Form 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047 2017

Open to Public

Department of the Treasury Internal Revenue Service

Inspection ► Go to www.irs.gov/Form990 for instructions and the latest information. For the 2017 calendar year, or tax year beginning , 2017, and ending 7/01 , 2018 Check if applicable: D Employer identification number X Address change ASSOCIATED STUDENTS OF THE 94-0294680 UNIVERSITY OF CALIFORNIA Telephone number Name change 2465 BANCROFT WAY #412 Initial return 510-643-0693 BERKELEY, CA 94720-4500 Final return/terminated Amended return G Gross receipts \$ 5,618,947. F Name and address of principal officer: H(a) Is this a group return for subordinates? Application pending X No Yes H(b) Are all subordinates included? If 'No,' attach a list. (see instructions) SAME AS C ABOVE Yes No Tax-exempt status X 501(c)(3) 501(c) (insert no.) 4947(a)(1) or Website: ► H(c) Group exemption number ▶ Form of organization: X Association Corporation M State of legal domicile: CA Trust Other P L Year of formation: 1887 Part I Summary Briefly describe the organization's mission or most significant activities: TO SERVE STUDENTS OF THE UNIVERSITY Governance Check this box | | if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a)..... 25 Number of independent voting members of the governing body (Part VI, line 1b)..... 4 0 Total number of individuals employed in calendar year 2017 (Part V, line 2a)..... 5 0 Total number of volunteers (estimate if necessary)..... 6 0 Total unrelated business revenue from Part VIII, column (C), line 12...... 0. b Net unrelated business taxable income from Form 990-T, line 34 7b 0. Prior Year **Current Year** Contributions and grants (Part VIII, line 1h). Program service revenue (Part VIII, line 2g)..... 2,084,072 2,187,319. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)..... 120,135 402,781. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)..... 2,553,236 ,548,023. 12 Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 4.757.443 5,138,123. Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... Benefits paid to or for members (Part IX, column (A), line 4)..... Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)..... 73.049 95,816. 16a Professional fundraising fees (Part IX, column (A), line 11e)..... b Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)..... 4,553,264. 4,946,028. 4,626,313. 5,041,844. Revenue less expenses. Subtract line 18 from line 12..... 131,130 96,279. Beginning of Current Year End of Year Total assets (Part X, line 16)..... 10,250,444 11,224,481 21 Total liabilities (Part X, line 26)..... 4,508,862. 5,262,512. 22 Net assets or fund balances. Subtract line 21 from line 20..... 5,741,582. 5,961,969. Partill Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here ALEXANDER WILFERT PRESIDENT Type or print name and title Print/Type preparer's name Preparer's signature Check BRIAN R MAH PRM BRIAN R MAH P00522319 Paid self-employed Preparer ► MAH & ASSOCIATES, LLP Use Only Firm's EIN > 94-3342694 201 CALIFORNIA STREET, SUITE 411 SAN FRANCISCO, CA 94111 (415) 981-1111

BAA For Paperwork Reduction Act Notice, see the separate instructions.

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Forn	1 990 (2017) ASSOCIATED 5	STUDENTS OF THE			94-029	94680	Page 2
Pai	はIII Statement of Progra					100	
200	Check if Schedule O cont		to any line in this F	Part III			111111
1							
	TO SERVE STUDENTS OF	THE UNIVERSITY	, 				
						_~	
2	Did the organization undertake any	significant program servi	ces during the year w	thich were not listed on	the prior		
_	Form 990 or 990-EZ?					Yes	X No
	If 'Yes,' describe these new serv	ices on Schedule O.				□	<u> </u>
3	Did the organization cease condu	ucting, or make significa	ant changes in how	it conducts, any progi	ram services?	Yes	X No
	If 'Yes,' describe these changes	on Schedule O.					
4	Describe the organization's progr Section 501(c)(3) and 501(c)(4) of and revenue, if any, for each program	ram service accomplish organizations are requir ogram service reported.	ments for each of its ed to report the am	s three largest progra ount of grants and all	m services, as me ocations to others	easured by e , the total ex	xpenses. penses,
4 8	(Code:) (Expenses	\$ 4.916.035.	including grants of	\$) (Revenue \$		· · · · · ·
	THE ASSOCIATED STUDE						.000
	UNDERGRADUATE AND GR						
	ACTIVITIES, LECTURES						
41	(Code:) (Expenses	\$	including grants of	\$) (Revenue \$)
		Ť					
40	: (Code:) (Expenses	Ś	including grants of	Ś) (Revenue \$		١
			motoding granto of	*			
4	Other program services (Describe	e in Schedule O \					
-+ 0	(Expenses \$	including grants	of S) (Reven	ue Ś	,	`
4 e	Total program service expenses) (1/cve11	T	· <u>·</u> ·	
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		••*				_	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I.	6		· x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete 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		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
i	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
1	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.	11 Ь		X
•	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.	11 c		X
- 1	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d	х	
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	X	
- 1	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		_X_
12:	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII.	12a	х	
	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		X
	is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
i	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
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? 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 (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		Х
	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
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Form 990 (2017) ASSOCIATED STUDENTS OF THE Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		х
24 a	a 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 25a.	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		
6	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
t	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
E	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M.	30		Х
31		31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		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		Х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	,	Х
E	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2.	36		х
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

Form 990 (2017) ASSOCIATED STUDENTS OF THE Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V....

Check if Schedule O contains a response or note to any line in this Part V.			اللن
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	200		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	3
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		-
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	1231	S COVE	10000
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	77.7	X
b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule Q	3Ь		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b If 'Yes,' enter the name of the foreign country: ►	636	SECTION	EAST.
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a 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 a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6ъ		
7 Organizations that may receive deductible contributions under section 170(c).	1000	1889	10000
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 a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year	1000	35.70	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g	-	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	Delice	10001
9 Sponsoring organizations maintaining donor advised funds.	CONTRACTOR OF THE PERSON OF TH	SCHOOL ST	5005000
a Did the sponsoring organization make any taxable distributions under section 4966?	9a	First & State	100000
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		-
10 Section 501(c)(7) organizations. Enter:		2012	September 1
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 10b			
11 Section 501(c)(12) organizations. Enter:			
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?	12 a	-	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	850E8		Total N
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			A
a Is the organization licensed to issue qualified health plans in more than one state?	13a	the state of the s	Distrator
Note. See the instructions for additional information the organization must report on Schedule O.	500 5	75-18	10.50
	1 3	10	
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			
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		1000
BAA TEEA0105L 08/08/17	Form	990	(2017)

Form 990 (2017) ASSOCIATED STUDENTS OF THE 94-0294680 Page 6 Partivil 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 or note to any line in this Part VI..... Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year if there are material differences in voting rights among members 25 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent..... 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 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 Χ, 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... 4 X X 5 Did the organization have members or stockholders?.... $\overline{\mathtt{X}}$ 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?.... 7 a 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?..... 7 b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... X 8a b Each committee with authority to act on behalf of the governing body?..... 86 \overline{X} 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..... X Section 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?..... 10 a X b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?..... 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... X 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13..... 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise X 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done...... 12 c X 13 Did the organization have a written whistleblower policy?..... X 13 14 Did the organization have a written document retention and destruction policy?..... X 14 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? a The organization's CEO, Executive Director, or top management official..... X 15 a **b** Other officers or key employees of the organization..... X 15 b 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 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 exempt status with respect to such arrangements?..... Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records:

BERKELEY CA 94720-4500 (510) 643-5972

LINCOLN TAM 2465 BANCROFT WAY RM #412

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

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

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

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

employees; and former such persons. Check this box if neither the organization nor any relat	ed organiz	ation	con		_	d any	cu	rrent officer, directe	or, or trustee.	
(A) Name and Title	(B) Average hours per		(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1) ZAYNAB ABDULQADIR-MORRIS FORMER PRES.	<u>20</u> _							4 000		
(2) SOPHIE BANDARKAR	20		-				\dashv	4,000.	0.	0.
ADVOCATE	- 20 -							4,000.	0.	0.
(3) ALEXANDER WILFERT PRESIDENT	_ <u>20</u> _			Х				4,000.	0.	0.
(4) HUNG HUYNH VICE PRESIDENT				х				4,000.	0.	0.
(5) NUHA KHALFAY VICE PRESIDENT	_ <u>20</u> _			Х				4,000.	0.	0.
(6) MELANY AMARIKWA VICE PRESIDENT				Х				4,000.	0.	0.
(8)										
(9)										
(10)										540
(11)										
(12)										
(13)										
(14)										
ВАА	TEEA0	107L	08/08	3/17						Form 990 (2017)

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Part VII Section A. Utilicers, Directors, 110	istees,	ney	Em	pie	oye	es, i	and	a Hignest Con	ipensated Emp	loyees (continued)
	(B)	Position								
(A)	Average (do not check more than one box, unless person is both an Rei		(D)	(E)	(F) Estimated					
Name and title	per week	offic	cer a	nd a c	director/trustee)		tee)	Reportable compensation from the organization	Reportable compensation from related organizations	amount of other compensation
	(list any hours for	or director	institutional trustee	Officer	Key employee	igne impic	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization
	related organiza	ector	tiona	व्य	hiplo	st co yee	9			and related organizations
	 tions below dotted 	truste	핤		yee	npen				
	line)	8	ee			Highest compensated employee				
(15)		\vdash					-		-	
(16)								,		
(17)										
(18)										
(19)										
(20)		\vdash		_	_					,
		1								
(21)										
(22)		\vdash					_			
(22)										
(23)										
(0.4)										
(24)		1								
(25)										
		1								
1 b Sub-total								24,000.	0.	0.
c Total from continuation sheets to Part VII, Section d' Total (add lines 1b and 1c).							.	24,000.	0.	0.
2 Total number of individuals (including but not limited							ved			
from the organization 🟲 0										
										Yes No
3 Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for suc.	tor, or tru <i>h individu</i>	stee, ıal	key 	/ em	iploy	/ee, :	or h	nighest compensat	ed employee	3 Х
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate										
the organization and related organizations greate such individual	r than \$1	50,00	00?	If 'Y	es,	com	ple	te Schedule J for		. 4 X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes				om :	any	unre	late	d organization or	individual	
for services rendered to the organization? If 'Yes Section B. Independent Contractors	,' comple	te Sc	hea	lule	J ło	r suc	h p	erson		. 5 X
Complete this table for your five highest compensation from the organization. Report compensation from the organization.	sated inde	epend	dent	cor	ntrad	tors	tha	it received more th	nan \$100,000 of	
		the ca	alen	dar y	/ear	endir	ng v			
(A) Name and business addi	ess							(B) Description of	of services	(C) Compensation
							8,788.			
THOITS LAW 8030 SOQUEL AVE, SUITE 100 SANT.	A CRUZ,	CA .	950	62				LEGAL SERVICE	s	11,092.
				_						
2 Total number of independent contractors (including b	ut not limi	ted to	tho	se li	isted	abov	ve)	who received more	than	
\$100,000 of compensation from the organization							100			图的 图 图
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	Check if Schedule O contains a response or no	te to any line in this Part V	III		
		Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1 a Federated campaigns				
Contributions, Gifts, Grants and Other Similar Amounts	b Membership dues				
S, C	c Fundraising events				
ar ar	d Related organizations 1 d				
8 E	e Government grants (contributions) 1 e				
F S	f All other contributions, gifts, grants, and	国际的			
bul	f All other contributions, gifts, grants, and similar amounts not included above				
do	g Noncash contributions included in lines 1a-1f: \$				
<u>ਨੂੰ ਵ</u>	h Total. Add lines 1a-1f				
JIL	Business	The state of the s	Constitution of		
₩	2a REGISTRATION FEES	2,187,319.	2,187,319.		71-7 33 600
e E	b TRUSTEE FUNDS				
Z;	c				
S	<u> </u>				
ran	f All other program service revenue				
Program Service Revenue	g Total. Add lines 2a-2f	b 2 107 210		TO THE REAL PROPERTY.	
ш,	3 Investment income (including dividends, interest a				
	other similar amounts)				50,044.
	4 Income from investment of tax-exempt bond proc	eeds. ►			00,011.
	5 Royalties				
	(i) Real (ii) Per	sonal			
	6a Gross rents				
	b Less: rental expenses	10000000000000000000000000000000000000			
	c Rental income or (loss)			e unit	122,121,7,93
	d Net rental income or (loss)				
	7 a Gross amount from sales of (i) Securities (ii) O	THE RESIDENCE OF THE PARTY OF T			
	assets other than inventory 331, 561. 502	.000.			
	b Less: cost or other basis				
		693.			
	c Gain or (loss) 53,430. 299 d Net gain or (loss)	307.	250 727	The State of the S	NAME OF STREET
		▶ 352,737.	352,737.	CAMPAGE AND AND	PASSA CONTRACTOR AND ADDRESS.
ž	8a Gross income from fundraising events (not including. \$				
Ver	of contributions reported on line 1c).				
Other Reven	See Part IV, line 18a				
늍	b Less: direct expenses b				
늉	c Net income or (loss) from fundraising events	▶			
-	9 a Gross income from gaming activities. See Part IV, line 19				
	b Less: direct expenses b				经验证证证
	c Net income or (loss) from gaming activities	>			
	10a Gross sales of inventory, less returns and allowances				
	b Less: cost of goods sold b				
	c Net income or (loss) from sales of inventory				and the second second second
	Miscellaneous Revenue Business		Zara de la companya d	74 M	to the state of
	11a MISCELLANEOUS	1,792,658.	1,792,658.		
	b COMMERCIAL REVENUE	651,955.	651,955.		and the state of t
	C NONFUNCTIONING GP'S DONAT	79,283.	79,283.		
	d All other revenue WK	S 24,127.	24,127.		
	e Total. Add lines 11a-11d	2,010,000.			()建筑县(),在京东
	12 Total revenue. See instructions	5 ,138,123.	5,088,079.	0.	50,044.

PartilX 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 re	sponse or note to any	line in this Part IX		X
Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.		20.40		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				14 3 1 2 15 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members	24,000.	0.	24,000.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0.	0.	0.	0.
7		71,816.	55,522.	16,294.	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	71,310.	33,322.	10,234.	
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
	Management				
	Legal	19,789.	16,821.	2,968.	
	Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees	12,586.		12,586.	
	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.)	85,387.	63,687.	21,700.	- 10
	Advertising and promotion	139,752.	139,752.		
13 14	Office expenses				
15	Royalties.				
16	Occupancy.				
17	Travel	E00 C0E	F02 C2F		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	582,635.	582,635.		
19	Conferences, conventions, and meetings				
20	Interest			6	A vili
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	26,237.	26,237.		
	Insurance	37,393.	20,684.	16,709.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
ē	PROGRAM & EVENTS	1,192,187.	1,192,187.		20040-X172-
	MEETINGS & MEALS	768,705.	762,699.	6,006.	##
(STIPENDS	742,935.	722,935.	20,000.	6
	SUPPLIES	569,492.	566,622.	2,870.	
	All other expensesSEE .SCHO	768,930.	766,254.	2,676.	
25	Total functional expenses. Add lines 1 through 24e	5,041,844.	4,916,035.	125,809.	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)				
RAA					Form 990 (2017)

Part X Balance Sheet

_		Check if Schedule O contains a response or note to any line in this Par	X.,			
				(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing		6,127,669.	1	6,803,833.
	2	Savings and temporary cash investments		157,152.	2	157,167.
	3	Pledges and grants receivable, net	La Carte		3	
	4	Accounts receivable, net		3,884.	4	328,000.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined usection 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employe beneficiary organizations (see instructions). Complete Part II of Schedule	nder ! es' L		6	
Ø	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
As	9	Prepaid expenses and deferred charges	<i></i>		9	
	10 a	Land, buildings, and equipment: cost or other basis.	, 355.			
			,210.	185,679.	10 c	38,145.
Ì	11	Investments – publicly traded securities		2,442,139.	11	2,576,579.
	12	Investments — other securities. See Part IV, line 11.	L.	2,442,133.	12	2,310,313.
	13	Investments – program-related. See Part IV, line 11.	L		13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11.		1,333,921.	15	1,320,757.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	L.	10,250,444.	16	11, 224, 481.
_	17	Accounts payable and accrued expenses.		436,684.	17	225, 362.
	18	Grants payable	L.	450,004.	18	223,302.
	19	Deferred revenue		33,000.	19	36,741.
	20	Tax-exempt bond liabilities		50,000.	20	50/1241
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustee key employees, highest compensated employees, and disqualified person Complete Part II of Schedule L			22	
2,4	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties	<i></i> [-	24	
	25	Other liabilities (including federal income tax, payables to related third parand other liabilities not included on lines 17-24). Complete Part X of Sche	rties, dule D.	4,039,178.	25	5,000,409.
	26	Total liabilities. Add lines 17 through 25		4,508,862.	26	5,262,512.
Ses		Organizations that follow SFAS 117 (ASC 958), check here $\begin{tabular}{ c c c c c }\hline X & and complines 27 through 29, and lines 33 and 34. & & & & & & & & & & & & & & & & & & &$				
ě	27	Unrestricted net assets.		5,741,582.	27	5,961,969.
3a	28	Temporarily restricted net assets	L.		28	
힏	29	Permanently restricted net assets			29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.				
9	30	Capital stock or trust principal, or current funds	[2 0 1	30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
As	32	Retained earnings, endowment, accumulated income, or other funds		,	-32	
et	33	Total net assets or fund balances		5,741,582.	33	5,961,969.
~	34	Total liabilities and net assets/fund balances		10,250,444.	34	11,224,481.
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	and the second s	4 4		+=	
Fori	n 990 (2017) ASSOCIATED STUDENTS OF THE 94	1-0294680			ige 12
Pa	TEXI Reconciliation of Net Assets			•	
	Check if Schedule O contains a response or note to any line in this Part XI				Г
1	Total revenue (must equal Part VIII, column (A), line 12)		5,1		
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	5,0		
3	Revenue less expenses. Subtract line 2 from line 1		**	96,2	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		5,7		
5	Net unrealized gains (losses) on investments.	. 5		24,1	
6	Donated services and use of facilities				
7	Investment expenses	. 7			
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	. 10	5,9	61,9	969.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				[
		-		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				ALE .
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2	a 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 revise separate basis, consolidated basis, or both: Separate basis Both consolidated and separate basis	wed on a			
	b Were the organization's financial statements audited by an independent accountant?		2 b	х	1
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both: X Separate basis				
	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the au review, or compilation of its financial statements and selection of an independent accountant?	dit,	2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain			The state	20

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Form 990 (2017)

3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?....

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.....

in Schedule O.

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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

 2017

OMB No. 1545-0047

Open to Public Inspection

Name of the omanization Employer identification number UNIVERSITY OF CALIFORNIA 94-0294680 Partil Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). Δ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its support from gross investment income and unrelated business axable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations..... 1 g Provide the following information about the supported organization(s). (I) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (iv) Is the organization listed (v) Amount of monetary (vi) Amount of other support (see instructions) support (see instructions) in your governing document? Yes No UNIVERSITY OF CALIFORNIA, BERKELEY (A) 94-6002123 2 0. 0. **(B)** (C) (D) (E)

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year (a) 2013 **(b)** 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.') Tax revenues levied for the organization's benefit and either paid to or expended on its behalt The value of services or facilities furnished by a governmental unit to the organization without charge:... Total. Add lines 1 through 3... 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..... Section B. Total Support Calendar year (or fiscal year beginning in) ► (a) 2013 **(b)** 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total Amounts from line 4..... Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.... Net income from unrelated business activities, whether or not the business is regularly carried on..... Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. Add lines 7 through 10...... Gross receipts from related activities, etc. (see instructions)..... First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here..... Section C. Computation of Public Support Percentage 14 % 15 Public support percentage from 2016 Schedule A, Part II, line 14..... 15 % 16a 33-1/3% support test-2017. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33-1/3% support test-2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization..... 17a 10%-facts-and-circumstances test—2017. 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 VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization............ 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions...

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

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

Sec	tion A. Public Support						
Calend	dar year (or fiscal year beginning in) 🟲	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	dar year (or fiscal year beginning in) 🟲	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
	Add lines 10a and 10b						
"	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)				3		
	First five years. If the Form 990 organization, check this box and	stop here	<u></u>	d, third, fourth, o	or fifth tax year as	a section 501(c)(3)	
	tion C. Computation of Pul	4 1					
	Public support percentage for 20						8
	Public support percentage from 2					16	8
	tion D. Computation of Inv						
	Investment income percentage for						ક
	Investment income percentage fr						o o
	33-1/3% support tests—2017. If t is not more than 33-1/3%, check 33-1/3% support tests—2016. If t	this box and sto	p here. The organ	ization qualifies a	as a publicly supp	orted organization.	
	33-1/3% support tests—2016. If the line 18 is not more than 33-1/3% Private foundation. If the organization is the organization in the organization in the organization is the organization in the organization in the organization in the organization in the organization is the organization in the organizatio	, check this box a	and stop here. The	e organization qu	ialifies as a public	ly supported organi	zation 🟲 📘

Partily Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
i	1	X	
	2	TAX PROPERTY.	X
	過程	18 18 9	X
	3a .		X
	3b		
	128		
	Зс	0000000	ST. 100
	4a		X
			Carrier S
	4.	Similar	
	4b	ADDITION OF	1000
	4c		and a second
	5a	and the same of th	Х
	1986		
	5b		
	5с		
	A CONTRACT		
	6	5	Х
	7	Mary Mary and Assessment	X
, '	8		X
	9a		X
	25.50	DOM:	1856
	9Ь		Х
	9с		X
	記録		LEGIS.
5, '	7.0		
	10a	JANIE J	X
uje.	10b		

Fa	retive Supporting Organizations (Continued)			
	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
i	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		X
	b A family member of a person described in (a) above?	116		X
	A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		X
Sec	ction B. Type I Supporting Organizations			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	Yes	No
	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	1	Yes	No
	organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at	2	X	5
	all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard.	3		Х
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
-	The organization satisfied the Activities Test. Complete line 2 below.			
1	The organization is the parent of each of its supported organizations. Complete line 3 below.			
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see i	nstruc	tions).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
ě	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ı	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
ě	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
ı	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b		

Pa	ty Type III Non-Functionally Integrated 509(a)(3) Supporting Org	anızatı	ons	
1	Check here if the organization satisfied the Integral Part Test as a qualifying true instructions. All other Type III non-functionally integrated supporting organization	st on No	v. 20, 1970 (explain in complete Sections A	Part VI). See through E.
Sec	tion A — Adjusted Net Income	WA 25	(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		1.7.245
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
i	Average monthly cash balances	1Ь		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
•	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
_	Subtract line 2 from line 1d.	3		1912
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount	9		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	THE REPLY OF	
2	Enter 85% of line 1.	2	NO DESIGNATION	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	SOUTH AND THE	4
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally int (see instructions).	egrated	Type III supporting or	ganization
BAA	· · · · · · · · · · · · · · · · · · ·		Schedule A (F	orm 990 or 990-EZ) 201

-m'	Pa		
	OF THE	94-029	94680 Page 7
tV Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	tions (continued)	
			Current Year
Amounts paid to supported organizations to accomplish exempt pur	poses	70 (T 221.3400 (1905 1.72.0784)
Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	f supported organization	5,	
Administrative expenses paid to accomplish exempt purposes of su	pported organizations		
Amounts paid to acquire exempt-use assets			
Qualified set-aside amounts (prior IRS approval required)			
Other distributions (describe in Part VI). See instructions.			
Total annual distributions. Add lines 1 through 6.	-15, 17, 27		
Distributions to attentive supported organizations to which the organization Part VI). See instructions.	on is responsive (provide	details	
Distributable amount for 2017 from Section C, line 6			
Line 8 amount divided by line 9 amount			
tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(ili) Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6	0.000 0.000		
Underdistributions, if any, for years prior to 2017 (reasonable cause required — explain in Part VI). See instructions.			
Excess distributions carryover, if any, to 2017			
		PRINCE NAME OF THE PARTY OF THE	
From 2013		则是数据设计的进程 处	
From 2014			
From 2015			THE SHALL SET
From 2016			
Total of lines 3a through e			
Applied to underdistributions of prior years			
Applied to 2017 distributable amount			
	tion D — Distributions Amounts paid to supported organizations to accomplish exempt pur Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity Administrative expenses paid to accomplish exempt purposes of su Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization Part VI). See instructions. Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by line 9 amount tion E — Distribution Allocations (see instructions) Distributable amount for 2017 from Section C, line 6 Underdistributions, if any, for years prior to 2017 (reasonable	dule A (Form 990 or 990-EZ) 2017 ASSOCIATED STUDENTS OF THE Type III Non-Functionally Integrated 509(a)(3) Supporting Organization D — Distributions Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organization in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide in Part VI). See instructions. Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by line 9 amount tion E — Distribution Allocations (see instructions) Distributable amount for 2017 from Section C, line 6 Underdistributions, if any, for years prior to 2017 (reasonable cause required — explain in Part VI). See instructions. Excess distributions carryover, if any, to 2017 From 2013. From 2014. From 2015. Total of lines 3a through e Applied to underdistributions of prior years	dule A (Form 990 or 990-EZ) 2017 ASSOCIATED STUDENTS OF THE 94-02: **EV Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **tion D — Distributions** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to supported organizations to accomplish exempt purposes of supported organizations, in excess of income from activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by line 9 amount **tion E — Distribution Allocations (see instructions) Distributable amount for 2017 from Section C, line 6 Underdistributions, if any, for years prior to 2017 (reasonable cause required — explain in Part VI). See instructions. Excess distributions carryover, if any, to 2017 From 2013 From 2015 From 2016 Total of lines 3a through e Applied to underdistributions of prior years

e Excess from 2017......

instructions.

8 Breakdown of line 7:

a Excess from 2013
b Excess from 2014
c Excess from 2015
d Excess from 2016

i Carryover from 2012 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f.

Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.
 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See

7 Excess distributions carryover to 2018. Add lines 3j and 4c.

4 Distributions for 2017 from Section D,

a Applied to underdistributions of prior years
b Applied to 2017 distributable amount
c Remainder. Subtract lines 4a and 4b from 4.

Schedule A (Form 990 or 990-EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017

ASSOCIATED STUDENTS OF THE

94-0294680

Page 8

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 2017

Open to Public Inspection
Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization

ASSOCIATED STUDENTS OF THE UNIVERSITY OF CALIFORNIA

04-0204690

		74-0234660
Pai	প্রা Organizations Maintaining Donor Advised Funds or Other Sin Complete if the organization answered 'Yes' on Form 990, Par	milar Funds or Accounts. t IV, line 6.
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Appropriate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the asset are the organization's property, subject to the organization's exclusive legal control	s held in donor advised funds
6	Did the organization inform all grantees, donors, and donor advisors in writing that for charitable purposes and not for the benefit of the donor or donor advisor, or for impermissible private benefit?	t grant funds can be used only r any other purpose conferring
Par	Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Par	t IV. line 7.
1		
		eservation of a historically important land area
		eservation of a certified historic structure
	Preservation of open space	
2		on in the form of a conservation easement on the
		Held at the End of the Tax Year
	a Total number of conservation easements	2a
- 1	b Total acreage restricted by conservation easements	2b
	c Number of conservation easements on a certified historic structure included in (a)	V 50 - 1/34
	d Number of conservation easements included in (c) acquired after 7/25/06, and not	
	structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or term tax year ►	ninated by the organization during the
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, insp	pection, handling of violations,
_	and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and e	enforcing conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforces	cing conservation easements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the required and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue include, if applicable, the text of the footnote to the organization's financial statem conservation easements.	e and expense statement, and balance sheet, and nents that describes the organization's accounting for
Par	Organizations Maintaining Collections of Art, Historical Treast Complete if the organization answered 'Yes' on Form 990, Par	sures, or Other Similar Assets. t IV, line 8.
1:	a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report art, historical treasures, or other similar assets held for public exhibition, education, or re-	esearch in furtherance of public service, provide
1	in Part XIII, the text of the footnote to its financial statements that describes these b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in in historical treasures, or other similar assets held for public exhibition, education, or resea	
	following amounts relating to these items:	
	(i) Revenue included on Form 990, Part VIII, line 1	
_		
	If the organization received or held works of art, historical treasures, or other similar assistamounts required to be reported under SFAS 116 (ASC 958) relating to these item	ns:
	a Revenue included on Form 990, Part VIII, line 1	
	h Assets included in Form 990, Part X	Reference server, Luminos — 1997 × 1

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land		20,920.		20,920.
b Buildings		-116,106.	-27,884.	-88,222.
c Leasehold improvements		80,965.	20,808.	60,157.
d Equipment		98,332.	63,444.	34,888.
e Other		18,244.	7,842.	10,402.
Total. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X, co	olumn (B), line 10c.)		38,145.

BAA

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017 ASSOCIATED STUDENTS C	OF THE	4.4	94-029	94680 Page :
Part VII Investments — Other Securities.		N/A		
Complete if the organization answered 'Ye (a) Description of security or category (including name of security)	(b) Book value		of valuation: Cost or end-or	
(1) Financial derivatives.		(5)		Jone Marines Pales
(2) Closely-held equity interests				
(3) Other				
(A) (B)				
(C)				
(D) (E)				
(F)				
(G)				
(H)			-	gu
(1)	_			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)		新工作。在各种中央的		THE RESERVE
Part VIIII Investments — Program Related. Complete if the organization answered 'Ye	s' on Form 990	N/A Part IV. line	11c. See Form 9	90. Part X. line 13
	b) Book value			of-year market value
(1)				
(2)			21	
(3)				
(4)	-			
(5)				
(7)				-
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.				
Complete if the organization answered 'Ye	s' on Form 990	, Part IV, line	11d. See Form 9	90, Part X, line 15
(a) Descript				(b) Book value
(1) (2) EQUITY INTEREST IN ESHLEMAN HALL				1 215 000
(3) PREPAID EXPENSES				1,315,000. 5,757.
(4)				37737
(5)				
(6)				
<u>(7)</u> (8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, column (B) line	e 15.)			1,320,757.
Part X Other Liabilities. Complete if the organization answered 'Yes' on Form S	200 Dart IV line 11	o or 11f Coo Form	000 Part V line 2E	
(a) Description of liability	(b) Book value	e of TH. See Form	1 330, Fait A, Illie 23	
(1) Federal income taxes				
(2) TRUSTEE ACCOUNTS	4,998,420			
(3) WITHHELD SIT	1,989	9.		
(4)				
(6)				
(7)				
(8)				
(9)				
(10)		14 X 15 C 10 C		
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	5,000,409	9.		
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote	to the organization's fina	ancial 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	en provided in Part XIII.			

Part XIII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	5,268,188.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12;		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.) SEE PART XIII 2d 5,957.		
e Add lines 2a through 2d	2 e	130,065.
3 Subtract line 2e from line 1	3	5,138,123.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	7.83	
a Investment expenses not included on Form 990, Part VIII, line 7b	2 30 1	
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	5,138,123.
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
Total expenses and losses per audited financial statements	-	E 02E 007
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	9600230	5,035,887.
2617 COM - TO DE DE DE CENTRO DE CONTROL DE		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.) SEE PART XIII 2d -5,957.		
e Add lines 2a through 2d	2 e	-5,957.
3 Subtract line 2e from line 1	3	5,041,844.
4 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.)	000000	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	4 c	5 041 044
Part XIII Supplemental Information.	5	5,041,844.
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 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	V, additiona	al information.
SCHEDULE D, PART XI, LINE 2D OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990		
DEPRECIATION ON TAX NOT INCLUDED ON BOOK	\$ L \$	5,957. 5,957.
SCHEDULE D, PART XII, LINE 2D OTHER EXPENSES AND LOSSES PER AUDITED F/S		
DEPRECIATION ON TAX NOT INCLUDED ON BOOK	L <u>\$</u>	-5,957. -5,957.

SCHEDULE O (Form 990 or 990-EZ)

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.

► Go to www.irs.gov/Form990 for the latest information.

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization ASSOCIATED STUDENTS OF THE UNIVERSITY OF CALIFORNIA

Employer identification number 94-0294680

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE FORM 990 HAS BEEN REVIEWED AND APPROVED BY LINCOLN TAM THE FINANCE SERVICE ANALYST.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

NO OTHER DOCUMENTS AVAILABLE TO THE PUBLIC.

FORM 990, PART IX, LINE 24E OTHER EXPENSES

(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) <u>FUNDRAISING</u>
21,425. 103,963. 39,752. 76,659.	20,625. 103,963. 39,752. 76,659.	800.	
9,830. 152,344. 5,687.	8,602. 151,696. 5,687	1,228. 648.	
71,687. 13,461. 164,674.	71,687. 13,461. 164,674.	2 676	\$ 0.
	21,425. 103,963. 39,752. 76,659. 107,546. 9,830. 152,344. 5,687. 1,902. 71,687. 13,461.	TOTAL PROGRAM SERVICES 21,425. 20,625. 103,963. 39,752. 76,659. 76,659. 107,546. 9,830. 8,602. 152,344. 151,696. 5,687. 1,902. 71,687. 13,461. 13,461. 164,674.	PROGRAM MANAGEMENT & GENERAL 21,425. 20,625. 800. 103,963. 103,963. 39,752. 39,752. 76,659. 76,659. 107,546. 107,546. 9,830. 8,602. 1,228. 152,344. 151,696. 648. 5,687. 5,687. 1,902. 1,902. 71,687. 71,687. 13,461. 13,461. 164,674. 164,674.

CLIENT ASSURDITY ASSOCIATED STUDENTS OF TAIL SMILE	/9	6/30/18		:017 FI	2017 FEDERAL		00 X	DEP	RECIA.	NOIT	SCHI	BOOK DEPRECIATION SCHEDULE				PAGE	GE 2
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CALL LOND 7701799 2703703 0 0 0 0 2019200 0<	5/05		DATE - ACQUIRED .	i .	ĺ		!		l í	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDIUCT	DEPR. BASIS.	PRIOR DEPR.	METHOD	LIFE _RAT	87	3:01PM RENT EPR.
TOTAL LAND TOTAL LAND CASSON 0 0 0 0 20,900 0		1 CAL LODGE - LAND		3/08/18	20,920	l						20,920					0
ACCHORERY NOE COUPMENT 8,526,11 8,536 8,536 8,536 8,536 8,536 8,71 3 PROCEPORAL NSERY 8,724,11 8,237 4,468 8,237 8,71 3 0 AMD COMPUTER + RACKFORM 7,705,12 4,466 8,237 8,237 8,71 3 0 AMD COMPUTER + RACKFORM I SERVE 6,720,13 6,185 8,237 8,237 8,71 3 0 ROCKFORM I SERVE 6,720,13 2,236 2,236 2,236 8,71 3 7,13 0 ROCKFORM I SERVE 6,720,13 2,236 8,237 8,246 8,71 3 7,13 ROCKFORM SEXIEMAN HALL 6,720,13 2,134 8 8,12 8,12 3 1,23 9,12 3 1,23 9,12 3 1,23 9,12 3 1,23 9,12 3 1,23 9,12 3 1,23 9,12 3 1,23 9,12 3 1,23 9,12 3 1,23 <t< td=""><td></td><td>TOTAL LAND</td><td></td><td></td><td>20,920</td><td></td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>20,920</td><td>0</td><td></td><td></td><td></td><td>0</td></t<>		TOTAL LAND			20,920		0	0	0	0	0	20,920	0				0
MACE PRO ZOLF 8,726/11 8,590 8,290 8,726/12 8,590 8,726/12 8,290 8,71 3 0 MACE PRO ZOLF 8/18/11 8/18/12 4/465 8/18/12		MACHINERY AND EQUIPMENT															_
MAC PRO ZOLF 8/18/11 8/281 8/18/11 8/281 8/18/11 9/18/12 AMD OMMPITER + RICKFORM 7/16/12 4/466 4/466 4/466 4/466 4/466 4/466 8/18 5/1 3 0 ROCKFORM TSTRE 6/20/13 6/185 8/185 8/185 8/18 8/1 3 9			8/25/11		8,590							8,590	8,590	S/L			0
AMD COMPUTER + RACKTORM 7/05/12 4/465 4/456 4/456 4/456 8/11 3 0 PROKFORM ISRNE 6/20/13 6/185 5/185 6/185 5/1 3 0 CISCO WCSCABAL STRAIL 6/185 5/2 2.286 6/185 5/1 3 0 CISCO WCSCABAL STRAIL 2.286 2.285 2.286 2.78 5/1 3 7/1 OFF WALL AUT/16 3.282 3 3 2.28 5/4 3 7/2 3 7/2 OFF WALL AUT/16 3.282 3 3 4,382 3 3 4,382 4,783			8/18/11		8,287							8,287	8,287	S/L			0
CHOKFORM I SERVE 6,787.1 6,185 6,185 6,185 6,185 6,185 5,12 3 0 CISCO WS-CZSKIS 7,702.1 2,286 2,286 2,286 2,286 5,12 3 0 CISCO WS-CZSKIS 7,716 13,088 7,12 3,862 1,287 5,12 3 1,287 OFF MLK 5,707.16 13,088 7,148 5,12 3 7,12 3 7,12 OFF MLK 5,707.1 2,164 6,730,71 2,164 6 5,12 3 7,12 3 7,12 PROJECTOR 5,707.1 2,144 2,144 6 5,144 5,14 5,14 3 7,14 PROJECTOR 2,706.17 2,144 2,144 5,14 5,14 3 7,14 PROJECTOR 2,706.17 2,144 2,144 5,14 5,14 3 7,14 PROJECTOR 2,007.1 2,144 3 4,374 5,1 3 1,37 <td></td> <td></td> <td>7/05/12</td> <td></td> <td>4,466</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>4,466</td> <td>4,466</td> <td>S/L</td> <td></td> <td></td> <td>0</td>			7/05/12		4,466							4,466	4,466	S/L			0
CINCAD WS-CESCORS 7/10Z/13 2,286 5,286 5,286 5,1 3 745 CTOV430 ESHIEMAN 2/24/6 2/24/6 2/245 953 5/1 3 745 CTOV430 ESHIEMAN MALL 6/30/16 13/088 3 6 5/1 3 7/1 3 4/328 PODE TOR 6/28/17 2/38/1 2/36 5 4/3 5/1 3 7/3 4/328 PROJECTOR 6/28/17 2/34/3 2/34/3 5/45 5/1 3 7/3 7/3 PROJECTOR 6/28/17 2/34/3 2/34/4 5/3 5/1 3 7/3 7/3 PROJECTOR 2/28/17 2/34/3 2/3 4/3 5/1 3 7/3 7/3 PROJECTOR 2/28/17 2/34/3 3 4/3 5/1 3 7/3 7/3 PROJECTOR 2/3/3 2/3 3 4/3 3 1/3 3 1/3 3 1/3			6/20/13		6,185							6,185	6,185	SVL			0
CTOVASIESHLEMAN 2724/16 2235 933 S.Y. 3 745 OCF/MLX 3/07/16 13,088 S.454 S.Y. 3 745 OCF/MLX 3/07/16 13,088 S.454 S.Y. 3 4,323 A00 ESPIREDANINERY AND EQUIPME S/03/17 22,3500 S.Y. 3 1,227 S.A. 3,362			7/05/13		2,286							2,286	2,286	S/L	က		0
13,008 1			2/24/16		2,235							2,235	683	SYL	m (745
PROJECTOR S/02/17 S/3,500 S/2,134 S/			3/0//16		13,088							13,088	5,454	SVI SVI	m (4,363
FORD 6728/17 23,500 3,1445 4,700 FORD SYSTEM 8/04/16 21,445 5,957 5/1 3 7,148 PROJECTOR 2/06/17 2,203 184 5,957 5/1 3 7,148 PROJECTOR 2/06/17 2,203 18,703 3 7,148 7,148 PROJECTOR 2/06/17 2,203 18 5/1 3 7,148 PROJECTOR 2/06/17 2,203 184 5/1 3 7,148 PROJECTOR 3/06/17 2,203 184 5/1 3 7,148 TOTAL MACHINERY AND EQUIPME 38,331 0 0 0 0 38,331 43,749 5/1 3 7,148 TOTAL DEPRECIATION 281,839 0 0 0 0 0 0 26,222 5,272 5,272 5,272 5,272 5,272 5,272 5,272 5,272 5,272 5,272 5,272 5,272 5,272			5/03/17		2,002							3,802	/974	1/6	יי ני		1,28/
VIDEO/AUDIO SYSTEM 21,445 5,957 5,957 5,148 5,148 7,148 PROJECTOR 2,06/17 2,203 184 5/1 3 7,148 PROJECTOR 2,06/17 2,203 184 5/1 3 7,34 TOTAL MACHINERY AND EQUIPME 98,331 0 0 0 0 0 0 281,890 96,222 7 7,148 TOTAL DEPRECIATION 281,890 0 0 0 0 0 0 281,890 96,222 5,557 GRAND TOTAL DEPRECIATION 281,890 0 0 0 0 0 281,890 96,222 5,557 DEPRECIATION ASSETS SOLD 179,536 0 0 0 0 0 0 0 281,890 96,222 5,597	-		6/28/17		23,500							23,500	3	S/L	ı ıs		4,700
PROJECTOR 2/06/17 2,203 184 S/L 3 734 TOTAL MACHINERY AND EQUIPME 98,331 0 0 0 0 0 0 281,339 43,749 19,705 TOTAL DEPRECIATION 281,890 0 0 0 0 0 0 281,890 96,222 26,237 GRAND TOTAL DEPRECIATION 281,890 0 0 0 0 0 96,222 5,537 DEPRECIATION ASSETS SOLD 179,536 52,282 52,282 5,527 5,957	-		8/04/16		21,445							21,445	2,957	S/L	m		7,148
PME 98,331 0 0 0 0 98,331 43,749 19,705 281,890 0 0 0 0 0 281,890 96,222 26,237 281,890 0 0 0 0 0 281,890 96,222 26,237 179,536 0 0 0 0 0 36,222 26,237 102,354 0 0 0 0 179,536 52,282 5,597			2/06/17	I	2,203	I						2,203	184	S/L	m		734
281,890 0 0 0 0 281,890 96,222 26,237 281,890 0 0 0 0 0 96,222 26,237 179,536 0 0 0 0 0 96,222 26,237 102,354 0 0 0 0 179,536 52,282 5,957		TOTAL MACHINERY AND EQUIPME			98,331		Đ	0	0	0	0	98,331	43,749				19,705
281,890 0 0 0 0 96,222 26,237 179,536 0 0 0 0 179,536 52,282 5,957 102,354 0 0 0 0 0 0 20,280		TOTAL DEPRECIATION		1 11	281,890		<u> </u> 0		0	0		281,890	96,222				26,237
OLD 179,536 0 0 0 0 179,536 52,282 5,957 102,354 0 0 0 0 0 0 20,280		GRAND TOTAL DEPRECIATION		'	281,890	1		0	0	0	0	281,890	96,222				26,237
102,354 0 0 0 0 0 102,354 43,940 20,280		DEPRECIATION ASSETS SOLD			179,536		0	0	0	0	0	179,536	52,282				2,957
		DEPR REMAINING ASSETS		I	102,354			0				102,354	43,940				20,280

	14 344			0 % P		
PAGE 1	03:01PM CURRENT DEPR.	1,152	1,152	322 190 462 380 575	1,929 103 764 532 1,567 485	3,451
 	E BATE.	39 .02564			39 .02564 15 15 15	
	METHOD_ LIEE_BATE	S/L MM		2/1 8/1 8/1 8/1 8/1	1/S 1/S 1/S 1/S 1/S	
	PRIOR DEPR.	29,203	29,203	1,932 691 1,674 1,425 191	5,913 2,048 7,360 1,795 4,700	17,357
DULE	DEPR. BASIS	63,430	63,430	3,382 2,000 4,852 3,987 4,023	18,244 5,640 17,200 11,964 35,250 10,911	80,965
SCHE!	SALVAG /BASIS REDIUT		0		0	0
FION S	PRIOR S DEC. BAL DEPR.		0		0	17
L BOOK DEPRECIATION SCHEDULE ASSOCIATED STUDENTS OF THE UNIVERSITY OF CALIFORNIA	PRIOR 179/ BONUS/ SP. DEPR.		0		0	0
C DEPRED STUDING	SPECIAL DEPR. ALLOW		0	!	0	0
BOOK SOCIAT JNIVERS	CUR 179 BONUS.		0		0	0
ZAL AS	BUS.	.	<u> </u>	2 7 7	4 00 40 -1	so.
2017 FEDERAL	COST/ BASIS	63,430	63,430	3,382 2,000 4,852 3,987 4,023	18,244 5,640 17,200 11,964 35,250 10,911	80,965
2017	DATE	3/08/18		3/08/18 3/08/18 3/08/18 3/08/18	3/08/18 3/08/18 3/08/18 3/08/18	
	DATE ACDUIRED.	7/01/99		7/01/13 1/13/15 11/17/14 12/30/14 2/01/17	5/08/03 1/15/11 3/04/15 7/15/15	Ä
6/30/18 CLIENT ASU0217	5/02/19 NO. DESCRIPTION FORM 990/990-PF	BUILDINGS 2 CAL LODGE - BUILDING	TOTAL BUILDINGS FURNITURE AND FIXTURES	9 WATER HEATER 12 FURNITURE 13 FURNITURE 14 FURNITURE 20 FIAT LUX TORCH	TOTAL FURNITURE AND FIXTURE IMPROVEMENTS 3 PARTITIONS 4 IMPROVEMENTS 11 CAL LODGE IMPROVEMENTS 15 CAL LODGE IMPROVEMENTS 16 CAL LODGE IMPROVEMENTS 16 CAL LODGE IMPROVEMENTS	TOTAL IMPROVEMENTS LAND