Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation)

OMB No. 1545-0047 Open to Public

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Inspection JUL 1, 2012 and ending JUN 30, 2013

Α	For the	2012 calendar year, or tax year beginning $\ \ JUL\ 1$, $\ 2012$ and ending	<u>J</u> UN 30, 201	3
В	Check if applicable	UNIVERSITY STUDENT UNION, INC.	D Employer identi	fication number
	Addres change	S CALIFORNIA STATE UNIVERSITY, NORTHRIDGE		
	Name change Initial	Doing Business As		7321859
	return Terminated	TOTTE NORDHOFF STREET		-677-2491
L	Amend return	City, town, or post office, state, and ZIP code	G Gross receipts \$	12,761,542.
	Application	NORTHRIDGE, CA 91330-0272	H(a) Is this a group	
	pendin	F Name and address of principal officer: USEPH ILLUMINATE	for affiliates? H(b) Are all affiliates i	Yes X No
$\overline{\Gamma}$	Tax-exe			a list. (see instructions)
		HTTP://USU.CSUN.EDU/	H(c) Group exempt	
				M State of legal domicile: CA
		Summary	-	,
_	1 1	Briefly describe the organization's mission or most significant activities: THE MISS	SION OF THE U	NIVERSITY
ű	;	STUDENT UNION IS TO FOSTER THE ACHIEVEMENT C	F STUDENTS'	EDUCATIONAL
'n		Check this box if the organization discontinued its operations or disposed of r		assets.
Ş.				16
ၓ	1	Number of independent voting members of the governing body (Part VI, line 1b)		
≪ v		Fotal number of individuals employed in calendar year 2012 (Part V, line 2a)		
iŧi		Fotal number of volunteers (estimate if necessary)		
Activities & Governance		Fotal unrelated business revenue from Part VIII, column (C), line 12		
ĕ		Net unrelated business taxable income from Form 990-T, line 34		
_	 "	vet unrelated business taxable income from 1 onn 350 1, line 04	Prior Year	Current Year
	8 (Contributions and grants (Part VIII, line 1h)	452,559	
ne			9,573,294	
Revenue		Program service revenue (Part VIII, line 2g) nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	442	
æ	1		1,631,242	
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11,657,537	
_		Forth and similar amounts paid (Part IX, solumn (A), line 12)	42,873	
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0	
	I	Benefits paid to or for members (Part IX, column (A), line 4)	5,749,090	- 1
Expenses	15 3	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0,740,000	
)en	loai	Professional fundraising fees (Part IX, column (A), line 11e)	0	• • •
Ä		Total full distribution of the first state of the f	3,682,182	4,508,506.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	9,474,145	11,035,791.
		Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,183,392	
_ 2	19	Revenue less expenses. Subtract line 18 from line 12		
Net Assets or Fund Balances		Fatal assate (Dart V. Hand O)	Beginning of Current Yea 6,977,790	
ASS Bals	20	Fotal assets (Part X, line 16)	2,162,754	
let /	21	Fotal liabilities (Part X, line 26)	4,815,036	
	22 art II	Net assets or fund balances. Subtract line 21 from line 20	4,013,030	• 0,440,030•
_		ties of perjury, I declare that I have examined this return, including accompanying schedules and st	atamanta and to the heat of	my knowledge and balish it is
				illy knowledge and belief, it is
uue	, correct	, and complete. Declaration of preparer (other than officer) is based on all information of which prep	I	
٥.		Signature of officer	Date	
Sig		•	Duto	
He	re	JOSEPH ILLUMINATE, ASSOCIATE DIRECTOR Type or print name and title		
_		· · · · · · · · · · · · · · · · · · ·	Date Check	I II PTIN
Da!		Print/Type preparer's name Preparer's signature	if	
Pai		KURT KILWEIN	self-empl	
	· L	Firm's name NSBN LLP	Firm's EIN	95-2399533
USE	Only	Firm's address 9454 WILSHIRE BLVD., 4TH FLOOR		/210\ 272 2521
		BEVERLY HILLS, CA 90212-2907	Phone no.	(310) 273-2501
Ма	y the IF	S discuss this return with the preparer shown above? (see instructions)		X Yes No

CALIFORNIA STATE UNIVERSITY, NORTHRIDGE

Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	THE UNIVERSITY STUDENT UNION, INC. (USU) AT CAL STATE UNIVERSITY,
	NORTHRIDGE IS A STUDENT CENTERED NON-PROFIT ORGANIZATION THAT WORKS TO
	EXPAND THE COLLEGE EXPERIENCE THROUGH VARIOUS PROGRAMS, SERVICES,
	EMPLOYMENT, AND INVOLVEMENT OPPORTUNITIES. THE USU FIRST OPENED ITS
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 9,654,950. including grants of \$ 43,647.) (Revenue \$ 11,982,003.)
	THE FOLLOWING ARE THE ORGANIZATION'S MAJOR PROGRAMS; EMPLOYMENT
	OPPORTUNITIES; STUDENT RECREATION; STUDENT PROGRAMMING (LECTURES;
	EDUCATIONAL AND ENTERTAINMENT EVENTS); MEETING AND STUDY ROOMS;
	COMPUTER LABS; AND VETERANS AND PRIDE RESOURCE CENTERS. THE PRINCIPAL
	GOAL OF THE ORGANIZATION'S PROGRAMS AND SERVICES IS TO FOSTER THE
	ACHIEVEMENT OF STUDENT'S EDUCATIONAL GOALS BY DEVELOPING A STRONG
	CONNECTION WITH THE CAMPUS.
4b	(Code:) (Expenses \$
	
	
	
4c	(Code: \(\frac{1}{2}\) (Function & including greats of \(\theta\)
40	(Code:) (Expenses \$
	Other program services (Describe in Schedule O.)
4 0	
40	(Expenses \$ including grants of \$) (Revenue \$) Total program corvious expenses \$ 9 654 950.

Form 990 (2012) CALIFORNIA S Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
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		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		_X_
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	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_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_X_
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		77	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		ι,	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	עדי		
.5	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	, 9			

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	24a		Х
	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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			х
27	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26		
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	Х	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Х	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Х	
	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		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			77
00	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?	20	x	

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Form 990 (2012) CALIFORNIA STATE UNIVERSITY, NORTHRIDGE
Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V								
				Yes	No				
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 42							
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0							
С	Did the organization comply with backup withholding rules for reportable payments to vendors and it								
	(gambling) winnings to prize winners?		1c	Х					
2a	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return	2a 541							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?	2b	Х					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction								
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За	Х					
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b	X					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a							
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		Х				
b	If "Yes," enter the name of the foreign country: ▶								
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accounts.							
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transfer	action?	5b		Х				
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he organization solicit			ــ ا				
			6a		X				
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	•							
	were not tax deductible?		6b						
7	Organizations that may receive deductible contributions under section 170(c).		7a		Х				
a									
	b If "Yes," did the organization notify the donor of the value of the goods or services provided?								
С	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
	to file Form 8282?								
d	, , , , , , , , , , , , , , , , , , , ,		7e						
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit obid the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont		7 6						
g	If the organization, during the year, pay premiums, directly of indirectly, on a personal benefit contribution of qualified intellectual property, did the organization file F		7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7 <u>9</u>						
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.								
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at		8						
9	Sponsoring organizations maintaining donor advised funds.								
а			9a						
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b						
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12	10a							
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:	1 1							
а	Gross income from members or shareholders	11a							
b	Gross income from other sources (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)	11b							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1 1	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
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 O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the	المدا							
	organization is licensed to issue qualified health plans	13b							
	Enter the amount of reserves on hand	13c	14-		Х				
	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 Schedu	/a O	14a						
<u>D</u>	ii res, has it lieu a ruiti rzu tu repuit these payments? II rvu, provide an explanation in schedu.	· ·	14b						

Form 990 (2012)

CALIFORNIA STATE UNIVERSITY, NORTHRIDGE

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
•	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a		Ť		
,	more members of the governing body?	7a		Х
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
		7b		х
8	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	10		
а	The governing body?	8a	Х	
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 the	0.5		
Ŭ	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	etion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	Total Data Control of the months and a control of the months and contr		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	100	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a		12a	Х	
b		12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	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 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 organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►CA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website 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 interest policy, an	d finar	ncial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion:		
	JOSEPH ILLUMINATE - 818-677-2839 18111 NORDHOFF STREET, NORTHRIDGE, CA 91330-8272			
	18111 NORDHOFF STREET, NORTHRIDGE, CA 91330-8272			

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Form 990 (2012)

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week	box.	Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee Highest compensated employee Former		Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) SABRINA LOCKEY	1.00	x						0.	0.	0
BOARD CHAIR (2) DEMONTEA THOMPSON	1.00	Λ						0.	0.	0.
BOARD VICE CHAIR	1.00	х						0.	0.	0.
(3) COLLIN JOHNSON	1.00	Δ						0.	0.	
COMMITTEE CHAIR	1.00	х						0.	0.	0.
(4) PERLITA VARELA	1.00	23							•	
COMMITTEE CHAIR		x						0.	0.	0.
(5) MYLES ADKINS	1.00							•		
COMMITTEE CHAIR		х						0.	0.	0.
(6) NICOLE RILEY	1.00									
BOARD MEMBER		Х						0.	0.	0.
(7) CHENICE RAND	1.00									
BOARD MEMBER		Х						0.	0.	0.
(8) SHAHTAJ KHAN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(9) TIFFANY CASTELLANOS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(10) SHOORIDEH ASGARI	1.00								_	_
BOARD MEMBER		Х						0.	0.	0.
(11) ADAN GARAY	1.00								_	_
ASSOCIATED STUDENTS REP.	1 00	Х						0.	0.	0.
(12) ANTHONY SHERRIL	1.00									•
ALUMNI REPRESENTATIVE	1 00	Х						0.	0.	0.
(13) DR. IVOR WEINER	1.00	,,							04 540	20 261
FACULTY REPRESENTATIVE	1 00	Х						0.	84,542.	32,361.
(14) SHARON L. EICHTEN	1.00	X						0.	128,108.	43,514.
ASSOC VP, BUDGET PLANNING & MANAGEME	1.00	Δ						0.	120,100.	43,314.
(15) SHELLEY R. RUELAS ASSOCIATE VP - STUDENT LIF	1.00	х						0.	140,004.	34,389.
(16) HAMMOND, DEBRA L.	40.00	25						0.	140,004.	34,303.
EXECUTIVE DIRECTOR	10.00	х		Х				145,240.	0.	24,304.
(17) MARIANNE M. LINK	1.00			-			\vdash			
STAFF REPRESENTATIVE		х						0.	53,292.	17,417.

232007 12-10-12

orm	UNIVERSI 990 (2012) CALIFORN						-		NC. , NORTHRIDGE	23-7:	321	859	P	age 8
	t VII Section A. Officers, Directors, Trus	tees. Kev Em	olov	ees	and	d Hi	ahe	st C	ompensated Employe	es (continued)				
	(A) Name and title	(B) Average hours per week	Position					one h an	(D) Reportable compensation from	(E) Reportable compensatio from related	n	(F) Estimated amount of other		
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	High est compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS	s	com frorga	pensa om th anizat d relat inizati	e ion ed
41.	Out total						Ļ		145,240.	405,94	16	15	1,9	<u> </u>
	Sub-total Total from continuation sheets to Part V								0.	405,5	0.	тэ.	<u> </u>	0.0
	Total (add lines 1b and 1c)								145,240.	405,94		15	1,9	
2	Total number of individuals (including but r compensation from the organization							no re	·				•	1
_											г		Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s											3		Х
4	For any individual listed on line 1a, is the su	•							•	•			X	
5	and related organizations greater than \$15 Did any person listed on line 1a receive or a	accrue comper	nsat	ion f	rom	any	unr unr	elat	ed organization or indivi	dual for services	Ī	4	Λ	v
Sec	rendered to the organization? If "Yes," comtion B. Independent Contractors	ipiete Schedule	e J f	or sı	ıch	oers	son .					5		X
1	Complete this table for your five highest co	mpensated inc	depe	ende	nt c	onti	racto	ors t	hat received more than	\$100,000 of com	npensa	ation f	rom	
	the organization. Report compensation for	the calendar y	ear (endi	ng w	vith	or w	ithir	n the organization's tax	year.				
	(A) Name and business	address	N	ONE	<u> </u>				(B) Description of s	ervices	С	(C) Compensation		
								-						
								\dashv						

Form **990** (2012)

\$100,000 of compensation from the organization

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

0

Form 990 (2012) CALIFOR:
Part VIII Statement of Revenue

		Check if Schedule O conta	ains a response	to any guestion	in this Part VIII			
				,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ıts ıts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues						
		Fundraising events						
		Related organizations		113,423.				
S,E		Government grants (contributi		, , , , , , , , , , , , , , , , , , ,				
Sign		All other contributions, gifts, grant	. —					
투를	•	similar amounts not included abov						
풀히		Noncash contributions included in lines						
Son	_	Total. Add lines 1a-1f			113,423.			
<u> </u>		Total: / dd ii/c3 Ta Ti		Business Code	,			
ا ه	2 a	STUDENT ACTIVITY FEES		900099	10,540,000.	10,540,000.		
ķ	Za	RECREATION CENTER INCOM	ME.	900099	475,534.	475,534.		
Ser	0	PROGRAM REVENUE		900099	404,505.	404,505.		
E S	d				101,000.	101,000.		
P. B.								
Program Service Revenue	e							
		All other program service reve Total. Add lines 2a-2f			11,420,039.			
	3	Investment income (including			11,110,000.			
	3				584.			584.
	4	other similar amounts)						1
	4 5							-
	3	Royalties	(i) Real	(ii) Personal				
	6 0	Gross rents	592,356.					
		Gross rents Less: rental expenses	0.					
			592,356.					
		Rental income or (loss) Net rental income or (loss)			592,356.			592,356.
		Gross amount from sales of	(i) Securities	(ii) Other	372,330.			332,330.
	<i>i</i> a	assets other than inventory	(i) Securities	(ii) Other				
	h	•						
	b	Less: cost or other basis						
	_	and sales expenses						
		Net gain or (loss)		·····				
ne	0 a	including \$	7					
ě			of					
Other Reven		contributions reported on line	•					
Pe	h	Part IV, line 18						
₫		Less: direct expenses						
		Gross income from gaming ac						
	o a	Part IV, line 19						
	h	Less: direct expenses						
		: Net income or (loss) from gam						
		Gross sales of inventory, less	-	······				
	ю а	•						
	h	and allowances Less: cost of goods sold						
	С	Net income or (loss) from sale						
	11 -	Miscellaneous Revenue COMMISSION REVENUE	C	Business Code 900099	150,129.	150,129.		
	II a		FEES	721000	73,176.	130,123.	73,176,	
	-	·		,21000	,3,1,0.		,3,170	'
	C			900099	411,835.	411,835.		+
		All other revenue			635,140.	±11,055.		
		Total. Add lines 11a-11d Total revenue. See instructions.		.	12,761,542.	11,982,003.	73,176.	592,940.
	12	i utai i eveliue. See ilisti utilolis.			14,/01,344.	1 11, 202, 003.	13,110.	.ı JJZ,J⊈U.

CALIFORNIA STATE UNIVERSITY, NORTHRIDGE

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response to any question in this Part IX **(D)** Fundraising (B) Do not include amounts reported on lines 6b. Management and general expenses Total expenses Program service 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in 43,647. 43.647. the United States. See Part IV. line 22 Grants and other assistance to governments. organizations, and individuals outside the United States, See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and 169,544. 148,351. 21,193. persons described in section 4958(c)(3)(B) Other salaries and wages 5,092,541. 4,455,973. 636,568. Pension plan accruals and contributions (include 181,246. 158,590. 22,656. section 401(k) and 403(b) employer contributions) 637,067. Other employee benefits 728,077. 91,010. 9 312,230. 273,201. 39,029. Payroll taxes 10 Fees for services (non-employees): Management 10,250. 8,969. 1.281. Legal 17,000. 14,875. 2,125. Accounting С Lobbying Professional fundraising services. See Part IV. line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 94,653. 82,821. 11,832. Advertising and promotion 12 13 Office expenses 143,109. 125,220. 17,889. Information technology 14 15 Royalties 1,968,118. 1,722,103. 246,015. 16 Occupancy 104,318. 91,278. 13,040. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 21 Payments to affiliates $3\overline{25,471}$ 313,624. 11,847. 22 Depreciation, depletion, and amortization 97,781. 85,558. 12,223. 23 Other expenses. Itemize expenses not covered 24 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.) 644,228. 644,228. PROGRAM EXPENSES EXPENDABLE EQUIPMENT 341,065. 298,432. 42,633. 154,773. 27,746. 153,926. 308,699. OTHER EXPENSES 194,222. PROFESSIONAL SERVICES 221,968. 28,981. 231,846. 202,865. e All other expenses 11,035,791. 9,654,950. 1,380,841. 0. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Part X | Balance Sheet Check if Schedule O contains a response to any question in this Part X ... Beginning of year End of year 7,214,880. 5,685,836. 1 Cash - non-interest-bearing 1 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 5,406. 41,755. 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, 5 trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 instr). Complete Part II of Sch L 6 7 7 Notes and loans receivable, net 7,273 5,583. Inventories for sale or use 8 8 41,932. 43,585. Prepaid expenses and deferred charges 9 9 10a Land, buildings, and equipment: cost or other 2,723,726. basis. Complete Part VI of Schedule D ______ 10a 1,555,224. b Less: accumulated depreciation 10b 1,002,008. 1,168,502. 10c Investments - publicly traded securities 11 11 12 12 Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 235,335. 8,305. Other assets. See Part IV, line 11 15 15 6,977,790. 8,482,610. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 809,147. 1,154,340. 17 17 Accounts payable and accrued expenses 18 Grants payable 18 229,123. 225,865. 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 iabilities Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties _____ 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 779,291. 999,560. 25 2,162,754. 2,034,572. 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. 4,815,036. 6,448,038. 27 Unrestricted net assets 27 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 4,815,036. 6,448,038. Total net assets or fund balances 33 33 6,977,790. 8,482,610. Total liabilities and net assets/fund balances

Form	1990 (2012) CALIFORNIA STATE UNIVERSITY, NORTHRIDGE	23-7	3 Z I E	359	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets	_				
	Check if Schedule O contains a response to any question in this Part XI		<u></u>			X
1	Total revenue (must equal Part VIII, column (A), line 12)	1				<u>42.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2				91.
3	Revenue less expenses. Subtract line 2 from line 1	3				51.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4	,81	5,0	36.
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		-9	2,7	49.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	6	, 44	8,0	38.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_ [
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.	_			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		[2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis X Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,				
	consolidated basis, or both:					
	Separate basis Consolidated basis X Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si					
	Act and OMB Circular A-133?	-		За		Х

Act and OMB Circular A-133? **b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form **990** (2012)

За