Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2015 Open to Public Inspection

<u>A</u>	For the 2015	calendar year, or tax year beginning , and ending				
В	Check if applicable	C Name of organization University of California Stu	ident		D Employe	r identification number
П	Address change	Association				
亓	Name change	Doing business as			94-2	911063
昗	•	Number and street (or P O box if mail is not delivered to street address)		Room/suite	E Telephon	
Ш	Initial return	385 Grand Avenue RM/STE 302			510-	<u>834-8286</u>
	Final return/ terminated	City or town, state or province, country, and ZIP or foreign postal code				
H		Oakland CA 94610			G Gross rec	eipts\$ 617,012
\sqsubseteq	Amended return	F Name and address of principal officer				
	Application pending	Kevin Sabo		H(a) Is this a grou	p return for s	subordinates? Yes X No
		385 Grand Ave		H(b) Are all subo	rdinates incl	uded? Yes No
		Oakland CA 94610		if "No,"	attach a list	(see instructions)
	Tax-exempt status	X 501(c)(3) 501(c) () ◀ (Insert no) 4947(a)(1) or	527	7		
÷		ww.ucsa.org	1 027	H(c) Group exem	ntion numbe	
<u>-</u>				Year of formation 1		
	Form of organization Part I Su			rear or formation	700	M State of legal domicile CA
	T	ummary				
4		escribe the organization's mission or most significant activities:				
Governance	The	UC Student Association (UCSA) is the offic				
Jai	over	: 240,000 undergraduate, graduate and profe	ssional	students	in the	e UC
چ چ	syst	em.		THE THE PARTY OF T	i 1	
<u></u>	2 Check th	nis box ▶☐ if the organization discontinued its operations or disposed of	more than's	5% of its-net as	sets)	
Ö	3 Number	of voting members of the governing body (Part VI, line 1a)	1) s	35
ģ	1		1 7	3000		35
Activities &		of independent voting members of the governing body (Part VI, line 1b)	UN ET	N X W ZOOG	4	
⋛	1	mber of individuals employed in calendar year 2015 (Part V, line 2a)	181		5	7
Ac	6 Total nur	mber of volunteers (estimate if necessary)		· ; · · · ·	-6)	0
	7a Total unr	related business revenue from Part VIII, column (C), line 12			7a_	0
	b Net unre	lated business taxable income from Form 990-T, line 34	-		7b	0
				Prior Year		Current Year
Ф	8 Contribu	tions and grants (Part VIII, line 1h)	į	503	, 980	462,878
2	9 Program	service revenue (Part VIII, line 2g)	Ţ	146	,491	154,038
Revenue	10 Investme	ent income (Part VIII, column (A), lines 3, 4, and 7d)			2	96
æ	11 Other re	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	t			0
	1	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		650	,473	617,012
		and similar amounts paid (Part IX, column (A), lines 1–3)			/ - / -	017,012
			ŀ			———— 0
	1	paid to or for members (Part IX, column (A), line 4)	}	206	470	200 107
es	15 Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5-10)	Ļ	296	,470	328, 197
Expenses	16a Profession	onal fundraising fees (Part IX, column (A), line 11e)	_ [0
ğ	b Total fun	draising expenses (Part IX, column (D), line 25) ▶	0 [
ΩÌ	17 Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)	į	303	,778	347,378
	18 Total exp	penses Add lines 13–17 (must equal Part IX, column (A), line 25)	600	,248	675,575	
	19 Revenue	eless expenses Subtract line 18 from line 12	Ţ		,225	-58,563
Net Assets or	3			Beginning of Curre		End of Year
ets	20 Total ass	sets (Part X, line 16)	ļ		,894	239, 451
Ass	21 Total liab	olities (Part X, line 26)	ļ		,788	12,908
Net	22 Net asse	ets or fund balances. Subtract line 21 from line 20	ľ		,106	226, 543
	ert il Si	gnature Block			, = 00	220,343
			 			
U	nder penalties of	perjury, I declare that I have examined this return, including accompanying schedul				knowledge and belief, it is

arer (other than officer) is based on all information of which preparer has any knowledge

Sign	Signature of officer	
Here	Kevin Sabo	
	Type or print name and title	201
	Print/Type preparer's name	Prepa ers signature
Paid	Marjorie Williams-Jones	Marjorie Wil
Preparer	Firm's name MarjTax	Incorporated
Use Only	3542 Fr	uitvale Ave
	Firm's address Oakland	l, CA 94602-232

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

For Paperwork Reduction Act Notice, see the separate instructions.

	University of Ca.		-2911063	Page 2
	Statement of Program Serv	vice Accomplishments as a response or note to any line in	this Part III	X
	cribe the organization's mission.	is a response of flote to any line in	this rait in	
UCSA pa	rticipates in the	e shared governance of		
advance	higher education	by empowering curren	nt and future studen	ts to
advocat	e for the accessi	bility, affordability,	and quality of the	UC system
_		program services during the year which we	ere not listed on the	
•	990 or 990-EZ?			Yes X No
	scribe these new services on Sche			
services?	anization cease conducting, or mai	ke significant changes in how it conducts, a	ny program	Yes X No
	~	ccomplishments for each of its three larges	t program services, as measured by	
expenses \$		ganizations are required to report the amou		
student systemw about t tuition Please In 2014 IGNITE- aimed t urge th	issues and concertions and these decisions and these decisions. It and fee increase see Schedule O for UCSA conducted Invest in Graduate pass several bis	e proposed by the Reger or further details several student-led of ation Not Incarceration alls and a senate cons ne President to alloca	versity of Californ fully educated and i k in 2014 was to fi ents. campaigns: on, Transform Educat stitutional amendmen	ia nformed ght the ion. IGNITE t, and to
				
4b (Code ⁻) (Expenses \$	including grants of \$) (Revenue \$)
4c (Code) (Expenses \$	including grants of \$) (Revenue \$)
	ram services (Describe in Schedule			
(Expenses		iding grants of \$ 613,425) (Revenue \$	
	am service expenses >	013,423		Form 990 (2015)
AA				1 OHR JJJ (2013)

Part IV	Checklist	of	Ragi	iira	ر د	ch	واريام	
Failta	CHECKHOL	UI.	neui	311 C	uc	761	leuule	. 3

			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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	1		
	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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	()		
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a]]		
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	1 1		
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted	1 1		
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	F 1		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			32
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	3,-	X
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		1	v
0-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
28	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12a		x
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year? If	128		
b	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	1	Y
3	Is the organization a school described in section $170(b)(1)(A)(ii)^2$ If "Yes," complete Schedule E	13		$\frac{x}{x}$
o 4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		$\frac{x}{x}$
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	- 'u		
	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	İ	X
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
•	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	ļ	X
6	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	- [X
7	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
8	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	1	X
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
-	If "Yes," complete Schedule G, Part III	19		X
			000	

		,	Yes	
	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		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	ł		
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	i		
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			٠,
	through 24d and complete Schedule K. If "No," go to line 25a	24a		<u>X</u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	{ }	. }	
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	({	1	•
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
р	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	}	X
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	1 }	}	v
~~	disqualified persons? If "Yes," complete Schedule L, Part II	<u>_26</u>		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	† †	1	
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	0.7	}	x
20	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L,	27		
28		[1	
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
a b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	200		
D	Schedule L, Part IV	28b	- 1	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200	+	
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c]	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	+	$\frac{\ddot{x}}{x}$
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	\ 	+	
-	conservation contributions? If "Yes," complete Schedule M	30	Ì	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	1 1		
•	Part I	31	- 1	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	1		
	complete Schedule N, Part II	32	}	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	- {	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34	[.	_X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable]]		
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	{ }	_ }	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

	Check if Schedule O contains a response or note to any line in this	Part V			
	Onder the deficiency of containing a recipient of the training and the containing and the			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 10			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		ļ	ļ
С	Did the organization comply with backup withholding rules for reportable payments to vendors a	and		l	
	reportable gaming (gambling) winnings to prize winners?		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1		ĺ	
	Statements, filed for the calendar year ending with or within the year covered by this return	2a 7]
b	If at least one is reported on line 2a, did the organization file all required federal employment tax		2b	X	ļ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instru				l
3a			<u>3a</u>	<u> </u>	X
þ	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Sche		<u>3b</u>	<u> </u>	├
4a			}		}
	over, a financial account in a foreign country (such as a bank account, securities account, or ot	her financial	} .	1	
	account)?		4a		X
b	· · · · · · · · · · · · · · · · · · ·			1	{
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Fina	ncial Accounts		'	ĺ
_	(FBAR)	0			ų.
5a	• , , , , ,		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tr	ansaction	5b 5c	 -	 ^
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	did the	<u> 50</u>	 	 -
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and organization solicit any contributions that were not tax deductible as charitable contributions?	uid trie	6a		x
b		ributions or	_ oa_		
D	gifts were not tax deductible?	Indutions of	6b]
7	Organizations that may receive deductible contributions under section 170(c).				
· a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly	y for goods			
	and services provided to the payor?	, ,	7a		ĺ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which	n it was			
	required to file Form 8282?		7c	L	<u></u>
d	If "Yes," indicate the number of Form's 8282 filed during the year	7d		1	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal ber		7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit		7f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization fi		7g		——
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		? 7h		·
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund main	ntained by the			1
_	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?	.0	9a 9b	┟──┤	
_ b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person Section 501(c)(7) organizations. Enter	,	90		·····
10	Initiation fees and capital contributions included on Part VIII, line 12	10a			ļ
a · b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources			i i	ļ
	against amounts due or received from them.)	11b		. [Į.
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu o	f Form 1041?	12a		·
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	[i I	[
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?	_	13a	 -	
	Note. See the instructions for additional information the organization must report on Schedule C)	[]	i İ	
b	=	الما			
	the organization is licensed to issue qualified health plans	13b		<u> </u>	ı
С	Enter the amount of reserves on hand	13c	14a	 	X
14a	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Sch	hadula O	14a		
<u>b</u>	it yes, has it lied a Form 720 to report mese payments in No, provide an explanation in Sci	iconic O		n 990	(2015)
DAA			. 011		(=0.0)

	Check if Schedule O contains a response or note to any line in this Part VI					X									
Sec	tion A. Governing Body and Management					——————————————————————————————————————									
		_			Yes	No									
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	35												
	If there are material differences in voting rights among members of the governing body, or														
	if the governing body delegated broad authority to an executive committee or similar	}													
	ommittee, explain in Schedule O														
b	nter the number of voting members included in line 1a, above, who are independent 1b 35														
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with														
	any other officer, director, trustee, or key employee?														
3	Did the organization delegate control over management duties customarily performed by or under the direct														
	supervision of officers, directors, or trustees, or key employees to a management company or other person?		I	3		X									
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was file	d?		4		X									
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5	x	X									
6	Did the organization have members or stockholders?														
7a															
	one or more members of the governing body?			7a		<u> </u>									
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,														
	stockholders, or persons other than the governing body?			7b		X									
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y	ear by	the following:												
а	The governing body?			8a	X										
b	Each committee with authority to act on behalf of the governing body?			8b	X										
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		1		1										
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		<u> </u>									
Sec	Section B. Policies (This Section B requests information about policies not required by the Internal Revenue (
40-	Doddha an an an aban ha a land aban ban han a ban a ban a thirt a C				Yes	<u>No</u>									
	Did the organization have local chapters, branches, or affiliates?			10a		<u>X</u>									
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,														
110	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?														
11a h															
b 122	, , , , , , , , , , , , , , , , , , , ,														
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give i		anthata O	12a	X										
b b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	ise io i	COMMICTS	12b	^										
·	describe in Schedule O how this was done			120	x										
13	Did the organization have a written whistleblower policy?		ŀ	12c	$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$										
14	Did the organization have a written document retention and destruction policy?			14	$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$										
15	Did the process for determining compensation of the following persons include a review and approval by			-17-											
. •	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			- 1											
а	The organization's CEO, Executive Director, or top management official			15a	x										
b	Other officers or key employees of the organization		ł	15b	X										
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).														
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			Ì											
	with a taxable entity during the year?			16a		Х									
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			1	1										
	organization's exempt status with respect to such arrangements?		Ţ	16b											
Sec	tion C. Disclosure														
17	List the states with which a copy of this Form 990 is required to be filed ▶ None														
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 5	501(c)	(3)s only)												
	available for public inspection. Indicate how you made these available. Check all that apply.														
	Own website X Another's website X Upon request Other (explain in Schedule O)														
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of inte	rest p	olicy, and												
	financial statements available to the public during the tax year														
20	State the name, address, and telephone number of the person who possesses the organization's books and rec	ords I	•												
UC	SA Agency Offices 385 Grand Avenue			_											
Oa	kland CA 9461	0	510-	<u>-83</u>	<u>4-8</u> 2	<u> 272</u>									

Form 990 (20	015) University of California Student 94-2911063	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Independent Contractors	Employees, and
	Check if Schedule O contains a response or note to any line in this Part VII	
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	
1a Complete organization's	this table for all persons required to be listed. Report compensation for the calendar year ending with or within the stax year.	
List all	of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of	

- 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.

Check this box if neither the org	(B)	Ì			C)			(D)	(E)	(F)
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	related	함	Instit	Officer	Ey		Former	(W-2/1099-MISC)	(14-21033-141100)	organization
	organizations below dotted	recto	ution	Į ģ	Į ∰	esto	ਰੁ			and related organizations
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		tee	Institutional trustee	-		Highest compensated employee		ĺ		
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DAA	<u> </u>							·		Form 990 (2015)

Comparison Com	(A) Name and title	(B) Average hours per week (list any	(C) Position (do not check more than o box, unless person is both officer and a director/truste					an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the		
Director Q		related organizations below dotted	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		(W -2 1033-MISO)	org ar	ganization id related	ì
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c Total from continuation sheets to Part VII, Section A	Director		x						o	0			0
d Total (add lines to and to) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 0 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 X Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address Compensation for services 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization. 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization. 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization. 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization. 3 2 2 2 2.275		5	_						116 025				075
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		of compensation	n fro	m th	e or	ganı	zatio	<u>n</u> ▶		0		Form 99	90 (2015)

Part VII Section A. Officers	s, Directors, Tr	uste	es,	Key	Em	ploy	ees,	and Highest Compensa	ted Employees (continue	:d)	
(A)	(B)	l			C)			(D)	(E) Reportable	(F)	
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	below dotted line)	ÿa_t	onal		employee	88			`	organizations	
	,,	Individual trustee or director	Institutional trustee	•	ee	Highest compensate employee	1	•			
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c Total from continuation she	ets to Part VII.	Sec	tion	Δ			•				
d Total (add lines 1b and 1c)	,010 10 1 471 711,	-		•			•				
2 Total number of individuals (in	ncluding but not	limit	ed to	tho	se li	sted	abov	ve) who received more tha	n \$100 000 of		
reportable compensation from				,		J.00	aso	vo, who recoived more tha	,,		
										Yes	No
3 Did the organization list any for								ployee, or highest compen-	sated		
employee on line 1a? If "Yes,"										3	
4 For any individual listed on lin organization and related organ											
organization and related orgal individual	nizations greater	rına	пфі	50,0	007	II Y	es,	complete Schedule J for s	ucn	4	
5 Did any person listed on line	1a receive or ac	crue	com	pens	satio	n fro	m a	ny unrelated organization o	or individual		
for services rendered to the o										5	
Section B. Independent Contracto	ors										_
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compensation from the organ	ization. Report of	comp	ens	<u>atıon</u>	for	the c	aler	ndar year ending with or wi	thin the organization's tax		
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received more than \$100,000	or compensatio	JI ITC	nn tr	ie Of	yai ii.	<u> 2</u>				5 000	

Fait All Sectionist Culter	3, 2 00(013, 11	4310		,		5.0 y .		and riightest compensa	ted Employees (continue	~		
(A) Name and title	(B) Average hours per week (list any hours for	bo	x, unle icer ai	Pos check ess pe nd a d	erson i	than o s both r/trust	an	(D) (E) Reportable Reportable compensation from related organization (W-2/1099-MISC)			(F) Estimated amount of other compensate from the	of tion
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensate employee	Former	(W-2/1099-MISC)	(W 2 1033 WIGO)		organizatio and relate organizatio	on ed
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(30) Conrad Contro		1			-				-			
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1b Sub-total												<u>_</u>
c Total from continuation she	ets to Part VII,	Sec	tion	Α			>					
d Total (add lines 1b and 1c) 2 Total number of individuals (in	polydina but not	limit	od to	tho	no lie	tod	abox	(a) who recoved more tha	n \$100 000 of			
reportable compensation from			-U 10		SE 113	sieu -	abov	— · · · · · · · · · · · · · · · · · · ·				
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4 For any individual listed on line	e 1a, is the sum	of re	eport	table	con	npen	satio			Ī		
organization and related organization	nizations greatei	r thar	1 \$15	50,00	00.5	It "Y€	es,"	complete Schedule J for s	uch	f	4	ĺ
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for services rendered to the o		Yes,	' con	nplet	te So	hed	ule .	J for such person			5	
Section B. Independent Contractor1 Complete this table for your fire		ens:	ated	ınde	pend	dent	con	tractors that received more	e than \$100,000 of			
compensation from the organi	zation Report of	omp	ensa	ation	for t	he c	alen	dar year ending with or wil	thin the organization's tax	/ear		
Name and	(A) business address						<u>L</u> .		(B) tion of services		Compe	C) ensation
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2 Total number of independent	contractors (inc	ludin	g bu	t not	lımıl	ed to	o the	ose listed above) who		ľ		***************************************
received more than \$100,000	or compensatio	n tro	m th	e org	ganız	ation	<u>n</u> ▶			£	Form 9	90 (2015)
												_ (=0.0)

Form 990 (2015) University of California Student 94-2911063 Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D) Revenue (A) Total revenue excluded from tax exempt function business revenue under sections 512-514 revenue 1a Federated campaigns 1a 435,405 1b **b** Membership dues c Fundraising events 1c d Related organizations 1đ Program Service Revenue Contributions, 6,500 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 20,973 1f g Noncash contributions included in lines 1a-1f 462,878 h Total. Add lines 1a-1f Busn Code 66,214 66,214 2a Conference Registration Fees 59,987 59, 987 b SLC Registration Fees 25,200 25,200 UCOP CBP Reimbursement 2,637 2,637 SLC and Congress Sponsors f All other program service revenue 154,038 Total. Add lines_2a-2f Investment income (including dividends, interest, 96 and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6a Gross rents **b** Less rental exps c Rental inc or (loss d Net rental income or (loss) Gross amount fron (ii) Other (i) Securities sales of assets other than inventor **b** Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 а **b** Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Busn. Code Miscellaneous Revenue 11a b С

▶

617,012

0

All other revenue

Total. Add lines 11a-11d

Total revenue. See instructions

Secti	on 501(c)(3) and 501(c)(4) organizations must Check if Schedule O contains a resp			omplete column (A)	
Do n	ot include amounts reported on lines 6b,		(B)	(C)	(D)
	b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		expenses	general expenses	oxpenses -
•	and domestic governments See Part IV, line 21				
0	Grants and other assistance to domestic		- 	·····	····
2					
2	Individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign	ŀ			
	individuals See Part IV, lines 15 and 16				
	·				
4	Benefits paid to or for members			·····	
5	Compensation of current officers, directors,	119,110	93,468	25,642	
_	trustees, and key employees	119,110	93,400	25,042	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	149,077	149,077		
7	Other salaries and wages	149,011	149,011		
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	36,821	36,483	338	
9	Other employee benefits	23, 189	18,551	4,638	
10	Payroll taxes	23, 103	10,331	4,030	
11	Fees for services (non-employees).	į			
a	Management	660		660	
b	Legal	8,538		8,538	
C	Accounting	6,336		6,336	
a	Lobbying	,			
e	Professional fundraising services See Part IV, line 1	<u> </u>			
T	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column	2 554	1 000	1 556	
	(A) amount, list line 11g expenses on Schedule O)	3,554	1,998	1,556	
12	Advertising and promotion	12 052	9,114	3,938	
13	Office expenses	13,052 20,652	17,570	3,082	
14	Information technology	20,632	17,370	3,002	
15	Royalties	34,200	27,360	6,840	
16	Occupancy	115,044	110,808	4,236	
17	Travel		110,808	4,230	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	139,027	138,677	350	
19	Conferences, conventions, and meetings	388	130,011	388	
20	Interest	8,000	8,000	300	
21	Payments to affiliates	1,293	1,293		
22	Depreciation, depletion, and amortization	1,484	1,233	1,484	
23	Insurance Other expanses Itemize expanses not covered	-, 303		-, 404	
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) Subscriptions	1,026	1,026	+	
a	Reserve Expenses	317	1,020	317	
b	Filing Fees	143		143	
C	riting rees				
d	All other evenences				
e 25	•	675,575	613,425	62,150	0
25	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	073,373	013,423	02,130	
26	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				- 000

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 238,728 114,817 Cash-non-interest bearing 2 85,067 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 62,166 33,084 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 7 Notes and loans receivable, net 8 8 Inventories for sale or use 1,000 1,000 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or <u>6,776</u> 10a other basis. Complete Part VI of Schedule D 1,293 10b 10c 5,483 b Less. accumulated depreciation Investments—publicly traded securities 11 11 12 12 Investments-other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 13 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 301,894 239,451 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 5,715 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X <u>11,073</u> <u>12,908</u> of Schedule D 16,788 12,908 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 285, 106 226,543 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 226,543 239,451 285,106 Total net assets or fund balances 33 33 301,894 Total liabilities and net assets/fund balances

orm	1 990 (2015) University of California Student 94-2911063			Pag	<u>je 12</u>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	61	7,0	12
2	Total expenses (must equal Part IX, column (A), line 25)	2		5,5	
3	Revenue less expenses. Subtract line 2 from line 1	3	-5	8,5	563
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	28	5,1	106
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	22	6,5	543
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	_			
			Ţ	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			4	
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	_	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			T	
	reviewed on a separate basis, consolidated basis, or both:			l	
	Separate basis Consolidated basis Both consolidated and separate basis		!	ţ	
b	Were the organization's financial statements audited by an independent accountant?		2b	ľ	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both.		[[- {	
	Separate basis Consolidated basis Both consolidated and separate basis		i 1		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		- {	- 1	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	İ	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a	- }	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		_ 3b	\	
			Form	990	(2015)

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.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

University of California Student

Employer Identif

rs.gov/form990. Inspection
Employer Identification number

			Association				94-29	11063
P	art I	Reas	on for Public Charity	/ Status (All organization	is must	comple	ete this part.) See instri	uctions.
Part I Reason for Public Charity Status (All organizations must complete this part.) See instruction the organization is not a private foundation because it is. (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Altach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hocity, and state. 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) 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 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 exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purpose one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, superv						uctions. The hospital's name, in blic I gross Its rposes of (3). Check g		
	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.							
e		requirement Check this b functionally i	(see instructions). You mus lox if the organization receive ntegrated, or Type III non-fu	ganization generally must satisi st complete Part IV, Sections ed a written determination from inctionally integrated supporting	A and D the IRS t	, and Pa i hat it is a	rt V.	ss
f			er of supported organizations					
<u>g</u> () Nam		wing information about the s	(III) Type of organization (described on lines 1–9 above (see instructions))	listed in you docur	ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
_					Yes	No		
A) 	_							
B)	`							
C)								
D)								
E)								

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	545,658	324,536	565,090	503,980	462,878	2,402,142
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	545,658	324,536	565,090	503,980	462,878	2,402,142
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						2,402,142
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	545,658	324,536	565,090	503,980	462,878	2,402,142
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				2	96	98
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	114,138	74,470	132,951	146,491	154,038	622,088
11	Total support. Add lines 7 through 10						3,024,328
12	Gross receipts from related activities, etc.	(see instructions)				12	
13	First five years. If the Form 990 is for th		st, second, third, fo	ourth, or fifth tax ye	ear as a section 50)1(c)(3)	
	organization, check this box and stop her	•	, , , ,	,			▶ □
Sec	tion C. Computation of Public S		ntage				
14	Public support percentage for 2015 (line 6	6. column (f) dıvıde	d by line 11, colum	ın (f))		14	79.43%
15	Public support percentage from 2014 Sch			· //		15	80.56%
16a	33 1/3% support test-2015. If the organ			13, and line 14 is	33 1/3% or more.		
	box and stop here. The organization qual				•		▶ X
b	33 1/3% support test-2014. If the orga				15 is 33 1/3% or m	nore.	
	check this box and stop here . The organ					•	▶ □
17a	10%-facts-and-circumstances test—20				6a, or 16b, and lin	e 14 is	
	10% or more, and if the organization mee	_					
	Part VI how the organization meets the "fa				•		
	organization			9	p	p	▶ □
b	10%-facts-and-circumstances test—20	14. If the organiza	tion did not check a	a box on line 13. 1	6a. 16b. or 17a. ar	nd line	, ,
-	15 is 10% or more, and if the organization	_					
	Explain in Part VI how the organization me				•		
	supported organization				-1	- -,	▶ □
18	Private foundation. If the organization di	d not check a box	on line 13, 16a, 16	b, 17a, or 17b, ch	eck this box and s	ee	
_	instructions		,	. ,			<u> </u>

Schedule A (Form 990 or 990-EZ) 2015 University of California Student
Part III Support Schedule for Organizations Described in Section 509(a)(2)

Capport Concasio for Cigamizations Decoribed in Cootion Coota,(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

	tion A. Public Support			,		,	
Caler	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge	· · · · · · · · · · · · · · · · · · ·					
6	Total. Add lines 1 through 5		ļ		 -		
7a	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						
8	Public support. (Subtract line 7c from line 6)						
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6				<u> </u>	ļ — — —	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	·	<u></u>				
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	·					
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12.)			!	ļ.		
14	First five years. If the Form 990 is for th	e organization's fi	rst, second third	fourth, or fifth tax	vear as a section	501(c)(3)	
	organization, check this box and stop he l		,		,		▶ □
Sec	tion C. Computation of Public S	Support Perce	entage				
15	Public support percentage for 2015 (line 8	B, column (f) divid	led by line 13, colu	ımn (f))		15	%
16	Public support percentage from 2014 Sch	nedule A, Part III,	line 15			16	%
Sec	tion D. Computation of Investment	ent Income P	ercentage				
17	Investment income percentage for 2015 (line 10c, column	(f) divided by line	13, column (f))		17	%
18	Investment income percentage from 2014					18	%
19a	33 1/3% support tests—2015. If the org						
	17 is not more than 33 1/3%, check this t	•	-			•	▶ □
b	33 1/3% support tests—2014. If the org						
	line 18 is not more than 33 1/3%, check t						▶ ∐
20	Private foundation. If the organization di	d not check a box	x on line 14, 19a, c	or 19b, check this	box and see instru	ictions	

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A.	ΑII	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).
- 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
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b 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
- 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?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI.**
- 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 79 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.**
- 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.**
- 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
1		
•		
_ 2		
3a		
3b		
3с		
4a		
4b		_
4c		
5a		
5b		
5c		
6		
7		
8		
Ū		
0-		
9a		
9b		
9c		
10-		
10a		
10b		<u></u>

Distributable Amount. Subtract line 5 from line 4, unless subject to		1	
nergency temporary reduction (see instructions)	6		
Check here if the current year is the organization's first as a non-functionally-integrated instructions).	d Typ	e III supporting organization	ın (see

4

5

6

Enter greater of line 2 or line 3

Income tax imposed in prior year

	ule A (Form 990 or 990-EZ) 2015 University of Cal			L063 Page
Par		Supporting Organi	zations (continued)	
	on D - Distributions			Current Year
	Amounts paid to supported organizations to accomplish exempt purp			
2	Amounts paid to perform activity that directly furthers exempt purpos		}	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of sup	ported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions.			
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organizations	zation is responsive		
	(provide details in Part VI) See instructions			
9	Distributable amount for 2015 from Section C, line 6	 		
10	Line 8 amount divided by Line 9 amount		,	
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015			
a			***********	
b				
c				
d	From 2013			
е	From 2014	<u> </u>		
f	Total of lines 3a through e			
<u>g</u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			
	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2015 from Section			
	D, line 7 \$			***************************************
a_	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
<u>C</u>	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2015, if			
	any Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			***************
6	Remaining underdistributions for 2015 Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see	}		
	instructions)	 		
7	Excess distributions carryover to 2016. Add lines 3j			
	and 4c.			
8	Breakdown of line 7			***************************************
a				
b	<u>,,,,,,,, </u>			
	Excess from 2013			
d	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2015

e Excess from 2015

Schedule A (Form 990 or 990-EZ) 2015 University of California Student 94-2911

Page 8

Part VI

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.)

Part II, Line 10 - Other Income Detail

Other income

\$ 468,050

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

section 501(c) and section 527

Attach to Form 990 or Form 990-EZ.

Open to

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is described below.

Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below Do not complete Part I-B
- · Section 527 organizations Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• 5	Section 501(c)(4), (5), or (6) organizations: Complete Part	III			
	e of organization University of Calif			Employer iden	tification number
	Association			94-29110	63
Pai	t I-A Complete if the organization is exe	mpt under section 501	(c) or is a sec	tion 527 organiz	ation.
1	Provide a description of the organization's direct and indir	ect political campaign activities	s in Part IV		
2	Political expenditures			▶ \$	
3	Volunteer hours				
	··········				
Pa	TIB Complete if the organization is exe		(c)(3)		
1	Enter the amount of any excise tax incurred by the organi			▶ \$	
2	Enter the amount of any excise tax incurred by organization		55	▶ \$	
3	If the organization incurred a section 4955 tax, did it file F	orm 4720 for this year?			Yes No
	Was a correction made?				Yes No
	If "Yes," describe in Part IV.	mpt under cection 501	(a) avaant aa	otion 501/a\/2\	
	rt I-C Complete if the organization is exe		'	Cilon 50 I(C)(3).	
1	Enter the amount directly expended by the filing organizat	tion for section 527 exempt fur	ICUON	► ¢	
2	activities Enter the amount of the filing organization's funds contrib	uted to other organizations for	section	▶ \$	
2	Enter the amount of the filing organization's funds contrib 527 exempt function activities	died to other organizations for	Section	▶ \$	
3	Total exempt function expenditures. Add lines 1 and 2 Er	nter here and on Form 1120-P	ΩI	ν Ψ	
3	line 17b	no. Here and our out 1720 I	OL,	▶ \$	
4	Did the filing organization file Form 1120-POL for this year	ar?		PΨ	Yes No
5	Enter the names, addresses and employer identification r		political organizat	ions to which the filing	
•	organization made payments. For each organization listed				
	the amount of political contributions received that were pro-	·	= =		
	as a separate segregated fund or a political action commi	ttee (PAC) If additional space	is needed, provide	e information in Part IV	/
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
		1		filing organization's	contributions received and
		1		funds If none, enter -0-	promptly and directly delivered to a separate
				,	political organization If
			: 		none, enter -0-
(1)					
		 			
(2)					•
· 0\					
(3)		ţ.			
(4)					
(4)				[
(5)		 			
٠-,					
(6)					
. ,		!]		

Yes No

Sch	nedule C (F	orm-990 or 990-EZ) 2015 Univer	sity of	California	Student	94-291106	
P	art II-A	Complete if the organiza	ation is exen	npt under section	n 501(c)(3) a	nd filed Form 5768	(election under
		section 501(h)).					
A	Check		n belongs to	an affiliated group	o (and list in l	Part IV each affiliated	d group member's
		name, address, EIN, e	expenses, and	d share of excess	lobbying exp	penditures).	
В	Check	▶ ☐ if the filing organizatio	n checked bo	ox A and "limited of	control" provi	sions apply.	
		Limits on Lobb	vina Expend	litures		(a) Filing	(b) Affiliated
		(The term "expenditures" me	ans amounts	paid or incurred.)	organization's totals	group totals
1	a Total lo	obbying expenditures to influence pub	lic opinion (grass	s roots lobbying)		12,616	
		obbying expenditures to influence a le				14,902	
	c Total lo	obbying expenditures (add lines 1a an	d 1b)		1	27,518	
		exempt purpose expenditures			<u> </u>	585,907	
		xempt purpose expenditures (add line	es 1c and 1d)			613,425	
	f Lobbying nontaxable amount. Enter the amount from the following table in both				[
	column					117,014	
	If the a	mount on line 1e, column (a) or (b) is:	The lobbying n	ontaxable amount is:			
	Not ove	r \$500,000	20% of the amou	unt on line 1e		1	
	Over \$5	500,000 but not over \$1,000,000	\$100,000 plus 1	5% of the excess over \$	500,000		
	Over \$1	,000,000 but not over \$1,500,000	\$175,000 plus 1	0% of the excess over \$	1,000,000	1	
	Over \$1	,500,000 but not over \$17,000,000	\$225,000 plus 5	% of the excess over \$1	500,000		
	Over \$1	7,000,000	\$1,000,000				
	g Grassi	roots nontaxable amount (enter 25% of	of line 1f)		1	29,254	
	h Subtra	ct line 1g from line 1a. If zero or less,	enter -0-		1	0	
	i Subtra	ct line 1f from line 1c. If zero or less,	enter -0-		į	0	
	j If there	e is an amount other than zero on eith	er line 1h or line	11, did the organizatio	n file Form 4720		

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total			
2a Lobbying nontaxable amount	167,194	111,648	107,915	117,014	503,771			
b Lobbying ceiling amount (150% of line 2a, column(e))		·			755,657			
c Total lobbying expenditures	12,763	10,032	9,605	27,518	59,918			
d Grassroots nontaxable amount	41,798	27,912	26,979	29,254	125, 943			
e Grassroots ceiling amount (150% of line 2d, column (e))					188,915			
f Grassroots lobbying expenditures	1,370	1,123	302	12,616	15,411			

Schedule C (Form 990 or 990-EZ) 2015

reporting section 4911 tax for this year?

Sche		<u>-291</u>				Page 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N (election under section 501(h)).	OT file	ed F	orm 5768		
		(8	3)	(b)	
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	Vac	No	Ama		
ies	cription of the lobbying activity.	Yes	No	Amo	unt	_
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or	}				
	referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?		_			
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		*******			
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	1 1				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u> </u>				
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 50)1(c)({	5), oı	section		
	501(c)(6).					
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		<u> </u>
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			_2_		<u> </u>
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		<u></u>
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 50					
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No	," OR	(p)	Part III-A, I	ine :	3, is
	answered "Yes."	 -				
1			1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of					
	political expenses for which the section 527(f) tax was paid).					
	Current year		2a			
b	Carryover from last year		2b			

Part IV Supplemental Information

and political expenditure next year?

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information

3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues
 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying

Schedule C, Part II-B, Line 1

5 Taxable amount of lobbying and political expenditures (see instructions)

UCSA lobbies the California legislature and executive branch on legislation of interest to University of California students. Lobbying is done in several ways; one, by the UCSA Government Relations Director, who ensures that no more than fifteen percent of his time is spent on lobbying; two, by students who conduct in-district and Capitol lobby visits; and three, by

Part IV Supplemental Information (continued)

student attendees at the Student Lobbying Conference. Specific legislation being lobbied for and against are reported to the California Secretary of State, are reported on an annual basis and are openly advertised on this organization's website.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

OMB No 1545-0047 Open to Public

mspection Employer identification number Name of the organization University of California Student Association 94-2911063 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part ! Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Sche	dule D (Form 990) 2015 Univers:				94-2911		Page 2
Pa	rt III Organizations Maintain	ing Collections	of Art, Historic	al Treasure	s, or Other	Similar Ass	ets (continued)
3	3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):						
а	Public exhibition	d 🗌	Loan or exchange	programs			
b	Scholarly research	e 🗍	Other				
С	Preservation for future generations						
4	Provide a description of the organization's XIII	s collections and expla	in how they further	the organization	n's exempt purp	oose in Part	
5	During the year, did the organization solic	ut or receive donations	of art historical tre	asures or othe	er eimiler		
	assets to be sold to raise funds rather that						Yes No
Pa	rt IV Escrow and Custodial		part of the organiza	20.0110			100100
,	Complete if the organization 990, Part X, line 21.		es" on Form 990), Part IV, lir	ne 9, or repo	rted an amoi	unt on Form
1a	Is the organization an agent, trustee, cust	todian or other interme	ediary for contribution	ons or other ass	sets not		
	included on Form 990, Part X?		•				Yes No
b	If "Yes," explain the arrangement in Part 2	XIII and complete the f	ollowing table				
		,	3				Amount
c	Beginning balance					1c	
	Additions during the year					1d	
	Distributions during the year					1e	
ť	Ending balance					1f	
2a	Did the organization include an amount or	n Form 990 Part X Jir	ne 21 for escrow or	custodial acco	unt liability?		Yes No
	If "Yes," explain the arrangement in Part 2						
	ert V Endowment Funds.	Kiii. Officer fiere ii the	explanation has bet	on provided on	I dit XIII		
r·E	Complete if the organiza	tion answered "Ve	es" on Form 990	Part IV lin	ne 10		
	Complete ii the organiza	(a) Current year	(b) Prior year	(c) Two yes		Three years back	(e) Four years back
10	Paginning of year balance	(a) Garrent year	(b) Frior year	(6) 1 110 761	ars back (u)	Tille years back	(e) i oui years back
la h	Beginning of year balance Contributions			_ 	+		
D O		 	 -		+-		
	Net investment earnings, gains, and losses		<u> </u>				
	Grants or scholarships	ļ	ļ				
е	Other expenditures for facilities and	}	1	Ì			1
	programs		 				
f	Administrative expenses		ļ				
g	End of year balance	L	<u></u>	l			
2	Provide the estimated percentage of the o	current year end balan	ce (line 1g, column	(a)) held as:			
а	Board designated or quasi-endowment	%					
_	Permanent endowment ► %						
С	Temporarily restricted endowment ▶	%					
	The percentages on lines 2a, 2b, and 2c	•					
3a	Are there endowment funds not in the pos	ssession of the organi	zation that are held	and administer	ed for the		c
	organization by:						Yes No
	(i) unrelated organizations						3a(i)
	(ii) related organizations						3a(ii)
b	If "Yes" on line 3a(ii), are the related organ	nızatıons lısted as requ	uired on Schedule F	የ ?			3b
4	Describe in Part XIII the intended uses of		dowment funds				
Pa	rt VI Land, Buildings, and Ed						
	Complete if the organiza	<u>tion answered "Ye</u>	es" on Form 990), Part IV, Iir	ne 11a. See	Form 990, Pa	art X, line 10.
	Description of property	(a) Cost or other	basis (b) Cost	or other basis	(c) Accumul	lated	(d) Book value
		(investment)		other)	depreciati	ion	
1a	Land						
b	Buildings						
С	Leasehold improvements						
	Equipment			6,776		1,293	5,483
е	Other						
	. Add lines 1a through 1e. (Column (d) mu	ust equal Form 990, P	art X, column (B), I	ne 10c)			5,483

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" of	on Form 990. Part IV.	line 11b. See Form 99	00. Part X. line 12.
	(a) Description of security or category	(b) Book value	(c) Method o	
	(including name of security)		Cost or end-of-ye	ar market value
(1) Financial o	derivatives			
•	eld equity interests	<u> </u>	<u> </u>	
(3) Other			 	
(A)			 	
(B)			 	-
(C)				
(D)	•			
(E)			ļ	
(F)				
(G)			 	
(H)	(1) 15 000 D 1V 1 (D) 1 1 10 1 N	}		
Part VIII	n (b) must equal Form 990, Part X, col. (B) line 12) ► Investments—Program Related.	1	<u> </u>	
Part Vill	Complete if the organization answered "Yes" of	on Form 990 Part IV	line 11c See Form 00	In Part Y line 13
	(a) Description of investment	(b) Book value	(c) Method o	
	(a) Description investment	(b) Book Value	Cost or end-of-ye	
(1)		_		
(2)		 		
_(3)				
(4)			<u> </u>	
(5)			 	
(6)		 		
(7)		 		
(8)			 	· · · · · · · · · · · · · · · · · · ·
(9)	in (b) must equal Form 990, Part X, col. (B) line 13) ▶	 	 	
Part IX	Other Assets.		<u> </u>	
, 2014 /17	Complete if the organization answered "Yes" of	on Form 990, Part IV,	line 11d. See Form 99	0. Part X. line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				<u> </u>
(4)				
(5)				
(6)	<u> </u>	~		
_(7)				
(8)				
(9)	(1) (2) (3) (4) (4) (5) (4) (5)			 -
The second secon	n (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.			L
Part X	Complete if the organization answered "Yes" of	on Form 990 Part IV	line 11e or 11f See F	orm 990 Part Y
	line 25.	on romi 330, raitiv,	interire of TH. Oce IV	onn 330, ran A,
1.	(a) Description of liability	(b) Book value		
	income taxes			
	it Card Payable	12,908		
	Paid Memberhip Dues			
(4)				
(5)]	
(6)]	
(7)			1	
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 25.) ▶	12,908		
	uncertain tax positions In Part XIII, provide the text of the fo			
organization's	liability for uncertain tax positions under FIN 48 (ASC 740).	Check here if the text of the	e footnote has been provided	I in Part XIII

<u>che</u>	dule D (Form 990) 2015 University of California Stu	dent_	94-291106	53	Page 4
Pa	rt Xf Reconciliation of Revenue per Audited Financial Stater	nents Wit	h Revenue per	Return.	
	Complete if the organization answered "Yes" on Form 990,	Part IV, li	ne 12a.		
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.				
а	Net unrealized gains (losses) on investments	2a]]	
b	Donated services and use of facilities	2b]]	
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d]]	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b	•		4c	
5_	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	
Pa	art XII Reconciliation of Expenses per Audited Financial State			er Retui	'n.
	Complete if the organization answered "Yes" on Form 990,	Part IV, li	ne 12a.		
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.] [
а	Donated services and use of facilities	2a]]	
b	Prior year adjustments	2b]]	
C	Other losses	2c	·	1 1	
d	Other (Describe in Part XIII)	2d		1 1	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	,		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.]]			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a]]	
b	Other (Describe in Part XIII)	4b	·····]	
C	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	
De	ort YIII Supplemental Information				

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4, Part X, line 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

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.

2015

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 inspection

University of California Student Association

Employer identification number 94-2911063

Form 990, Part III, Line 4a - First Accomplishment

aims to promote a culture of consent through awareness, education, and advocacy for improved resources at both the campus and state levels.

JOBS! - Accomplishments included presenting recommendations to administration from the results of a systemwide survey evaluating the effectiveness of professional development programs available to graduate and professional students pursuing both academic and non-academic careers.

UConsent - UConsent is the UC-wide campaign against sexual assault, which

And perennial initiatives such as:

Fund the UC - Fund the UC is committed to long term funding solution for Higher Education.

UCweVote - Each electoral cycle, UCSA trains a statewide network of students in electoral action to develop a new generation of student leaders. Through our voter registration and GOTV efforts, students ensure that their voices are heard in local, state and national elections by electing individuals who are more supportive of public education and then by holding them accountable once they reach office.

UCSA works closely with the UC Office of the President on the overall systemwide budget, tuition and fees, financial aid issues, campus climate, online education, mental health, campus violence, and student health care. As the official voice of the UC students, UCSA nominates students to sit on UC systemwide committees and select UC Regent Standing Committees. and appoints students to sit on Special Committees. These committees deal with critical policy issues that affect every student in the UC system, and in some cases students beyond the UC.

94-2911063

Annually, UCSA conducts three large educational conferences: the UCSA Congress, the UC Student of Color Conference, and the Student Lobby Conference. At these conferences, and on campuses on a regular basis, we educate students about the issues that are affect them as students and how to take action on those issues. We create and distribute supportive materials on these issues that are distributed on campuses, including the state budget and how it might impact students.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders

The University of California Student Association has as its members all

University of California students. UCSA is a student-run, student-led

organization with a Board of Directors composed of students elected or

appointed by our member student governments. UCSA's Board consists of one

voting member per association, usually the External or Executive Vice

President. The Board Members elect, from its membership, the following

officers: President, Board Chair, and Secretary/Finance Officer.

Additionally, each voting member may appoint two nonvoting board members, a

Campus Organizing Director and Legislative Liaison.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 The complete 990 with all schedules are distributed to all officers and directors in advance of filing for their review.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
The UCSA Board of Directors adopted a Conflict of Interest Policy on
May12,2012 which includes the following language...

Article VI Annual Statements

Each director, principal officer and member of a committee with governingboard-delegated powers shall annually sign a statement that affirms suchperson:

- a. Has received a copy of the conflicts of interest policy,
- b. Has read and understands the policy,
- c. Has agreed to comply with the policy, and
- d. Understands the Organization is charitable and in order to maintain its federal tax exemption it must engage primarily in activities that accomplish one or more of its tax-exempt purposes.

Form 990, Part VI, Line 15a - Compensation Process for Top Official Compensation for the Executive Director is determined by the Board after careful consideration and review of salary comparable to similar positions within California.

Form 990, Part VI, Line 15b - Compensation Process for Officers

Compensation for board officers is determined by the Board after careful consideration and review of salary comparable to similar positions within California.

Compensation for key staff employees is determined by the Board's hiring committee in consultation with the Board and Executive Director and in compliance with the UCSA Personnel Policy.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation All governing documents are available on UCSA's website.

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation

Accrued Income Prior Year Reversed

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