONTRACTOR AND A SECOND | 200  | 4 - 05 | 200  | 5 - 06 | 2006 - 07 2007 - 08 |       |      | 2008 - 09 |                 |
|-------------------------|------|--------|------|--------|---------------------|-------|------|-----------|-----------------|
|                         | GSI  | Perf.  | GSI  | Perf.  | GSI                 | Perf. | GSI  | Perf.     | All Performance |
| UARSC Admin/Commercial  | 2.0% | 0.0%   | 2.5% | 0.0%   | 2.7%                | 0.0%  | 2.5% | 2.5%      | Up to 5.0%      |
| Projects/Grants         | 2.0% | 3.0%   | 2.5% | 0.0%   | 2.7%                | 0.0%  | 2.5% | 2.5%      | Up to 5.0%      |

|                        | 2009 - 10   | 2010 - 11   | 2011 - 12   | 2012 - 13   | 2013-14         |
|------------------------|-------------|-------------|-------------|-------------|-----------------|
|                        | Performance | Performance | Performance | Performance | GSI Perf.       |
| UARSC Admin/Commercial | Up to 5.0%  | 0.0%        | 0.00%       | 0.00%       | 3.0% 0.0%       |
| Projects/Grants        | Up to 5.0%  | Up to 5.0%  | Up to 5.0%  | Up to 5.0%  | 0.0% Up to 5.0% |

# ATTACHMENT L

Exiting CalPERS Healthcare & Post Retirement Medical Program Resolution



# RESOLUTION ELECTING TO CEASE TO BE SUBJECT TO THE PUBLIC EMPLOYEES' MEDICAL AND HOSPITAL CARE ACT

WHEREAS, Government Code Section 22938 provides that a contracting agency which has elected to be subject to the Public Employees' Medical and Hospital Care Act may cease to be so subject by proper application by the local agency; and

WHEREAS, the University Auxiliary and Research Services Corporation, California State University San Marcos, hereinafter referred to as Public Agency is a local contracting agency which has elected to be subject to the provisions of the Act.

**NOW THEREFORE, BE IT RESOLVED**, that the Public Agency elects and it does hereby elect, to cease to be subject to the provisions of the Act.

**BE IT FURTHER RESOLVED**, that coverage of the Act cease on December 31, 2014.

Adopted at a regular meeting of the Board of Directors of the University Auxiliary and Research Services Corporation, California State University San Marcos this 22<sup>nd</sup> day of May 2014.

Dr. Ann Bersi, Chair University Auxiliary and Research Services Corporation Board of Directors

The undersigned, Secretary of the Issuer, hereby certifies that the foregoing is a full, true and correct copy of the resolution of the Board of Directors of said Issuer duly made at a meeting held on May 22, 2014 at San Marcos, California.

| Bella Newberg, Secretary | Date |  |  |
|--------------------------|------|--|--|