DEPARTMENT OF JUSTICE PAGE 1 of 5

(For Registry Use Only)

STATE OF CALIFORNIA RRF-1 (Rev. 09/2017) MAIL TO: Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470

P.Ö. Bóx 903447 Sacramento, CA 94203-44 STREET ADDRESS: 1300 I Street Sacramento, CA 95814 (916)210-6400

WEBSITE ADDRESS: www.oag.ca.gov/charities

ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code 11 Cal. Code Regs. sections 301-306, 309, 311, and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties. Revenue & Taxation Code section 23703; Government Code section 12586,1. IRS extensions will be honored.

ASSOCIATED STUDENTS INCORPORATED OF CALIFORNIA STATE UNIVERSITY, STANISLAUS Name of Organization			ange of address ended report		
List all DBAs and names the organization uses or has used					
ONE UNIVERSITY CIRCLE Address (Number and Street)		State Cha	arity Registration Number CT 083284		
TURLOCK, CA 95382 City or Town, State, and ZIP Code		Corporation or Organization No. 1800894			
209-667-3827		Fodoral F	mployer ID No. 77-0314370		
Telephone Number E-mail Address			11 ployer 15 No. 77 0311370		-
ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311, and 312) Make Check Payable to Department of Justice					
Gross Annual Revenue Fee Gross Annual Revenue			Fee Gross Annual Revenue		e
Less than \$25,000 0 Between \$100,001 and \$250,000 Between \$25,000 and \$100,000 \$25 Between \$250,001 and \$1 million			Between \$1,000,001 and \$10 million Between \$10,000,001 and \$50 million Greater than \$50 million	\$15 \$22 \$30	25
PART A - ACTIVITIES			Greater trial \$50 million		
For your most recent full accounting period (beginning 07/01/2020 ending 06/30/2021) list:					
Gross Annual Revenue\$ 970,956 Noncash Contributions\$ 0 Total Assets \$ 1,455,383 Program Expenses \$ 535,956 Total Expenses \$ 944,487					
Program Expenses \$					
PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT					
Note: All questions must be answered. If you answer "yes" to any of the questions below, you must attach a separate page providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.					No
During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof, either directly or with an entity in which any such officer, director or trustee had any financial interest?				Yes	х
During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?					х
3. During this reporting period, were any organization funds used to pay any penalty, fine or judgment?					х
4. During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used?					х
5. During this reporting period, did the organization receive any governmental funding?					х
6. During this reporting period, did the organization hold a raffle for charitable purposes?					х
7. Does the organization conduct a vehicle donation program?					х
8. Did the organization conduct an independent audit and prepare audited financial statements in accordance with generally accepted accounting principles for this reporting period?					
9. At the end of this reporting period, did the organization hold restricted net assets, while reporting negative unrestricted net assets?					х
I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, the content is true, correct and complete, and I am authorized to sign.					
	R RUMAYOR		XECUTIVE DIRECTOR (2)	105/	H_
Signature of Authorized Agent Printed I	vame	Tit	Date Date		