Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat 5.x products, uncheck the "Shrink oversized pages to paper size" and uncheck the "Expand small pages to paper size" options, in the Adobe "Print" dialog. When using Acrobat 6.x and later products versions, select "None" in the "Page Scaling" selection box in the Adobe "Print" dialog.

CLIENT'S COPY
FEBRUARY 11, 2015

MS. JULIE ST. AMOUR GLASS
STUDENT ASSOCIATION AT SUNY AT ALBANY, INC
CAMPUS CENTER, ROOM 116, 1400 WASHINGTON A
ALBANY, NY 12222

DEAR JULIE:

ENCLOSED ARE THE 2013 EXEMPT ORGANIZATION RETURNS, AS
FOLLOWS...

2013 FORM 990

2013 NEW YORK ANNUAL FILING FOR CHARITABLE ORGANIZATIONS

WE HAVE PREPARED THE RETURN FROM INFORMATION YOU FURNISHED US
WITHOUT VERIFICATION. UPON EXAMINATION OF THE RETURN BY TAX
AUTHORITIES, REQUESTS MAY BE MADE FOR UNDERLYING DATA. WE
THEREFORE RECOMMEND THAT YOU PRESERVE ALL RECORDS WHICH YOU
MAY BE CALLED UPON TO PRODUCE IN CONNECTION WITH SUCH
POSSIBLE EXAMINATIONS.

PLEASE REVIEW THE RETURN FOR COMPLETENESS AND ACCURACY.

WE HAVE ENCLOSED MAILING ENVELOPES FOR YOUR CONVENIENCE IN
FILING THE RETURN.

WE RECOMMEND THAT YOU USE CERTIFIED MAIL WITH POST MARKED
RECEIPT FOR PROOF OF TIMELY FILING.

WE SINCERELY APPRECIATE THE OPPORTUNITY TO SERVE YOU. PLEASE
CONTACT US IF YOU HAVE ANY QUESTIONS CONCERNING THE TAX
RETURN.

VERY TRULY YOURS,

CAROL A. HAUSAMANN, CPA
# TAX RETURN FILING INSTRUCTIONS

**FORM 990**

## FOR THE YEAR ENDING

**JUNE 30, 2014**

| Prepared for | MS. JULIE ST. AMOUR GLASS  
|              | STUDENT ASSOCIATION AT SUNY AT ALBANY, INC  
|              | CAMPUS CENTER, ROOM 116, 1400 WASHINGTON A  
|              | ALBANY, NY 12222 |
| Prepared by  | MARVIN AND COMPANY, P.C.  
|              | 11 BRITISH AMERICAN BLVD.  
|              | LATHAM, NY 12110-1405 |
| Amount due or refund | NOT APPLICABLE |
| Make check payable to | NOT APPLICABLE |
| Mail tax return and check (if applicable) to | NOT APPLICABLE |
| Return must be mailed on or before | NOT APPLICABLE |
| Special Instructions | THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. AFTER YOU HAVE REVIEWED THE RETURN FOR COMPLETENESS AND ACCURACY, PLEASE SIGN, DATE AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL TRANSMIT THE RETURN ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED. RETURN FORM 8879-EO TO US BY FEBRUARY 17, 2015. |
THE STUDENT ASSOCIATION AT THE STATE UNIVERSITY OF NEW YORK AT ALBANY, INC.

FRANCIS AGYEMANG
PRESIDENT

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a Form 990 check here X b Total revenue, if any (Form 990, Part VIII, column (A), line 12) 2,889,400.
2a Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9) 2b
3a Form 1120-POL check here b Total tax (Form 1120-POL, line 22) 3b
4a Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5) 4b
5a Form 8868 check here b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c) 5b

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2013 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS an acknowledgement of receipt or reason for rejection of the transmission, the reason for any delay in processing the return or refund, and the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

X I authorize MARVIN AND COMPANY, P.C. to enter my PIN 87503

Enter five numbers, but do not enter all zeros

as my signature on the organization’s tax year 2013 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return’s disclosure consent screen.

If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return’s disclosure consent screen.

Officer's signature __________________________ Date __________________________

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

14095606119 do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2013 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO’s signature __________________________ Date __________________________

EO Must Retain This Form - See Instructions

Do Not Submit This Form To the IRS Unless Requested To Do So
Form 990

Return of Organization Exempt From Income Tax

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

Do not enter Social Security numbers on this form as it may be made public.

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

For the 2013 calendar year, or tax year beginning JUL 1, 2013 and ending JUN 30, 2014

Name of organization: THE STUDENT ASSOCIATION AT THE STATE UNIVERSITY OF NEW YORK AT ALBANY, INC.

Employer identification number: 26-3787503

Address: CAMPUS CENTER, ROOM 116, 1400 WASHINGTON ALBANY, NY 12222

Phone number: 518-442-5640

Gross receipts: 2,889,624.

Tax-exempt status: Yes

Websites: www.albany.edu/studentassociation/

Year of formation: 2008

State of legal domicile: NY

Part I Summary

1. Briefly describe the organization’s mission or most significant activities:

THE STUDENT ASSOCIATION EXISTS TO PROVIDE A UNIVERSITY COMMUNITY THAT FOSTERS SOCIAL, RECREATIONAL,

Activities & Governance

Check if applicable:

2. If the organization discontinued its operations or disposed of more than 25% of its net assets [ ]

3. Number of voting members of the governing body

4. Number of independent voting members of the governing body

5. Total number of individuals employed in calendar year 2013

6. Total number of volunteers (estimate if necessary)

7. Total unrelated business revenue from Part VIII, column (C), line 12

8. Net unrelated business taxable income from Form 990-T, line 34

Revenue

8. Contributions and grants (Part VIII, line 1h)

9. Program service revenue (Part VIII, line 2g)

10. Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12. Total revenue - add lines 8 through 111 (must equal Part VIII, column (A), line 12)

Expenses

13. Grants and similar amounts paid (Part IX, column (A), lines 1-3)

14. Benefits paid to or for members (Part IX, column (A), line 4)

15. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

16. Professional fundraising fees (Part IX, column (A), line 11e)

17. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

18. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)

19. Revenue less expenses. Subtract line 18 from line 12

20. Total assets (Part X, line 16)

21. Total liabilities (Part X, line 26)

22. Net assets or fund balances. Subtract line 21 from line 20

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer

FRANCIS AGYEMANG, PRESIDENT

Type or print name and title

Print/Type preparer’s name

CAROL A. HAUSMANN, CPA

Preparer’s signature

Date

Check if self-employed

PTIN

Telephone number

518-785-0134

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

X Yes No

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION
**Part III | Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III. □

1. **Briefly describe the organization’s mission:**
   
   **THE STUDENT ASSOCIATION EXISTS TO PROVIDE A UNIVERSITY COMMUNITY THAT FOSTERS SOCIAL, RECREATIONAL, EDUCATIONAL, CULTURAL, AND SPIRITUAL OPPORTUNITIES BEYOND THOSE OFFERED IN THE FORMAL CURRICULUM.**

2. **Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?** □ Yes ◯ No
   
   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 ◯ 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.**

   **a.** (Code: ) (Expenses $1,875,418. including grants of $ ) (Revenue $2,889,178.)

   **THE STUDENT ASSOCIATION IS THE STUDENT GOVERNMENT ORGANIZATION FOR UNIVERSITY AT ALBANY UNDERGRADUATES AND CONSISTS OF THREE BRANCHES, EXECUTIVE, LEGISLATURE AND JUDICIAL, AND MULTIPLE CLUBS THAT PROVIDE SOCIAL, RECREATIONAL, EDUCATIONAL, CULTURAL, AND SPIRITUAL OPPORTUNITIES FOR STUDENTS ENROLLED IN THE UNIVERSITY.**

   **b.** (Code: ) (Expenses including grants of $ ) (Revenue $ )

   **c.** (Code: ) (Expenses including grants of $ ) (Revenue $ )

   **d.** Other program services (Describe in Schedule O.)

   (Expenses $ including grants of $ ) (Revenue $ )

4e. **Total program service expenses** ▶ 1,875,418.
### Part IV Checklist of Required Schedules

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Is the organization required to complete Schedule B, Schedule of Contributors?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If &quot;Yes,&quot; complete Schedule C, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>4 <strong>Section 501(c)(3) organizations.</strong> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If &quot;Yes,&quot; complete Schedule C, Part II</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule C, Part III</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part I</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If &quot;Yes,&quot; complete Schedule D, Part III</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part IV</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If &quot;Yes,&quot; complete Schedule D, Part V</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>11 If the organization’s answer to any of the following questions is &quot;Yes,&quot; then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If &quot;Yes,&quot; complete Schedule D, Part VI</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part VII</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If &quot;Yes,&quot; complete Schedule D, Part VIII</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part IX</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Did the organization report an amount for other liabilities in Part X, line 25? If &quot;Yes,&quot; complete Schedule D, Part X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>f Did the organization’s separate or consolidated financial statements for the tax year include a footnote that addresses the organization’s liability for uncertain tax positions under FIN 48 (ASC 740)? If &quot;Yes,&quot; complete Schedule D, Part XI</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12a Did the organization obtain separate, independent audited financial statements for the tax year? If &quot;Yes,&quot; complete Schedule D, Parts XI and XII</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b Was the organization included in consolidated, independent audited financial statements for the tax year? If &quot;Yes,&quot; and if the organization answered &quot;No&quot; to line 12a, then completing Schedule D, Parts XI and XII is optional</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>13 Is the organization a school described in section 170(b)(1)(A)(ii)? If &quot;Yes,&quot; complete Schedule E</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14a Did the organization maintain an office, employees, or agents outside of the United States?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule F, Parts I and IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>15 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 &quot;Yes,&quot; complete Schedule F, Parts II and IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>16 Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? If &quot;Yes,&quot; complete Schedule F, Parts III and IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule G, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule G, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>19 Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? If &quot;Yes,&quot; complete Schedule G, Part III</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>20a Did the organization operate one or more hospital facilities? If &quot;Yes,&quot; complete Schedule H</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b If &quot;Yes&quot; to line 20a, did the organization attach a copy of its audited financial statements to this return?</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>
Part IV Checklist of Required Schedules

21 Did the organization report more than $5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

22 Did the organization report more than $5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III

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

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 25a

24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?

24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

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

25b 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

26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II

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):

   a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

   b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

   c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

29 Did the organization receive more than $25,000 in non-cash contributions? If "Yes," complete Schedule M

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II

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

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

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

   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

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

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

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
Part V  Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V  

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

1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  

1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gaming) winnings to prize winners?  

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.  

2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  

Note.  If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  

3a Did the organization have unrelated business gross income of $1,000 or more during the year?  

3b If "Yes," has it filed a Form 990-T for this year?  If "No," to line 3b, provide an explanation in Schedule O  

4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  

4b If "Yes," enter the name of the foreign country.  


5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  

5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  

5c If "Yes," to line 5a or 5b, did the organization file Form 886-T?  

6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  

6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  

7 Organizations that may receive deductible contributions under section 170(c).  

7a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?  

7b If "Yes," did the organization notify the donor of the value of the goods or services provided?  

7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  

7d If "Yes," indicate the number of Forms 8282 filed during the year  

7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  

7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  

7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  

7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C?  

8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.  

8a Did the organization make any taxable distributions under section 4966?  

9 Sponsoring organizations maintaining donor advised funds.  

9a Did the organization make any taxable distributions under section 4966?  

9b Did the organization make a distribution to a donor, donor advisor, or related person?  

10 Section 501(c)(7) organizations.  

10a Initiation fees and capital contributions included on Part VIII, line 12  

10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  

11 Section 501(c)(12) organizations.  

11a Gross income from members or shareholders  

11b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  

12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  

13 Section 501(c)(29) qualified nonprofit health insurance issuers.  

13a Is the organization licensed to issue qualified health plans in more than one state?  

13b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  

13c Enter the amount of reserves on hand  

14a Did the organization receive any payments for indoor tanning services during the tax year?  

14b If "Yes," has it filed a Form 720 to report these payments?  If "No," provide an explanation in Schedule O  

Yes No
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.

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year

b Enter the number of voting members included in line 1a, above, who are independent

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?

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

5 Did the organization become aware during the year of a significant diversion of the organization’s assets?

6 Did the organization have members or stockholders?

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?

b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

a The governing body?

b Each committee with authority to act on behalf of the governing body?

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization’s mailing address? If “Yes,” provide the names and addresses in Schedule O

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

10a Did the organization have local chapters, branches, or affiliates?

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization’s exempt purposes?

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

db Describe in Schedule O the process, if any, used by the organization to review this Form 990.

12a Did the organization have a written conflict of interest policy? If "No," go to line 13

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done

13 Did the organization have a written whistleblower policy?

14 Did the organization have a written document retention and destruction policy?

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

a The organization’s CEO, Executive Director, or top management official

b Other officers or key employees of the organization

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?

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization’s exempt status with respect to such arrangements?

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ NY

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) available for public inspection. Indicate how you made these available. Check all that apply.

[ ] Own website [ ] Another’s website [X] Upon request [ ] Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial 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 organization: ▶

JULIA ST. AMOUR GLASS – 518-442-5640
CAMPUS CENTER, ROOM 116, 1400 WASHINGTON AVENUE, ALBANY, NY 12222
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.
- 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 organization nor any related organization compensated any current officer, director, or trustee.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) RYAN WITTE</td>
<td>10.00</td>
<td>X</td>
<td>4,250.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>CHAIR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) HARIS ALIC</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>SENATOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) LYLE WEINTRAUB</td>
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<td>X</td>
<td>0.</td>
<td>0.</td>
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</tr>
<tr>
<td>SENATOR</td>
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</tr>
<tr>
<td>(4) JACOB SHERRETT</td>
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<td>SENATOR</td>
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<td></td>
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<tr>
<td>(5) SKYLER DEANGELO</td>
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<tr>
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<tr>
<td>(6) ROBERT FORMAN</td>
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<tr>
<td>(7) EMMA SCHWAB</td>
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<td>(8) JOE MESSMER</td>
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<tr>
<td>(9) JAMES KING</td>
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<tr>
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<tr>
<td>(10) STEPHANIE LEADER</td>
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<tr>
<td>(11) BERORO EFEDORO</td>
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<tr>
<td>(12) MICHAEL GRAY</td>
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<tr>
<td>(13) VANESSA SALAMY</td>
<td>1.00</td>
<td>X</td>
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<tr>
<td>(14) BRADLEY HERSHENG</td>
<td>1.00</td>
<td>X</td>
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<td>0.</td>
<td>0.</td>
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<tr>
<td>SENATOR</td>
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<td></td>
<td></td>
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<tr>
<td>(15) ALEX FLOOD</td>
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<td>0.</td>
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<td>SENATOR</td>
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<tr>
<td>(16) ALEXA CAPPELLA</td>
<td>1.00</td>
<td>X</td>
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<tr>
<td>SENATOR</td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>(17) STEPHANIE AUGUSTIN</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>
### Part VII | Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

#### Section A.

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(18) NADA BELKIN</td>
<td>1.00</td>
<td>SENATOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(19) SHIREEN RAMNATH</td>
<td>1.00</td>
<td>SENATOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(20) KHADIJA CUEVAS</td>
<td>1.00</td>
<td>SENATOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(21) DIANA PARISI</td>
<td>1.00</td>
<td>SENATOR</td>
<td>X</td>
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<td>0.</td>
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<tr>
<td>(22) CASEY OLSZEWSKI</td>
<td>1.00</td>
<td>SENATOR</td>
<td>X</td>
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<td>0.</td>
</tr>
<tr>
<td>(23) ROEVELLE GUSTAVE</td>
<td>1.00</td>
<td>SENATOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(24) STEVEN NEVINS</td>
<td>1.00</td>
<td>SENATOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(25) JONATHAN ROOD</td>
<td>1.00</td>
<td>SENATOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(26) ZACHARY RIPKA</td>
<td>1.00</td>
<td>SENATOR</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
</tr>
</tbody>
</table>

1b Sub-total: 4,250.0.0.0.

2 Total number of independent contractors (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 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.

#### 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.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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: 0.

SEE PART VII, SECTION A CONTINUATION SHEETS
<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position (check all that apply)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(27) COREY CARMELLO</td>
<td>1.00</td>
<td>Senator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(28) CYLASS MARTELL-CRAWFORD</td>
<td>1.00</td>
<td>Senator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(29) CASSIE ORLAN</td>
<td>1.00</td>
<td>Senator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(30) CENANAH HENDERSON</td>
<td>1.00</td>
<td>Senator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(31) ANTHONY BALZANO</td>
<td>1.00</td>
<td>Senator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(32) STANLEY DELACRUZ</td>
<td>1.00</td>
<td>Senator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(33) BENJAMIN ENGWER</td>
<td>1.00</td>
<td>Senator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(34) ASHLEY KLINBERG</td>
<td>1.00</td>
<td>Senator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(35) JAMES PERRY</td>
<td>1.00</td>
<td>Senator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(36) DANIEL MARKISELLO</td>
<td>1.00</td>
<td>Senator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(37) BRITTANY RUSSELL</td>
<td>1.00</td>
<td>Senator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(38) MICHAEL LONCDON</td>
<td>1.00</td>
<td>Senator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(39) FINNEY ABRAHAM</td>
<td>1.00</td>
<td>Senator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(40) CONNOR WILKINS</td>
<td>1.00</td>
<td>Senator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(41) PATRICIA CRONIN</td>
<td>1.00</td>
<td>Senator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(42) ROGER ROOK</td>
<td>1.00</td>
<td>Senator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(43) MATTHEW KRUSH</td>
<td>10.00</td>
<td>Vice Chair</td>
<td></td>
<td>$2,250.00</td>
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</tr>
<tr>
<td>(44) DEVIN CARAVELLO</td>
<td>1.00</td>
<td>Senator</td>
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<tr>
<td>(45) MIKE TORRES</td>
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<td>(46) MICHAEL SNYDER</td>
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<td>Senator</td>
<td></td>
<td></td>
<td>$0.00</td>
</tr>
</tbody>
</table>

Total to Part VII, Section A, line 1c: 

\[ \text{Total} = \sum \text{Reportable compensation} \]
<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (check all that apply)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(47) ALLIE FAVER</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>SENATOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total to Part VII, Section A, line 1c .......................................................... 2,250.
## Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII:  

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants, and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Fundraising events</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Related organizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f All other contributions, gifts, grants, and similar amounts not included above</td>
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<td></td>
</tr>
<tr>
<td>1g Noncash contributions included in lines 1a-1f: $</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>1h Total. Add lines 1a-1f</td>
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### Program Service Revenue

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a STUDENT ACTIVITY FEES</td>
<td>900099</td>
<td>2,388,705</td>
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<tr>
<td>2b ACTIVITY REVENUE</td>
<td>900099</td>
<td>500,473.</td>
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<tr>
<td>2c</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2e</td>
<td></td>
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<tr>
<td>2f All other program service revenue</td>
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<tr>
<td>2g Total. Add lines 2a-2f</td>
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<td>2,889,178.</td>
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<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Investment income (including dividends, interest, and other similar amounts)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>4 Income from investment of tax-exempt bond proceeds</td>
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<tr>
<td>5 Royalties</td>
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</table>

### Other Revenue

<table>
<thead>
<tr>
<th>Other Revenue</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>6a Gross rents</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6b Less: rental expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6c Rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6d Net rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Gross amount from sales of assets other than inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b Less: cost or other basis and sales expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c Gain or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7d Net gain or (loss)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8a Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8b Less: direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8c Net income or (loss) from fundraising events</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9a Gross income from gaming activities. See Part IV, line 19</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9b Less: direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9c Net income or (loss) from gaming activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross sales of inventory, less returns and allowances</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Less: cost of goods sold</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c Net income or (loss) from sales of inventory</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Miscellaneous Revenue

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>11a</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11c</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11d All other revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11e Total. Add lines 11a-11d</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Business Code</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 Total revenue. See instructions.</td>
<td></td>
<td>2,889,178.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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Form 990 (2013)
The Student Association at the State University of New York at Albany, Inc. 26-3787503

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 or note to any line in this Part IX [ ]

<table>
<thead>
<tr>
<th>(A)</th>
<th>(B)</th>
<th>(C)</th>
<th>(D)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total expenses</td>
<td>Program service expenses</td>
<td>Management and general expenses</td>
<td>Fundraising expenses</td>
</tr>
</tbody>
</table>

1. Grants and other assistance to governments and organizations in the United States. See Part IV, line 21
2. Grants and other assistance to individuals in the United States. See Part IV, line 22
3. Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16
4. Benefits paid to or for members
5. Compensation of current officers, directors, trustees, and key employees
6. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)
7. Other salaries and wages
8. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)
9. Other employee benefits
10. Payroll taxes
11. Fees for services (non-employees):
   a. Management
   b. Legal
   c. Accounting
   d. Lobbying
   e. Professional fundraising services. See Part IV, line 17
   f. Investment management fees
   g. Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)
12. Advertising and promotion
13. Office expenses
14. Information technology
15. Royalties
16. Occupancy
17. Travel
18. Payments of travel or entertainment expenses for any federal, state, or local public officials
19. Conferences, conventions, and meetings
20. Interest
21. Payments to affiliates
22. Depreciation, depletion, and amortization
23. Insurance
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.)
   a. ACTIVITY EXPENSES
   b. CONTRIBUTION TO DIPPKI
   c. [Blank]
   d. [Blank]
   e. All other expenses
25. Total functional expenses. Add lines 1 through 24e
26. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

[Check here □] if following SOP 98-2 (ASC 958-720)
## Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

<table>
<thead>
<tr>
<th></th>
<th>Assets</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash - non-interest-bearing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>869,225</td>
<td>1,102,152</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td>38,557</td>
<td>11,417</td>
</tr>
<tr>
<td>5</td>
<td>Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>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</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td>Less: accumulated depreciation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Investments - publicly traded securities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Investments - other securities. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Investments - program-related. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Other assets. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td>1,069,693</td>
<td>1,258,628</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities. Add lines 17 through 26</td>
<td>198,249</td>
<td>300,223</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Liabilities</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>Unrestricted net assets</td>
<td>871,444</td>
<td>958,405</td>
</tr>
<tr>
<td>28</td>
<td>Temporarily restricted net assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>29</td>
<td>Permanently restricted net assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td>Capital stock or trust principal, or current funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>33</td>
<td>Total net assets or fund balances</td>
<td>871,444</td>
<td>958,405</td>
</tr>
<tr>
<td>34</td>
<td>Total liabilities and net assets/fund balances</td>
<td>1,069,693</td>
<td>1,258,628</td>
</tr>
</tbody>
</table>

Organizations that follow SFAS 117 (ASC 958), check here [x] and complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here [ ] and complete lines 30 through 34.
### Part XI: Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td>8</td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
<td>9</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))</td>
<td>10</td>
</tr>
</tbody>
</table>

### Part XII: Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990: Cash X Accrual</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed its method of accounting from a prior year or checked &quot;Other,&quot; explain in Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization’s financial statements compiled or reviewed by an independent accountant?</td>
<td>2a</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization’s financial statements audited by an independent accountant?</td>
<td>2b</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>If &quot;Yes&quot; to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</td>
<td>2c</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>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?</td>
<td>3a</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>b If &quot;Yes,&quot; 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</td>
<td>3b</td>
<td></td>
</tr>
</tbody>
</table>
**Schedule A (Form 990 or 990-EZ) 2013**

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

**Public Charity Status and Public Support**

Name of the organization: THE STUDENT ASSOCIATION AT THE STATE UNIVERSITY OF NEW YORK AT ALBANY, INC.

**Employer identification number:** 26-3787503

**Part I Reason for Public Charity Status**

(All organizations must complete this part.) See instructions.

- **1** A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- **2** A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- **3** A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- **4** A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital’s name, city, and state.
- **5** An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
- **6** A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- **7** 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)(v).
- **8** A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- **9** 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.)
- **10** An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- **11** An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - **a** Type I
  - **b** Type II
  - **c** Type III - Functionally integrated
  - **d** Type III - Non-functionally integrated

- By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

- Provide the following information about the supported organization(s).

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))</th>
<th>(iv) Is the organization in col. (i) listed in your governing document?</th>
<th>(v) Did you notify the organization in col. (i) of your support?</th>
<th>(vi) Is the organization in col. (i) organized in the U.S.?</th>
<th>(vii) Amount of monetary support</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
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<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
## Section A. Public Support

### Calendar year (or fiscal year beginning in)

<table>
<thead>
<tr>
<th>Year</th>
<th>(a) 2009</th>
<th>(b) 2010</th>
<th>(c) 2011</th>
<th>(d) 2012</th>
<th>(e) 2013</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any “unusual grants.”)</td>
<td>2,587,810</td>
<td>2,427,073</td>
<td>2,552,439</td>
<td>2,590,109</td>
<td>2,889,178</td>
<td>13,046,609</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3</td>
<td>2,587,810</td>
<td>2,427,073</td>
<td>2,552,439</td>
<td>2,590,109</td>
<td>2,889,178</td>
<td>13,046,609</td>
</tr>
</tbody>
</table>

### Public support. Subtract line 5 from line 4

<table>
<thead>
<tr>
<th>Year</th>
<th>(a) 2009</th>
<th>(b) 2010</th>
<th>(c) 2011</th>
<th>(d) 2012</th>
<th>(e) 2013</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 Public support</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>13,046,609</td>
</tr>
</tbody>
</table>

## Section B. Total Support

### Calendar year (or fiscal year beginning in)

<table>
<thead>
<tr>
<th>Year</th>
<th>(a) 2009</th>
<th>(b) 2010</th>
<th>(c) 2011</th>
<th>(d) 2012</th>
<th>(e) 2013</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td>2,587,810</td>
<td>2,427,073</td>
<td>2,552,439</td>
<td>2,590,109</td>
<td>2,889,178</td>
<td>13,046,609</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>109, 2,722, 669, 446, 3,946</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5,527</td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through 10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5,527</td>
</tr>
</tbody>
</table>

### Gross receipts from related activities, etc. (see instructions)

<table>
<thead>
<tr>
<th>Year</th>
<th>(a) 2009</th>
<th>(b) 2010</th>
<th>(c) 2011</th>
<th>(d) 2012</th>
<th>(e) 2013</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>13,056,082</td>
</tr>
</tbody>
</table>

## Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th>Year</th>
<th>(a) 2009</th>
<th>(b) 2010</th>
<th>(c) 2011</th>
<th>(d) 2012</th>
<th>(e) 2013</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>13 First five years. If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))

<table>
<thead>
<tr>
<th>Year</th>
<th>(a) 2013</th>
<th>(b) 2013</th>
<th>(c) 2013</th>
<th>(d) 2013</th>
<th>(e) 2013</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>99.93</td>
</tr>
</tbody>
</table>

### Public support percentage from 2012 Schedule A, Part II, line 14

<table>
<thead>
<tr>
<th>Year</th>
<th>(a) 2013</th>
<th>(b) 2013</th>
<th>(c) 2013</th>
<th>(d) 2013</th>
<th>(e) 2013</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>100.00</td>
</tr>
</tbody>
</table>

### 33 1/3% support test - 2013

- If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

### 33 1/3% support test - 2012

- If the organization did not check a box on line 13, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

### 10% -facts-and-circumstances test - 2013

- If the organization did not check a box on line 13, 16a, 16b, and line 14 is 10% or more, and if the organization meets the “facts-and-circumstances” test, check this box and stop here. Explain in Part IV how the organization meets the “facts-and-circumstances” test. The organization qualifies as a publicly supported organization.

### 10% -facts-and-circumstances test - 2012

- If the organization did not check a box on line 13, 16a, 16b, and line 15 is 10% or more, and if the organization meets the “facts-and-circumstances” test, check this box and stop here. Explain in Part IV how the organization meets the “facts-and-circumstances” test. The organization qualifies as a publicly supported organization.

### Private foundation

- If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

---

**THE STUDENT ASSOCIATION AT THE STATE UNIVERSITY OF NEW YORK AT ALBANY, INC. 26-3787503**

**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.)

---

**Stop here**
## Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2009</th>
<th>(b) 2010</th>
<th>(c) 2011</th>
<th>(d) 2012</th>
<th>(e) 2013</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 <strong>Total.</strong> Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 <strong>Public support</strong> (Subtract line 7c from line 6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2009</th>
<th>(b) 2010</th>
<th>(c) 2011</th>
<th>(d) 2012</th>
<th>(e) 2013</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c Add lines 10a and 10b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 <strong>Total support.</strong> (Add lines 9, 10c, 11, and 12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 <strong>First five years.</strong> If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f)</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>%</td>
</tr>
<tr>
<td>16 Public support percentage from 2012 Schedule A, Part III, line 15</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>%</td>
</tr>
</tbody>
</table>

### Section D. Computation of Investment Income Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f)</th>
</tr>
</thead>
<tbody>
<tr>
<td>17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>%</td>
</tr>
<tr>
<td>18 Investment income percentage from 2012 Schedule A, Part III, line 17</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>%</td>
</tr>
<tr>
<td>19a <strong>33 1/3% support tests - 2013.</strong> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19b <strong>33 1/3% support tests - 2012.</strong> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 <strong>Private foundation.</strong> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MISCELLAEOUS

2009 AMOUNT: $ 5,527.
### Part I. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate contributions to (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>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?</td>
<td>Yes</td>
</tr>
<tr>
<td>6</td>
<td>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?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

### Part II. Conservation Easements.

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 an historically important land area
- Protection of natural habitat
- Preservation of an 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.

<table>
<thead>
<tr>
<th></th>
<th>Held at the End of the Tax Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>Total number of conservation easements</td>
</tr>
<tr>
<td>b</td>
<td>Total acreage restricted by conservation easements</td>
</tr>
<tr>
<td>c</td>
<td>Number of conservation easements on a certified historic structure included in (a)</td>
</tr>
<tr>
<td>d</td>
<td>Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register</td>
</tr>
<tr>
<td>2d</td>
<td>Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year</td>
</tr>
<tr>
<td>4</td>
<td>Number of states where property subject to conservation easement is located</td>
</tr>
<tr>
<td>5</td>
<td>Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?</td>
</tr>
<tr>
<td>6</td>
<td>Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year</td>
</tr>
<tr>
<td>7</td>
<td>Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year</td>
</tr>
<tr>
<td>8</td>
<td>Does each conservation easement reported on line 2(d) above qualify for the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?</td>
</tr>
<tr>
<td>9</td>
<td>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.</td>
</tr>
</tbody>
</table>

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>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.</td>
</tr>
<tr>
<td>b</td>
<td>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:</td>
</tr>
<tr>
<td>(i)</td>
<td>Revenues included in Form 990, Part VIII, line 1</td>
</tr>
<tr>
<td>(ii)</td>
<td>Assets included in Form 990, Part X</td>
</tr>
<tr>
<td>2</td>
<td>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:</td>
</tr>
<tr>
<td>a</td>
<td>Revenues included in Form 990, Part VIII, line 1</td>
</tr>
<tr>
<td>b</td>
<td>Assets included in Form 990, Part X</td>
</tr>
</tbody>
</table>
### Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

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):

- [ ] Public exhibition
- [ ] Scholarly research
- [ ] Preservation for future generations
- [ ] Loan or exchange programs
- [ ] Other

4. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? [ ] Yes [ ] No

### Part IV Escrow and Custodial Arrangements

1a. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? [ ] Yes [ ] No

b. If "Yes," explain the arrangement in Part XIII and complete the following table:

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
</tr>
<tr>
<td>1d</td>
</tr>
<tr>
<td>1e</td>
</tr>
<tr>
<td>1f</td>
</tr>
</tbody>
</table>

2a. Did the organization include an amount on Form 990, Part X, line 21? [ ] Yes [ ] No

b. If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.

### Part V Endowment Funds

1a. Beginning of year balance

1b. Contributions

1c. Net investment earnings, gains, and losses

1d. Grants or scholarships

1e. Other expenditures for facilities and programs

1f. Administrative expenses

1g. End of year balance

2. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a. Board designated or quasi-endowment %
- b. Permanent endowment %
- c. Temporarily restricted endowment %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a. Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

b. If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? [ ] Yes [ ] No

### Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Equipment</td>
<td></td>
<td></td>
<td></td>
<td>730,185, 634,217, 95,968.</td>
</tr>
<tr>
<td>e Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c.).) 95,968.
### Part VII - Other Securities

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(F)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total.</strong> (Col. (b) must equal Form 990, Part X, col. (B) line 12.)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part VIII - Program Related

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
</tr>
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<td>9.</td>
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<tr>
<td><strong>Total.</strong> (Col. (b) must equal Form 990, Part X, col. (B) line 13.)</td>
<td></td>
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</tr>
</tbody>
</table>

### Part IX - Other Assets

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
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</thead>
<tbody>
<tr>
<td>1.</td>
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<tr>
<td>9.</td>
<td></td>
</tr>
<tr>
<td><strong>Total.</strong> (Column (b) must equal Form 990, Part X, col. (B) line 15.)</td>
<td></td>
</tr>
</tbody>
</table>

### Part X - Other Liabilities

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

<table>
<thead>
<tr>
<th>(a) Description of liability</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>2. AGENCY FUNDS</td>
<td>14,693</td>
</tr>
<tr>
<td>3. DUE TO AFFILIATE</td>
<td>3,807</td>
</tr>
<tr>
<td>4.</td>
<td></td>
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<tr>
<td>5.</td>
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<td>9.</td>
<td></td>
</tr>
<tr>
<td><strong>Total.</strong> (Column (b) must equal Form 990, Part X, col. (B) line 25.)</td>
<td>18,500</td>
</tr>
</tbody>
</table>

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII [X]
## Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

<table>
<thead>
<tr>
<th></th>
<th>Total revenue, gains, and other support per audited financial statements</th>
<th>1</th>
<th>2,389,151.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Net unrealized gains on investments</td>
<td>2a</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Donated services and use of facilities</td>
<td>2b</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Recoveries of prior year grants</td>
<td>2c</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Other (Describe in Part XIII.)</td>
<td>2d</td>
<td>224.</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
<td>2e</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>3</td>
<td>2,388,927.</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Other (Describe in Part XIII.)</td>
<td>4b</td>
<td>500,473.</td>
</tr>
<tr>
<td>c</td>
<td>Add lines 4a and 4b</td>
<td>4c</td>
<td>500,473.</td>
</tr>
<tr>
<td>5</td>
<td>Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)</td>
<td>5</td>
<td>2,889,400.</td>
</tr>
</tbody>
</table>

## Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

<table>
<thead>
<tr>
<th></th>
<th>Total expenses and losses per audited financial statements</th>
<th>1</th>
<th>2,302,190.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Donated services and use of facilities</td>
<td>2a</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Prior year adjustments</td>
<td>2b</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Other losses</td>
<td>2c</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Other (Describe in Part XIII.)</td>
<td>2d</td>
<td>224.</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
<td>2e</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>3</td>
<td>2,301,966.</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Other (Describe in Part XIII.)</td>
<td>4b</td>
<td>500,473.</td>
</tr>
<tr>
<td>c</td>
<td>Add lines 4a and 4b</td>
<td>4c</td>
<td>500,473.</td>
</tr>
<tr>
<td>5</td>
<td>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)</td>
<td>5</td>
<td>2,802,439.</td>
</tr>
</tbody>
</table>

## 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.

PART X, LINE 2:

**EXPLANATION: UNDER U.S. GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, THE TAX STATUS OF TAX-EXEMPT ENTITIES IS AN UNCERTAIN TAX POSITION, SINCE EVENTS COULD POTENTIALLY OCCUR THAT JEOPARDIZE TAX-EXEMPT STATUS. MANAGEMENT IS NOT AWARE OF ANY EVENTS THAT COULD JEOPARDIZE THEIR TAX-EXEMPT STATUS. THEREFORE, NO LIABILITY OR PROVISION FOR INCOME TAX HAS BEEN REFLECTED IN THE FINANCIAL STATEMENTS. THE STUDENT ASSOCIATION IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS, HOWEVER THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROCESS. THE STUDENT ASSOCIATION'S MANAGEMENT BELIEVES IT IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR YEARS PRIOR TO 2010.**
## Part XIII Supplemental Information (continued)

**PART XI, LINE 2D - OTHER ADJUSTMENTS:**

Realized Loss 224.

**PART XI, LINE 4B - OTHER ADJUSTMENTS:**

Club receipts netted against income 500,473.

**PART XII, LINE 2D - OTHER ADJUSTMENTS:**

Realized Loss 224.

**PART XII, LINE 4B - OTHER ADJUSTMENTS:**

Club receipts netted against income 500,473.
THE STUDENT ASSOCIATION AT THE STATE UNIVERSITY OF NEW YORK AT ALBANY, INC.

EDUCATIONAL, CULTURAL, AND SPIRITUAL OPPORTUNITIES BEYOND THOSE OFFERED IN THE FORMAL CURRICULUM.

A COPY OF THE FINAL FORM 990 WAS MADE AVAILABLE TO BOARD MEMBERS PRIOR TO FILING WITH THE IRS.

ORGANIZATION REGULARLY MONITORED THE CONFLICT OF INTEREST POLICY.

INDIVIDUALS CAN CONTACT THE STUDENT ASSOCIATION OFFICE TO REQUEST COPIES OF FORM 1023 OR FORM 990.

THE PRESIDENT, DIRECTOR OF OPERATIONS AND CONTROLLER ARE RESPONSIBLE FOR THE OVERSIGHT OF THE FINANCIAL STATEMENT AUDIT AS WELL AS THE SELECTION OF THE INDEPENDENT AUDITOR. THERE HAS BEEN NO CHANGE IN THE PROCESS FROM PRIOR YEAR.
## Related Organizations and Unrelated Partnerships

**Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**

**Attach to Form 990.**

**See separate instructions.**

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

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN (if applicable) of disregarded entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Total income</th>
<th>(e) End-of-year assets</th>
<th>(f) Direct controlling entity</th>
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<tbody>
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### Part II  Identification of Related Tax-Exempt Organizations
Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

<table>
<thead>
<tr>
<th>(g) Section 512(b)(13) controlled entity?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>DIPPIKILL, INC. - 56-2443538</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WILDERNESS RETREAT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1400 WASHINGTON AVENUE</td>
<td>FACILITY OPEN TO THE UNIVERSITY COMMUNITY</td>
<td></td>
</tr>
<tr>
<td>ALBANY, NY 12222</td>
<td>NEW YORK</td>
<td>501(c)(3)</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
**Part III**

**Identification of Related Organizations Taxable as a Partnership**

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
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**Part IV**

**Identification of Related Organizations Taxable as a Corporation or Trust**

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
<th>(i) Section 512(b)(13) controlled entity?</th>
</tr>
</thead>
<tbody>
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<td>Yes</td>
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</tbody>
</table>

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**Part V Transactions With Related Organizations**

Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
   - Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
   - Gift, grant, or capital contribution to related organization(s)
   - Gift, grant, or capital contribution from related organization(s)
   - Loans or loan guarantees to or for related organization(s)
   - Loans or loan guarantees by related organization(s)
   - Dividends from related organization(s)
   - Sale of assets to related organization(s)
   - Purchase of assets from related organization(s)
   - Exchange of assets with related organization(s)
   - Lease of facilities, equipment, or other assets to related organization(s)
   - Lease of facilities, equipment, or other assets from related organization(s)
   - Performance of services or membership or fundraising solicitations for related organization(s)
   - Performance of services or membership or fundraising solicitations by related organization(s)
   - Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
   - Sharing of paid employees with related organization(s)
   - Reimbursement paid to related organization(s) for expenses
   - Reimbursement paid by related organization(s) for expenses
   - Other transfer of cash or property to related organization(s)
   - Other transfer of cash or property from related organization(s)

2. If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

<table>
<thead>
<tr>
<th>(a) Name of related organization</th>
<th>(b) Transaction type (a-s)</th>
<th>(c) Amount involved</th>
<th>(d) Method of determining amount involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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<td></td>
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<tr>
<td>(2)</td>
<td></td>
<td></td>
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<td>(6)</td>
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</tbody>
</table>
**Part VI Unrelated Organizations Taxable as a Partnership**

Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Predominant income (related, unrelated, excluded from tax under section 512-514)</th>
<th>(e) Are all Subsections (g) through (i) applicable?</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
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</table>

Schedule R (Form 990) 2013
<table>
<thead>
<tr>
<th>Asset Number</th>
<th>Description of property</th>
<th>Date placed in service</th>
<th>Method/IRC sec.</th>
<th>Life or rate</th>
<th>Line No.</th>
<th>Cost or other basis</th>
<th>Basis reduction</th>
<th>Accumulated depreciation/amortization</th>
<th>Current year deduction</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>FURNITURE, EQUIPMENT AND VEHICLES</td>
<td>000 16</td>
<td>730,185.</td>
<td>578,980.</td>
<td>55,237.</td>
<td>730,185.</td>
<td>0.</td>
<td>578,980.</td>
<td>55,237.</td>
</tr>
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<td>* TOTAL 990 PAGE 10 DEPR</td>
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</tbody>
</table>
Part I  Election To Expense Certain Property Under Section 179  

Note: If you have any listed property, complete Part V before you complete Part I.

1  Maximum amount (see instructions) .................................................. 1  1  500,000.

2  Total cost of section 179 property placed in service (see instructions) 2

3  Threshold cost of section 179 property before reduction in limitation 3  2,000,000.

4  Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- 4

5  Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5

6  (a) Description of property  (b) Cost (business use only)  (c) Elected cost

(a)  

(b)  

(c)  

(b)  

(c)  

Listed property. Enter the amount from line 29 7

8  Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8

9  Tentative deduction. Enter the smaller of line 5 or line 8 9

10  Carryover of disallowed deduction from line 13 of your 2012 Form 4562 10

11  Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11

12  Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12

13  Carryover of disallowed deduction to 2014. Add lines 9 and 10, but enter less than line 12 13

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II  Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

14  Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year 14

15  Property subject to section 168(f)(1) election 15

16  Other depreciation (including ACRS) 16  55,237.

Part III  MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17  MACRS deductions for assets placed in service in tax years beginning before 2013 17

18  If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here 18

Section B - Assets Placed in Service During 2013 Tax Year Using the General Depreciation System

<table>
<thead>
<tr>
<th>(a) Classification of property</th>
<th>(b) Month and year placed in service</th>
<th>(c) Basis for depreciation (business/investment use only - see instructions)</th>
<th>(d) Recovery period</th>
<th>(e) Convention</th>
<th>(f) Method</th>
<th>(g) Depreciation deduction</th>
</tr>
</thead>
<tbody>
<tr>
<td>19a 3-year property</td>
<td></td>
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<td>b 5-year property</td>
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<td>c 7-year property</td>
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<td>d 10-year property</td>
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<td>f 20-year property</td>
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<td>g 25-year property</td>
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<td>h Residential rental property</td>
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<tr>
<td>i Nonresidential real property</td>
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</tbody>
</table>

Section C - Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System

<table>
<thead>
<tr>
<th>(a) Class life</th>
<th>(b) 12-year</th>
<th>(c) 40-year</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

Part IV Summary (See instructions.)

21  Listed property. Enter amount from line 28 21

22  Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. 22  55,237.

23  For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

Form 4562 (2013)
Part V

Listed Property

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information

24a Do you have evidence to support the business/investment use claimed? [ ] Yes [ ] No

24b If "Yes," is the evidence written? [ ] Yes [ ] No

Type of property (list vehicles first)

Date placed in service

Business/investment use percentage

Cost or other basis

Recovery period

Method/Convention

Depreciation deduction

Elected section 179 cost

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? [ ] Yes [ ] No

38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners

39 Do you treat all use of vehicles by employees as personal use? [ ] Yes [ ] No

40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? [ ] Yes [ ] No

41 Do you meet the requirements concerning qualified automobile demonstration use? [ ] Yes [ ] No

Part VI

Amortization

Description of costs

Date amortization begins

Amortizable amount

Code section

Amortization period or percentage

Amortization for this year

Amortization of costs that begins during your 2013 tax year:

Amortization of costs that began before your 2013 tax year:

Total. Add amounts in column (f). See the instructions for where to report.
<table>
<thead>
<tr>
<th>Asset No.</th>
<th>Description</th>
<th>Date Acquired</th>
<th>Method</th>
<th>Life</th>
<th>Unadjusted Cost Or Basis</th>
<th>Bus % Excl</th>
<th>Reduction In Basis</th>
<th>Basis For Depreciation</th>
<th>Accumulated Depreciation</th>
<th>Current Sec 179</th>
<th>Current Year Deduction</th>
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<tbody>
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<td>16</td>
<td>730,185.</td>
<td>730,185.</td>
<td>578,980.</td>
<td>55,237.</td>
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* TOTAL 990 PAGE 10

DEPR

730,185. | 0. 730,185. | 578,980. | 0. | 55,237.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction
<table>
<thead>
<tr>
<th>Asset No.</th>
<th>Description</th>
<th>Date Acquired</th>
<th>Method</th>
<th>Life</th>
<th>Unadjusted Cost Or Basis</th>
<th>* Reduction In Basis</th>
<th>Basis For Depreciation</th>
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<th>Amount Of Depreciation</th>
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# TAX RETURN FILING INSTRUCTIONS

NEW YORK FORM CHAR500

FOR THE YEAR ENDING

JUNE 30, 2014

| Prepared for          | MS. JULIE ST. AMOUR GLASS  
|                       | STUDENT ASSOCIATION AT SUNY AT ALBANY, INC  
|                       | CAMPUS CENTER, ROOM 116, 1400 WASHINGTON A  
|                       | ALBANY, NY 12222 |

| Prepared by           | MARVIN AND COMPANY, P.C.  
|                       | 11 BRITISH AMERICAN BLVD.  
|                       | LATHAM, NY 12110-1405 |

| Mail tax return to    | NYS OFFICE OF ATTORNEY GENERAL  
|                       | CHARITIES BUREAU REGISTRATION SECTION  
|                       | 120 BROADWAY  
|                       | NEW YORK, NY 10271 |

| Return must be mailed on or before | FEBRUARY 17, 2015 |

| Special Instructions | NEW YORK FORM CHAR500 MUST BE SIGNED AND DATED BY BOTH OF THE AUTHORIZED INDIVIDUALS. ALSO BE SURE THAT THE ATTACHED COPY OF FEDERAL FORM 990 HAS BEEN PROPERLY SIGNED AND DATED.  
|                       | ENCLOSE A CHECK FOR $100 MADE PAYABLE TO NYS DEPARTMENT OF LAW. INCLUDE THE ORGANIZATION’S STATE REGISTRATION NUMBER ON THE REMITTANCE. |
1. General Information

For Fiscal Year Beginning (mm/dd/yyyy) 07/01/2013 and Ending (mm/dd/yyyy) 06/30/2014

Check if Applicable: Name of Organization: THE STUDENT ASSOCIATION AT THE STATE UNI
Address Change Employer Identification Number (EIN): 26-3787503
Name Change NY Registration Number: 42-99-68
Initial Filing City / State / ZIP: ALCANY, NY 12222
Final Filing Telephone: 518 442-5640
Amended Filing Email: 
Reg ID Pending Website: WWW.ALBANY.EDU/STUDENTASSOCIATION/

Check your organization’s registration category: ☐ 7A only ☐ EPTL only ☑ DUAL (7A & EPTL) ☐ EXEMPT

Find your registration category in the Charities Registry at www.CharitiesNYS.com

2. Certification

See instructions for certification requirements. Improper certification is a violation of law that may be subject to penalties.

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

President or Authorized Officer: FRANCIS AGYEMANG PRESIDENT
Signature Title Date

Chief Financial Officer or Treasurer: MACKENZIE RINEFIERD COMPTROLLER
Signature Title Date

3. Annual Reporting Exemption

Check the exemption(s) that apply to your filing. If your organization is claiming an exemption under the category (7A and EPTL only filers) or both categories (DUAL filers) that apply to your registration, complete only parts 1, 2, and 3, and submit the certified Char500. No fee, schedules, or additional attachments are required. If you cannot claim an exemption or are a DUAL filer that claims only one exemption, you must file applicable schedules and attachments and pay applicable fees.

☑ 3a. 7A filing exemption: Total contributions from NY State including residents, foundations, government agencies, etc, did not exceed $25,000 and the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during the fiscal year. Or the organization qualifies for another 7A exemption (see instructions).

☐ 3b. EPTL filing exemption: Gross receipts did not exceed $25,000 and the market value of assets did not exceed $25,000 at any time during the fiscal year.

4. Schedules and Attachments

See the following page for a checklist of schedules and attachments to complete your filing.

☐ Yes ☐ No 4a. Did your organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State? If yes, complete Schedule 4a.

☐ Yes ☐ No 4b. Did the organization receive government grants? If yes, complete Schedule 4b.

5. Fee

See the checklist on the next page to calculate your fee(s). Indicate fee(s) you are submitting here:

7A filing fee: $ 
EPTL filing fee: $ 100.
Total fee: $ 100.

Make a single-check or money order payable to: “Department of Law”
**Checklist of Schedules and Attachments**

Check the schedules you must submit with your CHAR500 as described in Part 4:
- If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)
- If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants

Check the financial attachments you must submit with your CHAR500:
- IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable
- All additional IRS Form 990 Schedules including Schedule B (Schedule of Contributors).
- IRS Form 990-T if applicable

If you are a 7A only or DUAL filer, submit the applicable independent Certified Public Accountant’s Review or Audit Report:
- Review Report if you received total revenue and support greater than $250,000 and up to $500,000.
- Audit Report if you received total revenue and support greater than $500,000
- No Review Report or Audit Report is required because total revenue and support is less than $250,000

Note: The Audit and Review requirements are set to change in 2017 and 2021 in accordance with the Non Profit Revitalization Act of 2013. For more details, visit www.CharitiesNYS.com.

**Calculate Your Fee**

For 7A and DUAL filers, calculate the 7A fee:
- $0, if you marked the 7A exemption in Part 3a
- $25, if you did not mark the 7A exemption in Part 3a

For EPTL and DUAL filers, calculate the EPTL fee:
- $0, if you marked the EPTL exemption in Part 3b
- $25, if the NET WORTH is less than $50,000
- $50, if the NET WORTH is $50,000 or more but less than $250,000
- $100, if the NET WORTH is $250,000 or more but less than $1,000,000
- $250, if the NET WORTH is $1,000,000 or more but less than $10,000,000
- $750, if the NET WORTH is $10,000,000 or more but less than $50,000,000
- $1500, if the NET WORTH is $50,000,000 or more

Is my organization a 7A, EPTL or DUAL filer?
- 7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")
- EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY.
- DUAL filers are registered under both 7A and EPTL.

Check your registration category and learn more about NY law at www.CharitiesNYS.com.

Where do I find my organization’s NET WORTH?
NET WORTH for fee purposes is calculated on:
- IRS Form 990 Part I, line 22
- IRS Form 990 EZ Part I, line 21
- IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)).

**Send Your Filing**

Send your CHAR500, all schedules and attachments, and total fee to:

NYS Office of the Attorney General
Charities Bureau Registration Section
120 Broadway
New York, NY 10271