Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public
▶ Information about Form 990 and its instructions is at www IRS gov/form990

OMB No 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 07-01-2015 , and ending 06-30-2016

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
THE COLLEGE OF STATEN ISLAND ASSOCIATION

Doing business as

Number and street (or P O box if mail is not delivered to street address) 2800 VICTORY BOULEVARD NO 1C-202
Room/suite

City or town, state or province, country, and ZIP or foreign postal code
STATEN ISLAND, NY 10314

D Employer identification number
13-2933777

E Telephone number
(718) 982-3084

G Gross receipts $ 5,009,806

F Name and address of principal officer
CHRISTOPHER GIORDANO
2800 VICTORY BOULEVARD NO 1C-202
STATEN ISLAND, NY 10314

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website: ▶** WWW CSI CUNY EDU

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1978

M State of legal domicile NY

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
TO DEVELOP AND CULTIVATE EDUCATIONAL, SOCIAL, CULTURAL, AND RECREATIONAL ACTIVITIES AMONG STUDENTS OF THE COLLEGE OF STATEN ISLAND

2 Check this box ▶ ☐ 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 (Part VI, line 1a)	3	13
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	6
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	122
6	Total number of volunteers (estimate if necessary)	6	50
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	695,411	747,282
	9	Program service revenue (Part VIII, line 2g)	2,541,075	3,489,835
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	32,582	28,858
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	662	1,015
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,269,730	4,266,990
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	195,502	214,383
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,756,657	1,931,649
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,633,031	2,496,064
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	3,585,190	4,642,096
	19	Revenue less expenses Subtract line 18 from line 12	-315,460	-375,106

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	3,682,368	3,202,362
	21	Total liabilities (Part X, line 26)	373,851	317,340
	22	Net assets or fund balances Subtract line 21 from line 20	3,308,517	2,885,022

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

Sign Here

****** 2017-03-01
Signature of officer Date

CHRISTOPHER GIORDANO PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
JOHN T O'BRIEN	JOHN T O'BRIEN	2017-03-01		P01253588

Firm's name ▶ EFPR GROUP CPAS PLLC
Firm's EIN ▶ 47-4526160

Firm's address ▶ 6390 MAIN STREET SUITE 200
WILLIAMSVILLE, NY 14221
Phone no (716) 634-0700

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

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 COLLEGE OF STATEN ISLAND ASSOCIATION, INC OF THE CITY UNIVERSITY OF NEW YORK IS A NONPROFIT CORPORATION CREATED FOR THE PRINCIPAL PURPOSE OF DEVELOPING AND CULTIVATING EDUCATIONAL, SOCIAL, CULTURAL, AND RECREATIONAL ACTIVITIES AMONG STUDENTS OF THE COLLEGE OF STATEN ISLAND IT ASSISTS STUDENTS WITH THEIR STUDY, WORK, LIVING, CURRICULAR, AND CO-CURRICULAR ACTIVITIES, AND ASSISTS THE COLLEGE IN ITS STUDENT RELATED OPERATIONS

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

4a (Code) (Expenses $ 964,453 including grants of $) (Revenue $ 139,701)

CHILD CARE - SEE SCHEDULE O QUALITY CHILD CARE AND EARLY EDUCATION PROGRAMS WERE PROVIDED AT THE CHILDREN'S CENTER FOR CHILDREN OF CSI STUDENTS WHILE THEY ATTENDED CLASSES AND PARTICIPATED IN OTHER SCHOOL-RELATED ACTIVITIES ACCOMMODATING APPROXIMATELY 120 CHILDREN PER SEMESTER, THESE PROGRAMS INCLUDED AN INFANT/TODDLER PROGRAM, A PRESCHOOL PROGRAM AND A DEPARTMENT OF EDUCATION-SPONSORED UNIVERSAL PRE-KINDERGARTEN (UPK) PROGRAM THE CHILDREN'S CENTER ALSO SERVED AS A SITE FOR COURSE-REQUIRED STUDENT OBSERVATIONS, FIELDWORK AND WORK STUDY PROGRAMS FOR A PERIOD OF ONE TO 20 HOURS OVER A SEMESTER, APPROXIMATELY 20 CSI EDUCATION STUDENTS WERE ACCOMMODATED AT THE CENTER TO CONDUCT COURSE-RELATED OBSERVATIONS OF CHILDREN AGES SIX MONTHS TO SIX YEARS OF AGE THE OBSERVATIONS OF CHILD DEVELOPMENT OCCURRED FOR A PERIOD OF ONE TO 20 HOURS OVER A SEMESTER ADDITIONALLY, SEVEN STUDENTS FROM THE EDUCATION PROGRAM COMPLETED 150 HOURS OF FIELDWORK EXPERIENCE DURING THE FALL AND SPRING SEMESTER THE CENTER SERVED AS A WORK SETTING FOR SIX COLLEGE WORK-STUDY STUDENTS THE EDUCATIONAL DIRECTOR WORKED WITH A NAEYC (NATIONAL ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN) CONSULTANT AND BEGAN THE PURSUIT OF NATIONAL ACCREDITATION FOR THE CENTER THE EXECUTIVE DIRECTOR WORKED COLLABORATIVELY WITH THE CHILD CARE COUNCIL AT CUNY AND PLAYED AN INSTRUMENTAL ROLE IN SECURING CONTINUED FUNDING FOR CHILDCARE SERVICES ON CAMPUS THE CENTER CONTINUED TO PROVIDE 20 FULL-DAY UPK SEATS FUNDED BY THE NEW YORK CITY DEPARTMENT OF EDUCATION OFFICE OFEARLY CHILDHOOD EDUCATION ADDITIONALLY, THE EDUCATIONAL DIRECTOR AND TWO OF THE HEAD TEACHERS PRESENTED A WORKSHOP ENTITLED "THE "E" IN STEAM" AT THE CUNY CHILD CARE PROFESSIONAL STAFF DEVELOPMENT CONFERENCE THE CHILDREN'S CENTER WAS AWARDED A GRANT THROUGH THE CSI FOUNDATION, WHICH WAS USED TO ENHANCE PARENT INVOLVEMENT AT THE CENTER EXPENSES $964,453 GRANTS $0 REVENUE $139,701

4b (Code) (Expenses $ 2,055,176 including grants of $ 143,927) (Revenue $ 2,055,176)

COLLEGE SUPPORT - SEE SCHEDULE O IN GENERAL, FUNDING WAS PROVIDED TO ASSIST COLLEGE OFFICES WITH PROVIDING QUALITY SERVICES AND PROGRAMS THAT SUPPORT THE COLLEGE'S ACADEMIC MISSION AND ENHANCE THE LEARNING AND DEVELOPMENT OF ITS WIDELY DIVERSE POPULATION OF STUDENTS SUPPORT INCLUDED, BUT WAS NOT LIMITED TO, FUNDING FOR CAMPUS TRANSPORTATION SERVICES (CAMPUS LOOP BUS AND EXPRESS FERRY SHUTTLE BUS SERVICES), PROFESSIONAL AND SUPPORT STAFF IN THE COLLEGE'S OFFICES OF HEALTH AND WELLNESS, STUDENT LIFE, INTERCOLLEGIATE ATHLETICS, INTRAMURAL & RECREATION, AND THE HEALTH AND WELLNESS CENTER AS WELL AS THE CHILDREN'S CENTER ALONGSIDE STANDARD OPERATIONS OF CSI'S INTERCOLLEGIATE PROGRAM, SEVERAL ENDEAVORS WERE FUNDED WITH STUDENT ACTIVITY (SA) FEES IN 2015-16, ASSISTING THE ATHLETICS PROGRAM TO FLOURISH IN MANY AREAS SOME OF THESE ENDEAVORS INCLUDED NEW WASHER/DRYER SYSTEMS, SWIMSUIT WATER EXTRACTORS, PORTABLE BLEACHERS, PROTECTIVE TARPS, PORTABLE AED UNITS, SOCCER FIELD SCOREBOARD, SOFTBALL FIELD AUDIO SOUND SYSTEM AND UTILITY VEHICLES FOR EQUIPMENT TRANSPORT THIS FUNDING HAS HELPED THE COLLEGE STAY AT THE FOREFRONT OF SOME OF THE REGION'S TOP ATHLETIC PROGRAMS AND FACILITIES STUDENT ACTIVITY FEES SUPPORTED A NUMBER OF HEALTH AND WELLNESS SERVICES PROGRAMS AND SERVICES INCLUDING A NURSE PRACTITIONER, PART-TIME NURSING HOURS AND COLLEGE ASSISTANT SUPPORT THERE WERE OVER 1,800 STUDENT VISITS FOR TREATMENT OF COMMON ACUTE ILLNESS AND INJURY, IMMUNIZATIONS AND NUTRITION COUNSELING ADDITIONALLY, THE NURSE PRACTITIONER PROVIDED PHYSICAL EXAMS, ORDERED AND INTERPRETED LAB TESTS AND PRESCRIBED MEDICATION, AS INDICATED DURING THE SPRING SEMESTER, THE NURSE PRACTITIONER PROVIDED 200 HOURS OF PRECEPTOR SERVICES FOR ONE STUDENT FROM THE NURSING DEPARTMENT THE SEXUALLY TRANSMITTED INFECTION TESTING AND TREATMENT PROGRAM WAS UTILIZED BY OVER 270 STUDENTS THE REPRODUCTIVE HEALTH PROGRAM GENERATED OVER 500 APPOINTMENTS RELATED TO GYNECOLOGICAL EXAMS, BIRTH CONTROL AND/OR WOMEN'S HEALTH SYMPTOMS AND TREATMENT FUNDED BY THE SA FEE, 104 STUDENTS RECEIVED THE FLU VACCINE, AND THE TETANUS/TDAP VACCINE WAS MADE AVAILABLE TO STUDENTS TO ASSIST THEM WITH MEETING EDUCATIONAL PLACEMENT REQUIREMENTS AS WELL AS WHEN MEDICALLY NECESSARY ADDITIONALLY, 175 NUTRITION SESSIONS WERE HELD AS PART OF THE NUTRITION/WEIGHT LOSS PROGRAM WHICH WAS PARTIALLY FUNDED WITH SA FEES IN JANUARY 2016, THE HEALTH CENTER WENT "LIVE" WITH AN ELECTRONIC HEALTH RECORD (EHR) WHICH WAS FUNDED BY THE SA FEE THE EHR REPLACED PAPER-BASED MEDICAL CHARTS AND PROVIDED STAFF READY ACCESS TO STUDENT HEALTH INFORMATION ALLOWING FOR MORE EFFICIENT AND COORDINATED PATIENT-CENTERED CARE SUPPORT WAS ALSO PROVIDED FOR HEALTH EDUCATION PROGRAMMING IN THE FORM OF PROMOTIONAL ITEMS AND REFRESHMENTS FOR SELECT EVENTS, INCLUDING THE ANNUAL CUNY WELLNESS FAIR OVER 975 STUDENTS PARTICIPATED IN WELLNESS PREVENTION PROGRAMMING THAT WAS PARTIALLY FUNDED BY SA FEES EVENTS INCLUDED THE ANNUAL "GET FIT" PROGRAM, AND VARIOUS WORKSHOPS RELATED TO SAFER SEX, NUTRITION, AND ALCOHOL ABUSE PREVENTION ADDITIONALLY, TWO ON-LINE HEALTH EDUCATION PROGRAMS WERE PURCHASED VIA SA FEES STUDENT HEALTH 101, AN ON-LINE MAGAZINE, WAS VISITED OVER 1,000 TIMES DURING THE ACADEMIC YEAR THE PERSONALIZED, EVIDENCED-BASED PREVENTION PROGRAM ADDRESSING ALCOHOL AND MARIJUANA USE, ECHECKUP, WAS USED FOR 476 STUDENT SCREENINGS AND HAS BEEN INCORPORATED INTO THE SUBSTANCE ABUSE EDUCATIONAL SANCTIONS PROGRAM ON NOVEMBER 13, 2015, THE COLLEGE OF STATEN ISLAND'S DIVISION OF STUDENT & ENROLLMENT SERVICES / OFFICE OF STUDENT LIFE HOSTED THEIR 8TH ANNUAL STUDENT LEADERSHIP CONFERENCE, THE DNA OF LEADERSHIP OPEN TO CSI AND CUNY STUDENTS, STAFF, FACULTY AND THE GREATER STATEN ISLAND COMMUNITY, THIS EVENT PROVIDED AN OPPORTUNITY FOR OUR COMMUNITY TO MEET, NETWORK, AND DISCUSS WHAT IT TAKES TO BUILD AND EMPOWER LEADERS WITH STRONG COMMUNICATION SKILLS, MORALS, AND ETHICS, AND HOW LEADERS FROM ACROSS VARIOUS FIELDS COULD LEARN FROM EACH OTHER TO ENHANCE AND RENEW OUR ORGANIZATIONS AND COMMUNITIES HERE AT CSI, ON STATEN ISLAND AND BEYOND THIS LEADERSHIP CONFERENCE WAS A FULL-DAY EVENT THAT PROVIDED THE OPPORTUNITY FOR PARTICIPANTS TO ACQUIRE AND DEVELOP THE KNOWLEDGE AND SKILLS NEEDED TO LEAD DIVERSE, ETHICAL CLUBS AND ORGANIZATIONS HERE AT CSI AND IN THE COMMUNITY AT LARGE THE EVENT HAD TWO KEYNOTE SPEAKERS, MS KRISTIN SKARIE AND MR DAVID NAKASHIMA WHO LECTURED ABOUT THE IMPORTANCE OF LEADERSHIP AND DIVERSITY ON AN INDIVIDUAL LEVEL AND AT A MACRO-ORGANIZATIONAL LEVEL THIS PROGRAM, A COLLABORATIVE INITIATIVE OF CAB, SG AND THE ASSOCIATION, WAS MADE POSSIBLE IN PART BY THE SA FEE ADDITIONALLY, FUNDING WAS PROVIDED FOR MUCH NEEDED CALCULATORS TO THE LIBRARY FOR STUDENT USAGE, AND IMPROVEMENTS IN THE GAME CENTER LOCATED IN THE CAMPUS CENTER (FUNDING THE PURCHASE OF NEW GAME CONSOLES AND VIDEO GAMES, AND THE REFURBISHMENT OF THE POOL TABLE AND ITS EQUIPMENT) FUNDING WAS ALSO PROVIDED TO ASSIST IN THE PLANNING OF VARIOUS PROGRAMS ACROSS CAMPUS, INCLUDING PURCHASING TEXTBOOKS FOR STUDENT USE AT THE LIBRARY, THE UNDERGRADUATE RESEARCH CONFERENCE, NEW STUDENT ORIENTATION, FRESHMAN CONVOCATION, MONTHLY INTERNATIONAL COFFEE HOURS, CSI'S GOT TALENT, THE STUDENT AMBASSADOR PROGRAM, MY STORY, PROVIDING FREE EDITIONS OF THE NEW YORK TIMES TO CURRENTLY ENROLLED STUDENTS, LSAT PREPARATION PROGRAMS, A TRIP TO THE UNITED NATIONS, THE ANNUAL STUDENT LEADERSHIP RETREAT AND MORE IN ADDITION, FUNDS WERE ALSO PROVIDED TO PAINT CHILDREN'S CENTER FACILITIES SA FUNDING WAS ALSO PROVIDED FOR THE COLLEGE'S COMMENCEMENT EXERCISES, NURSING PINNING CEREMONIES, ANNUAL AWARDS BANQUETS, THE HONORS CONVOCATION AND OTHER COMMENCEMENT-RELATED ACTIVITIES, SCHOLARSHIPS AND AWARDS, STUDY ABROAD AND TRAVEL ASSISTANCE SCHOLARSHIPS (WHICH FINANCIALLY ASSISTS STUDENTS WHO ARE UNABLE TO AFFORD STUDY ABROAD OPPORTUNITIES AS WELL AS THOSE INVITED TO PRESENT AT ACADEMIC CONFERENCES BY SUBSIDIZING COSTS), COMMUNITY PROPOSALS, LEADERSHIP DEVELOPMENT INITIATIVES AND NEW STUDENT ORIENTATION EXPENSES $2,055,176 GRANTS $143,927 REVENUE $2,055,176

4c (Code) (Expenses $ 630,461 including grants of $) (Revenue $ 586,068)

ATHLETICS & RECREATION - SEE SCHEDULE O IN 2015-16, FUNDING WAS PROVIDED FOR 14 NCAA DIVISION III ATHLETIC TEAMS PLUS CSI'S BUDDING CLUB SPORTS OF MEN'S AND WOMEN'S TRACK & FIELD AND ITS CHEERLEADING SPIRIT SQUAD UNDER THE GUIDANCE AND SUPERVISION OF SOME OF THE REGION'S AND NATION'S BEST COACHES, APPROXIMATELY 220 STUDENT-ATHLETES PARTICIPATED IN APPROXIMATELY 250 HOME AND AWAY CONTESTS ADDITIONALLY, TEAM OVERNIGHT TRIPS FOR BASEBALL, MEN'S BASKETBALL, SWIMMING/DIVING, SOFTBALL, WOMEN'S BASKETBALL, AND CROSS COUNTRY WERE PARTIALLY FUNDED THROUGH THE SA FEE THROUGHOUT THE YEAR, CUNYAC AWARDED CSI WITH OVER 60 YEAR-END AWARDS AND ALL-STAR CITATIONS CSI ATHLETES WERE ALSO CITED WITH NUMEROUS AWARDS FROM OUTSIDE ORGANIZATIONS LIKE THE NATIONAL ASSOCIATION OF BASKETBALL COACHES, METROPOLITAN BASKETBALL WRITERS ASSOCIATION, THE EASTERN COLLEGE ATHLETIC CONFERENCE AND THE NATIONAL SWIMMING COACHES ASSOCIATION OF AMERICA CSI WON CUNYAC CHAMPIONSHIPS IN WOMEN'S SOFTBALL, MEN'S CROSS-COUNTRY, WOMEN'S SOCCER, MEN'S SWIMMING & DIVING, AND MEN'S BASEBALL THREE OTHER CSI SPORTS FINISHED AS CONFERENCE TOURNAMENT RUNNERS-UP OR AS REGULAR-SEASON CHAMPIONS ON THE ACADEMIC SIDE, OVER 40 PERCENT OF CSI'S ATHLETES WERE DESIGNATED AS SCHOLAR-ATHLETES FOUR SUCH ATHLETES WERE HIGHLIGHTED BY THE CUNYAC AS SCHOLAR ATHLETE OF THE YEAR HONORABLE MENTIONS AND ANOTHER WON BOTH CSI'S SCHOLAR-ATHLETE OF THE YEAR HONORS AT THE ANNUAL SA FEE-FUNDED CSI AWARDS BANQUET IN MAY AND THE CUNYAC FEMALE SCHOLAR ATHLETE OF THE YEAR AWARD MOST RECENTLY, THE COLLEGE WAS SELECTED TO HOST THE CUNYAC BASEBALL AND SOFTBALL CHAMPIONSHIPS AND WILL DO SO AGAIN IN 2017 THROUGH THEIR INVOLVEMENT WITH THE INTRAMURAL & RECREATION PROGRAMS, STUDENTS WERE PROVIDED WITH OPPORTUNITIES TO STRENGTHEN THE BODY AS WELL AS THE MIND WHILE PARTAKING IN SOME FRIENDLY COMPETITION OVER 500 STUDENTS PER WEEK TOOK ADVANTAGE OF WEEKLY ON-CAMPUS INTRAMURAL ACTIVITIES INCLUDING MULTIPLE SPORTS LEAGUES, TOURNAMENTS, SPECIAL EVENTS (INCLUDING STUDENTS VS FACULTY/STAFF GAMES), OPEN RECREATION TIME IN THE GYM, AND WEEKLY INSTRUCTIONAL SESSIONS (SWIMMING, TENNIS & PERSONAL/WEIGHT TRAINING SESSIONS) EACH ACTIVITY IMPLEMENTED WAS AIMED AT MEETING THE VARIED INTERESTS OF STUDENTS, REGARDLESS OF THEIR ABILITY OR SKILL, AS WELL AS ENCOURAGING STUDENT INVOLVEMENT, PHYSICAL FITNESS AND BUILDING CAMPUS COMMUNITY THE INTRAMURAL PRESENCE ON SOCIAL MEDIA HAS GROWN WITH THE PROGRAM'S FACEBOOK PAGE REACHING OVER 300 LIKES AND ITS INSTAGRAM PAGE REACHING OVER 240 FOLLOWERS STUDENTS HAVE USED BOTH PLATFORMS TO SHOWCASE THEIR INTRAMURAL PARTICIPATION AND CHAMPIONSHIP WINS FOR ALL LEAGUES AND TOURNAMENTS, STUDENT PARTICIPANTS WERE ELIGIBLE TO WIN GIFT CARDS AND CHAMPIONSHIP T-SHIRTS IN ADDITION, THE INTRAMURAL ADVISORY COUNCIL (IAC) REACHED A HIGH OF 20 MEMBERS WHO VOLUNTEERED THEIR TIME TO PROMOTE AND ASSIST IN MAKING INTRAMURAL EVENTS SUCCESSFUL DURING THE YEAR, THE INTRAMURAL PROGRAM COLLABORATED WITH MULTIPLE DEPARTMENTS INCLUDING HOUSING, THE CENTER FOR INTERNATIONAL SERVICES, HEALTH & WELLNESS CENTER AND THE OFFICE OF STUDENT LIFE TO BRING MORE STUDENTS TOGETHER COLLABORATIVE ACTIVITIES INCLUDED FLOOR WARS, INTERNATIONAL SPORTS DAY, THE ULTIMATE OBSTACLE COURSE AND BUBBLE SOCCER FOR RELAY FOR LIFE ADDITIONALLY, DANNY THE DOLPHIN, THE COLLEGE'S MASCOT, MADE APPEARANCES AT ON- AND OFF-CAMPUS EVENTS INCLUDING NEW STUDENT ORIENTATION, VARSITY SPORTS GAMES, CONVOCATIONS, GRADUATION, AND MOVE-IN DAY ADDITIONALLY, A TWITTER PAGE WAS ESTABLISHED FOR DANNY THE DOLPHIN (@CSI_DOLPHIN) WHICH NOW HAS OVER 140 FOLLOWERS FOR THE FOURTH YEAR IN A ROW, THE INTRAMURAL & RECREATION PROGRAM WON THE PARTICIPATION CHAMPIONSHIP TITLE FOR THE CITY UNIVERSITY OF NEW YORK ATHLETIC CONFERENCE (CUNYAC) INTRAMURALS CHAMPIONSHIP SERIES, WHICH INCLUDES COMPETITION AGAINST OTHER CUNY INTRAMURAL CHAMPIONS IN SELECT SPORTS EXPENSES $630,461 GRANTS REVENUE $586,068

See Additional Data

4d Other program services (Describe in Schedule O)

(Expenses $ 704,014 including grants of $ 70,456) (Revenue $ 709,905)

4e **Total program service expenses ▶** 4,354,104

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	**1**	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	**2**	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	**3**		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	**4**		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	**5**		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	**6**		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	**7**		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	**8**		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	**9**	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	**10**		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	**11a**	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	**11b**		No
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 "Yes," complete Schedule D, Part VIII*	**11c**		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	**11d**		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	**11e**		No
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 "Yes," complete Schedule D, Part X*	**11f**	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	**12a**	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	**12b**	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	**13**		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	**14a**		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	**14b**		No
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 "Yes," complete Schedule F, Parts II and IV*	**15**		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	**16**		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)	**17**		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	**18**		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	**19**		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	**20a**		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	**20b**		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
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*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		No
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*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

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 . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	**1a**	72			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	**1b**	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			**1c**	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	**2a**	122			
b	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)			**2b**	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .			**3a**		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* . . .			**3b**		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . .			**4a**		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .			**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			**5b**		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .			**6a**		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			**7a**		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			**7c**		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			**7e**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .			**7f**		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			**7h**		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			**8**		
9a	Did the sponsoring organization make any taxable distributions under section 4966? . . .			**9a**		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .			**9b**		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	**10a**				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	**11a**				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	**11b**				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	**12b**				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			**13a**		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	**13b**				
c	Enter the amount of reserves on hand	**13c**				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			**14a**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .			**14b**		

Part VI **Governance, Management, and Disclosure**

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 13			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	1b 6			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		No
6	Did the organization have members or stockholders?		6		No
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?		7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
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*		9		No

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	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*	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records

▶MARIANNE MCLAUGHLIN 2800 VICTORY BOULEVARD ROOM 1C-202 STATEN ISLAND, NY 10314 (718) 982-3084

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

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

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

1a Complete 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, or 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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JENNIFER S BORRERO PRESIDENT	3 00 35 00	X		X				0	160,320	28,495
(2) CHRISTOPHER GIORDANO OFFICER	0 70 35 00	X		X				0	62,090	7,823
(3) KENICHI IWAMA DIRECTOR	0 70 35 00	X						0	146,944	63,186
(4) CHARLES GOMES DIRECTOR	0 70 35 00	X						0	108,368	46,599
(5) ALAN WEINMAN DIRECTOR	0 70 35 00	X						0	35,233	7,205
(6) ALAN BENIMOFF DIRECTOR	0 70 35 00	X						0	91,856	39,498
(7) MARIE GIORDANO DIRECTOR	0 70 35 00	X						0	74,364	31,976
(8) RANA MOHAMMAD OFFICER (THRU MAY 2016)	0 70 0 00	X		X				0	0	0
(9) SAMANTHA BRANDT DIRECTOR	0 70 0 00	X						0	0	0
(10) BINGHUI JIANG DIRECTOR	0 70 0 00	X						0	0	0
(11) SABRINA WALTERS OFFICER	0 70 0 00	X		X				0	0	0
(12) MOHAMAD HAMADA DIRECTOR	0 70 0 00	X						0	0	0
(13) ANDREA DALZELL DIRECTOR	0 70 0 00	X						0	0	0
(14) A RAMONA BROWN DIRECTOR (THRU AUG 2015)	2 00 35 00	X						0	111,847	34,441

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(15) KEHINDE ADENAKAN DIRECTOR (THRU DEC 2015)	0 70 0 00	X						0	0	0
(16) JOSHUA ULLOA DIRECTOR (BEGINNING JUN 2016)	0 70 0 00	X						0	0	0
(17) MARIANNE MCLAUGHLIN EXECUTIVE DIRECTOR	35 00 0 00			X				115,709	0	27,017
(18) CARLOS SERRANO TREASURER (EFF 9/20/2016)	0 70 35 00			X				0	0	0
(19) CYNTHIA MURPHY EXEC DIRECTOR - CHILDCARE	35 00 0 00					X		108,472	0	26,071

		(D)	(E)	(F)
1b	**Sub-Total** ▶			
c	**Total from continuation sheets to Part VII, Section A** ▶			
d	**Total (add lines 1b and 1c)** ▶	224,181	791,022	312,311

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 2

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
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*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts						
1a	Federated campaigns . . . 1a					
b	Membership dues 1b					
c	Fundraising events 1c					
d	Related organizations . . . 1d					
e	Government grants (contributions) 1e	747,282				
f	All other contributions, gifts, grants, and similar amounts not included above 1f					
g	Noncash contributions included in lines 1a-1f $					
h	**Total.** Add lines 1a-1f . . . . ▶		747,282			
Program Service Revenue		Business Code				
2a	STUDENT ACTIVITY FEES	611710	3,403,237	3,403,237		
b	CHILDCARE PARENT FEES	611710	60,005	60,005		
c	SPORTS INCOME	611710	18,876	18,876		
d	STUDENT ORGANIZATIONS	611710	7,717	7,717		
e						
f	All other program service revenue					
g	**Total.** Add lines 2a–2f . . . . ▶		3,489,835			
Other Revenue						
3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶		19,940			19,940
4	Income from investment of tax-exempt bond proceeds . . ▶					
5	Royalties . . . . ▶					

		(i) Real	(ii) Personal
6a	Gross rents		
b	Less rental expenses		
c	Rental income or (loss)		

		(A)	(B)	(C)	(D)
d	Net rental income or (loss) . . . . ▶				

		(i) Securities	(ii) Other
7a	Gross amount from sales of assets other than inventory	751,734	
b	Less cost or other basis and sales expenses	742,816	
c	Gain or (loss)	8,918	

			(A)	(B)	(C)	(D)
7d	Net gain or (loss) . . . . ▶		8,918			8,918
8a	Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18 . . a					
b	Less direct expenses . . . b					
c	Net income or (loss) from fundraising events . . ▶					
9a	Gross income from gaming activities See Part IV, line 19 . . . a					
b	Less direct expenses . . . b					
c	Net income or (loss) from gaming activities . . . ▶					
10a	Gross sales of inventory, less returns and allowances . a					
b	Less cost of goods sold . . b					
c	Net income or (loss) from sales of inventory . . ▶					
	Miscellaneous Revenue	Business Code				
11a	MISCELLANEOUS	611710	1,015	1,015		
b						
c						
d	All other revenue					
e	**Total.** Add lines 11a–11d . . . . . . ▶		1,015			
12	**Total revenue.** See Instructions . . . . . . ▶		4,266,990	3,490,850	0	28,858

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 . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	**(A)** Total expenses	**(B)** Program service expenses	**(C)** Management and general expenses	**(D)** Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	113,467	113,467		
2 Grants and other assistance to domestic individuals See Part IV, line 22	100,916	100,916		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	143,382		143,382	
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	1,377,043	1,367,649	9,394	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	73,021	63,210	9,811	
9 Other employee benefits	178,547	153,766	24,781	
10 Payroll taxes	159,656	132,229	27,427	
11 Fees for services (non-employees)				
a Management				
b Legal	9,173		9,173	
c Accounting	8,700		8,700	
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 Schedule O)	142,042	130,701	11,341	
12 Advertising and promotion	67,888	67,409	479	
13 Office expenses	91,380	62,511	28,869	
14 Information technology	112,177	112,177		
15 Royalties . .	27,804	27,409	395	
16 Occupancy				
17 Travel	1,156,647	1,156,529	118	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	26,886	26,347	539	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	71,759	64,683	7,076	
23 Insurance	44,883	42,071	2,812	
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 ATHLETICS	258,239	258,239		
b STUDENT ACTIVITIES	161,373	161,373		
c RECEPTIONS/REFRESHMENTS	134,641	134,641		
d MISCELLANEOUS	86,725	86,108	617	
e All other expenses	95,747	92,669	3,078	
25 **Total functional expenses.** Add lines 1 through 24e	4,642,096	4,354,104	287,992	0
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet**

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash-non-interest-bearing			1	
	2	Savings and temporary cash investments		1,996,247	2	891,239
	3	Pledges and grants receivable, net		13,719	3	18,813
	4	Accounts receivable, net		146,581	4	203,355
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net		5,878	7	1,297
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		28,315	9	47,283
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 507,674			
	b	Less accumulated depreciation	10b 333,676	92,700	10c	173,998
	11	Investments—publicly traded securities		1,398,928	11	1,866,377
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		3,682,368	16	3,202,362
Liabilities	17	Accounts payable and accrued expenses		239,720	17	302,970
	18	Grants payable			18	
	19	Deferred revenue		109,893	19	9,845
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		24,238	21	4,525
	22	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			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		373,851	26	317,340
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets			27	
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		3,215,817	30	2,711,024
	31	Paid-in or capital surplus, or land, building or equipment fund		92,700	31	173,998
	32	Retained earnings, endowment, accumulated income, or other funds		0	32	0
	33	Total net assets or fund balances		3,308,517	33	2,885,022
	34	Total liabilities and net assets/fund balances		3,682,368	34	3,202,362

Part XI Reconcilliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,266,990
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,642,096
3	Revenue less expenses Subtract line 2 from line 1	3	-375,106
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,308,517
5	Net unrealized gains (losses) on investments	5	-48,389
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,885,022

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ____________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' 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 ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☑ Both consolidated and separate basis			
c	If "Yes," 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?	2c		No
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

Software ID:
Software Version:
EIN: 13-2933777
Name: THE COLLEGE OF STATEN ISLAND ASSOCIATION

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses $ 704,014 including grants of $ 70,456) (Revenue $ 709,905)

DURING 2015-16, STUDENT ACTIVITY FEE (SA FEE) FUNDS WERE EXPENDED TO CONTINUE THE PROVISION OF A WIDE RANGE OF PROGRAMS, SERVICES AND ACTIVITIES FOR STUDENTS AIMED AT SUPPORTING, ENHANCING AND COMPLEMENTING THEIR ACADEMIC EXPERIENCE AND ENCOURAGING THEM TO BECOME INVOLVED IN CAMPUS LIFE THROUGH INVOLVEMENT WITH STUDENT GOVERNMENT (SG), THE RADIO STATION (WSIA), CLUBS AND ORGANIZATIONS, THE CAMPUS ACTIVITIES BOARD (CAB), PUBLICATIONS, AND OTHER CAMPUS COMMITTEES, STUDENTS WERE PROVIDED WITH OPPORTUNITIES TO LEARN AND PRACTICE LEADERSHIP, PROGRAMMING, MANAGEMENT, SOCIAL RESPONSIBILITY AND INTERPERSONAL SKILLS OPPORTUNITIES FOR INCREASED INTERACTION AMONG STUDENTS, FACULTY AND STAFF FROM DIVERSE CULTURAL BACKGROUNDS AS WELL AS OPPORTUNITIES TO MAKE FRIENDS, SOCIAL BONDS AND HAVE FUN WERE PROVIDED THROUGH ON-CAMPUS PARTIES, MUSICAL EVENTS, LECTURES, COMEDY SHOWS, AND SPECIAL EVENTS, AS WELL AS THROUGH OFF-CAMPUS OUTINGS TO THEATRICAL PERFORMANCES, AMUSEMENT PARKS AND OTHER POINTS OF INTEREST THROUGHOUT THE YEAR, THE CAMPUS ACTIVITIES BOARD (CAB) WAS ABLE TO FULFILL THE ORGANIZATION'S MISSION BY SUCCESSFULLY PROVIDING A COMPREHENSIVE CALENDAR OF EVENTS FOR THE CSI STUDENT BODY APPROXIMATELY 91 EVENTS WERE SPONSORED, ENGAGING OVER 5,874 STUDENT PARTICIPANTS EVENTS AND ACTIVITIES, SUCH AS LECTURES, FILMS, COMEDIANS, NOVELTY ENTERTAINMENT, SPECIAL EVENTS AND TRIPS TO LOCAL SHOWS AND POINTS OF INTEREST, WERE DEVELOPED TO PROVIDE STUDENTS WITH OPPORTUNITIES TO RELAX AND ENJOY TIME ON- AND OFF-CAMPUS WITH FELLOW STUDENTS AND MEMBERS OF THE COLLEGE COMMUNITY COMMUNITY INITIATIVES SUCH AS SCHOOL OF EDUCATION SPRING FESTIVAL, MEET YOUR MAJOR WEEK WITH CENTER FOR ADVISING AND ACADEMIC SUCCESS, POLITICAL SCIENCE LECTURE SERIES, GLOBAL KITCHEN, THE ZUZU ACROBATS AND WORLD LANGUAGES DAY WERE ALSO FUNDED THROUGH CAB ADDITIONALLY, CAB MAINTAINED ITS SUPPORT OF OTHER COLLEGE PROGRAMS INCLUDING FUNDING ANNUAL EVENTS SUCH AS THE CSI LEADERSHIP CONFERENCE, CSI'S GOT TALENT, NEW STUDENT ORIENTATION, RELAY FOR LIFE AND HONORS CONVOCATION STUDENTS INTERESTED IN WSIA, THE COLLEGE'S STUDENT-RUN RADIO STATION, WERE PROVIDED WITH BROADCAST TRAINING AND WERE INVOLVED WITH THE STATION AS DJS, NEWSCASTERS, ENGINEERS, DIRECTORS OR AS UNDERWRITING SOLICITORS THEY TOOK PART IN 24-HOUR BROADCASTING OF MUSIC, NEWS AND SPORTS PROGRAMMING AND PARTICIPATED IN GENERAL AND ON-AIR WORKSHOPS TO LEARN SKILLS RELATED TO RADIO BROADCASTING AND MANAGEMENT SOME MEMBERS ATTENDED THE COLLEGE MEDIA ASSOCIATION CONVENTION IN NYC TO GAIN KNOWLEDGE AND SKILLS RELATED TO THEIR ROLES AS MEMBERS OF THE STATION ADDITIONALLY, STUDENT MEMBERS WERE INVOLVED WITH BROADCASTING THE STATEN ISLAND YANKEES BASEBALL GAMES, WITH STUDENTS WORKING AS ON-AIR ANNOUNCERS AS WELL AS ON-SITE AND IN-STUDIO ENGINEERS AS PART OF ITS MARKETING EFFORTS, WSIA PARTICIPATED IN FRESHKILLS DISCOVERY DAYS AND HOSTED AN ON-CAMPUS KARAOKE EVENT IN THE SPRING THE STATION ALSO PROVIDED FUNDING FOR CSI'S GOT TALENT AND STUDENT MEMBERS VOLUNTEERED AT THE ANNUAL RELAY FOR LIFE EVENT WSIA PURCHASED A COMMERCIAL VAN THAT WILL SERVE AS A MOBILE RADIO STATION FOR REMOTE BROADCASTING WHICH WILL BE USED TO TRANSPORT EQUIPMENT AND WSIA PERSONNEL TO ON- AND OFF-CAMPUS EVENTS IN THE COMMUNITY THE VAN WILL BE BRANDED IN ORDER TO PROMOTE THE STATION TO CSI STUDENTS AND THE GENERAL STATEN ISLAND PUBLIC IN ORDER TO FULLY DIGITIZE ITS OPERATION, WSIA IS COMPLETING A MAJOR STUDIO RENOVATION ANTICIPATED TO BE COMPLETED BY THE END OF 2017 PURCHASES FOR THE RENOVATION INCLUDED LIVE ASSIST SOFTWARE AND HARDWARE, A NEW PRODUCTION CONSOLE, FIBER OPTIC INSTALLATION AND ALL ON-AIR EQUIPMENT INCLUDING CONSOLES, SWITCHERS, PROCESSORS AND NETWORK GEAR IN 2015-16, STUDENT PUBLICATIONS INCLUDING THE BANNER (NEWSPAPER), CAESURA MAGAZINE (ART AND LITERATURE MAGAZINE), THE CATALYST (SCIENCE MAGAZINE) AND THIRD RAIL (POLITICAL ARTS MAGAZINE) WERE CHARTERED THROUGH THEIR INVOLVEMENT WITH PUBLICATIONS, STUDENTS WERE ABLE TO CUMULATIVELY PUBLISH 22 ISSUES THROUGHOUT THE YEAR THE CATALYST PURCHASED NEW COMPUTERS AND EQUIPMENT TO BE SHARED BY ALL OF THEIR STUDENT-STAFF AND COMPLETED A TRAINING SESSION TO BECOME ACQUAINTED WITH THIS EQUIPMENT ADDITIONALLY, ALL PUBLICATIONS SENT DESIGNATED REPRESENTATIVES TO THE CUNY SCHOOL OF JOURNALISM'S NYC REPORTING & WRITING WORKSHOPS (SUMMER INTENSIVE PROGRAM) IN 2015-16, STUDENT GOVERNMENT FOCUSED ON EXPANDING THE BREADTH OF ITS REACH TO FURTHER SUPPORT THE SPECIFIC NEEDS OF CSI STUDENTS THEY CONTINUED PROGRAMS SUCH AS THE GRADUATE ASSISTANCE FUND (WHICH ASSISTS STUDENTS WITH FEES AND PREPARATION COSTS RELATED TO THE GRADUATE SCHOOL APPLICATION PROCESS) AND THE EMERGENCY LOAN FUND (AN INTEREST-FREE LOAN PROGRAM AVAILABLE TO STUDENTS SUFFERING FINANCIAL HARDSHIPS) THROUGH RESEARCHING AND PLANNING, THE FINANCE COMMISSION MADE GREAT STRIDES TOWARDS POSSIBLE FUTURE IMPLEMENTATION OF A CAMPUS-WIDE BIKE SHARE PROGRAM THE PART TIME, EVENING AND WEEKEND STUDENTS COMMISSION CONTINUED ITS MISSION OF KEEPING NON-TRADITIONAL COLLEGE STUDENTS INFORMED AND INVOLVED THROUGH VARIOUS EFFORTS SUCH AS A SELF DEFENSE AND AWARENESS COURSE AND FINALS WEEK COFFEE AND SNACK HOURS THE STUDENT SERVICE COMMISSION HOSTED A HIGHLY SUCCESSFUL, SEMESTER-LONG CHESS TOURNAMENT THE ELECTIONS COMMISSION RE-TOOLED THE STUDENT ELECTION PROCESS THROUGH AN ELABORATE AND SUCCESSFUL PROMOTIONAL EFFORT THAT INCLUDED HIRING TEMPORARY STAFF MEMBERS TO ASSIST AT ELECTION BOOTHS, ENSURING A SECURE AND FAIR ELECTIONS PROCESS THROUGH THE SG CLUB COMMISSION, 38 STUDENT CLUBS WERE CHARTERED, INCLUDING EIGHT NEW CLUBS OVER 780 STUDENTS WERE MEMBERS OF CLUBS THROUGHOUT THE YEAR, CLUBS SPONSORED OVER 173 EVENTS, ENGAGING OVER 2,217 STUDENT PARTICIPANTS, AND HOSTED 381 MEETINGS THE SG CLUB COMMISSION HOSTED THE ANNUAL STUDENT LEADER RETREAT IN JANUARY WITH PARTICIPATION FROM 43 STUDENT LEADERS INVOLVEMENT IN CLUBS PROVIDED STUDENTS WITH THE OPPORTUNITY TO COMPLEMENT THEIR ACADEMIC PROGRAM OF STUDY, AND EDUCATE THEM ABOUT A NUMBER OF ISSUES IN OUR SOCIETY AND WORLD, INCLUDING EQUALITY AND GENDER ISSUES, SUSTAINABILITY, THE VALUE OF HELPING THOSE IN NEED, AND THE NEED FOR PEACE AROUND THE WORLD CLUBS COLLABORATED ON A NUMBER OF EVENTS THROUGHOUT THE YEAR SOME OF THEIR MOST POPULAR EVENTS INCLUDED NETWORKING DINNERS AND SPEED INTERVIEWS FOR ACCOUNTING MAJORS, ANIME FILM SCREENINGS BY OUR JAPANESE VISUAL CULTURE CLUB, THE MUSLIM STUDENT ASSOCIATION'S 3RD ANNUAL "SEE HOW YOU LOOK IN HIJAB," THE SOUTH ASIAN NATIONS ASSOCIATION ANNUAL DESI FORMAL "BAND BAJAA BAARAT AND THE CSI REVUE'S FLASH MOBS THE SG CLUB COMMISSION INVESTIGATED NEW WAYS TO SUPPORT THE CLUB BUDGET PROCESS AND CONTRACTED THE BUDGET MANAGEMENT SYSTEM THROUGH ORGSYNC, AN ONLINE ORGANIZATION MANAGEMENT PROGRAM, FOR IMPLEMENTATION IN FALL 2016 THIS SYSTEM WILL ALLOW CLUBS TO REQUEST BUDGETS AND FILE PURCHASE REQUESTS ONLINE

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
THE COLLEGE OF STATEN ISLAND ASSOCIATION

Employer identification number
13-2933777

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

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 (Form 990 or 990-EZ))

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).** (Complete Part II)

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)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☑ An organization that normally receives (1) more than 331/3% 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 331/3% 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations . . . . ______

g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc (see instructions) | 12 |

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** . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) | 14 |

15 Public support percentage for 2014 Schedule A, Part II, line 14 | 15 |

16a **33 1/3% support test—2015.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support test—2014.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2015.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2014.** If the organization did not check a box on line 13, 16a, 16b, or 17a, 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

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

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	636,583	693,642	645,590	695,411	747,282	3,418,508
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	2,468,042	2,554,761	2,579,352	2,541,075	3,489,835	13,633,065
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	3,104,625	3,248,403	3,224,942	3,236,486	4,237,117	17,051,573
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b						0
8 **Public support.** (Subtract line 7c from line 6)						17,051,573

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6	3,104,625	3,248,403	3,224,942	3,236,486	4,237,117	17,051,573
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	47,217	42,091	206,545	32,582	28,858	357,293
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	47,217	42,091	206,545	32,582	28,858	357,293
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	10,032	37,911	26,635	662	1,015	76,255
13 **Total support.** (Add lines 9, 10c, 11, and 12)	3,161,874	3,328,405	3,458,122	3,269,730	4,266,990	17,485,121

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	97 520 %
16	Public support percentage from 2014 Schedule A, Part III, line 15	16	97 020 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2015** (line 10c, column (f) divided by line 13, column (f))	17	2 040 %
18	Investment income percentage from **2014** Schedule A, Part III, line 17	18	2 440 %

19a **33 1/3% support tests—2015.** 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 ▶ ☑

b **33 1/3% support tests—2014.** 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 ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* ***Part VI*** *how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain*	**1**		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2)*	**2**		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below*	**3a**		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination*	**3b**		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use*	**3c**		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below*	**4a**		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations*	**4b**		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes*	**4c**		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)*	**5a**		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	**5b**		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	**5c**		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.***	**6**		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990)*	**7**		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part II of Schedule L (Form 990)*	**8**		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	**9a**		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	**9b**		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	**9c**		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer b below*	**10a**		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)*	**10b**		
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	**11a**		
b	A family member of a person described in (a) above?	**11b**		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI*	**11c**		

Part IV **Supporting Organizations** (continued)

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization*	**2**		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)*	**1**		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s)*	**2**		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard*	**3**		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**

a ☐ The organization satisfied the Activities Test Complete **line 2** below

b ☐ The organization is the parent of each of its supported organizations Complete **line 3** below

c ☐ The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions)

			Yes	No
2	Activities Test **Answer (a) and (b) below.**			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities*	**2a**		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement*	**2b**		
3	Parent of Supported Organizations **Answer (a) and (b) below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI*	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard*	**3b**		

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E ☐

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	**Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	**Total** (add lines 1a, 1b, and 1c)	1d		
e	**Discount** claimed for blockage or other factors (explain in detail in Part VI) ____________			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) ☐

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 **Total annual distributions.** Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
c			
d From 2013. . . . . ______			
e From 2014. . . . . ______			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 $ ______			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 **Excess distributions carryover to 2016.** Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013. . . . . ______			
d From 2014. . . . . ______			
e From 2015. . . . . ______			

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

Facts And Circumstances Test

Return Reference	Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047
2015
Open to Public Inspection

Name of the organization
THE COLLEGE OF STATEN ISLAND ASSOCIATION

Employer identification number
13-2933777

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 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? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 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 a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶____________

4 Number of states where property subject to conservation easement is located ▶____________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶____________

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ $ ____________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ ____________

(ii) Assets included in Form 990, Part X ▶ $ ____________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ $ ____________

b Assets included in Form 990, Part X ▶ $ ____________

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

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)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ 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.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☑ 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.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	b (c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g 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 on 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

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

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.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		468,019	294,021	173,998
e Other		39,655	39,655	0
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* ▶				173,998

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	**(b)** Book value	**(c)** Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	**(b)** Book value	**(c)** Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	**(b)** Book value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* . . . . ▶	

Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. **(a)** Description of liability	**(b)** Book value
Federal income taxes	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

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 ☑

Part XI **Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	4,497,564
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a	-48,389		
b	Donated services and use of facilities	2b	278,963		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	230,574
3	Subtract line **2e** from line **1**			3	4,266,990
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total revenue Add lines **3** and **4c.**(This must equal Form 990, Part I, line 12)			5	4,266,990

Part XII **Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	4,921,059
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	278,963		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	278,963
3	Subtract line **2e** from line **1**			3	4,642,096
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	4,642,096

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

Return Reference	Explanation
PART IV, LINE 2B	THE ASSOCIATION HOLDS FUNDS ON BEHALF OF CERTAIN GROUPS AND ORGANIZATIONS RELATED TO THE COLLEGE OF STATEN ISLAND AS WELL AS FUNDS TO BE REMITTED TO CERTAIN EXTERNAL CHARITABLE ORGANIZATIONS COMPUTER SCIENCE CLUB $273 AMBASSADOR PROGRAM 204 ITALIAN CLUB 50 WOMEN'S LITERARY GROUP 308 EMERGING LEADERS PROGRAM 16 EXTERNAL CHARITABLE ORGANIZATIONS 564 GROUP FITNESS FUND 467 HURRIANE SANDY RELIEF 2,643

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493093009747

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
THE COLLEGE OF STATEN ISLAND ASSOCIATION

Employer identification number
13-2933777

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶

3 Enter total number of other organizations listed in the line 1 table . . . . ▶

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) STIPENDS	25	66,083			
(2) MEMORIAL AWARDS	12	1,700			
(3) TRAVEL ASSISTANCE	40	28,760			
(4) GRADUATE ASSISTANCE	13	4,373			

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PART I, LINE 2	THE ASSOCIATION MONITORS THE USAGE OF THE FUNDS BY REQUESTING AN EXPENDITURE REPORT DETAILING HOW THE FUNDS WERE USED
PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION	THE ASSOCIATION MAKES GRANTS TO ITS PARENT ORGANIZATION, THE COLLEGE OF STATEN ISLAND, FOR THE PURPOSE OF SUPPORTING ITS STUDENT SCHOLARSHIP PROGRAM ALL FUNDS REMITTED TO THE COLLEGE ARE USED TO FUND SCHOLARSHIPS GRANTED TO STUDENTS WHO MATRICULATE AT THE COLLEGE THE RECIPIENT STUDENTS ARE SELECTED BY THE COLLEGE'S SCHOLARSHIP COMMITTEE THE ASSOCIATION LIKEWISE MAKES PERIODIC CASH AND NON-CASH PAYMENTS TO STUDENTS FOR STIPENDS, AWARDS, AND FINANCIAL ASSISTANCE THE ASSOCIATION PROVIDES FINANCIAL ASSISTANCE TO STUDENTS UPON A SHOWING OF NEED AS DETERMINED BY AN INDEPENDENT REVIEW COMMITTEE ESTABLISHED BY THE OFFICE OF THE VICE PRESIDENT OF STUDENT AFFAIRS STIPENDS AND AWARDS ARE PROVIDED TO STUDENTS BASED ON THE ATTAINMENT OF CERTAIN GOALS ALL AMOUNTS REMITTED TO STUDENTS ARE LESS THAN $5,000

Additional Data

Software ID:
Software Version:
EIN: 13-2933777
Name: THE COLLEGE OF STATEN ISLAND ASSOCIATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLLEGE OF STATEN ISLAND 2800 VICTORY BOULEVARD STATEN ISLAND,NY 10314	13-3893536	501(C)(3)		29,989	COST	TEXTBOOKS FOR LIBRARY	SUPPORT
COLLEGE OF STATEN ISLAND 2800 VICTORY BOULEVARD STATEN ISLAND,NY 10314	13-3893536	501(C)(3)		40,000	COST	PIANO REFURBISHMENT	SUPPORT
COLLEGE OF STATEN ISLAND 2800 VICTORY BOULEVARD STATEN ISLAND,NY 10314	13-3893536	501(C)(3)		5,478	COST	CALCULATORS	SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
COLLEGE OF STATEN ISLAND 2800 VICTORY BOULEVARD STATEN ISLAND,NY 10314	13-3893536	501(C)(3)	23,000				SCHOLARSHIPS
COLLEGE OF STATEN ISLAND 2800 VICTORY BOULEVARD STATEN ISLAND,NY 10314	13-3893536	501(C)(3)	15,000				STUDY ABROAD SCHOLARSHIPS

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
THE COLLEGE OF STATEN ISLAND ASSOCIATION

Employer identification number
13-2933777

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☐ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☐ Compensation survey or study ☐ Form 990 of other organizations ☐ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," on line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," on line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JENNIFER S BORRERO PRESIDENT	(i)	0	0	0	0	0	0	0
	(ii)	160,320	0	0	21,329	7,166	188,815	0
2 KENICHI IWAMADIRECTOR	(i)	0	0	0	0	0	0	0
	(ii)	146,944	0	0	34,176	29,010	210,130	0
3 CHARLES GOMES DIRECTOR	(i)	0	0	0	0	0	0	0
	(ii)	108,368	0	0	27,818	18,781	154,967	0

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Return Reference	Explanation

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
THE COLLEGE OF STATEN ISLAND ASSOCIATION

Employer identification number
13-2933777

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	MEMBERSHIP OF THE ASSOCIATION CONSISTS OF THIRTEEN MEMBERS AS FOLLOWS THE PRESIDENT OF THE COLLEGE OR HIS/HER DESIGNEE, THREE ADMINISTRATORS APPOINTED BY THE COLLEGE PRESIDENT, THREE FACULTY MEMBERS SELECTED BY THE COLLEGE PRESIDENT FROM A PANEL OF SIX FACULTY ELECTED ANNUALLY BY THE FACULTY, THE PRESIDENT OF THE STUDENT GOVERNMENT AND TWO UPPER DIVISION AND THREE LOWER DIVISION STUDENTS ELECTED BY AND FROM THE STUDENT BODY OF THE COLLEGE.
FORM 990, PART VI, SECTION A, LINE 7B	THE PRESIDENT OF THE COLLEGE (A RELATED ENTITY) HAS THE RIGHT OF FINAL REVIEW AND MAY DISA PPROVE ACTIONS TAKEN BY THE BOARD AND SEND THOSE ITEMS BACK TO THE BOARD OF DIRECTORS FOR RECONSIDERATION DURING THIS YEAR THE PRESIDENT HAS NOT HAD REASON TO EXERCISE THIS RIGHT

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	A COPY OF THE 990 WAS CIRCULATED TO BOARD MEMBERS BY THE EXECUTIVE DIRECTOR FOR DISCUSSION AND COMMENT EACH BOARD MEMBER WAS PROVIDED AMPLE OPPORTUNITY TO COMMENT ON THE INFORMATION CONTAINED IN THE 990 PRIOR TO ITS ELECTRONIC FILING WITH THE IRS
FORM 990, PART VI, SECTION B, LINE 12C	CARE IS TAKEN TO MAKE SURE THAT BOARD MEMBERS WITH A POTENTIAL CONFLICT OF INTEREST ABSTAI N FROM VOTES AND ARE KEPT AT AN ARMS LENGTH FROM INFLUENCING DECISIONS RELATED TO AREAS WH ERE THEY HAVE A POTENTIAL CONFLICT OF INTEREST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE ASSOCIATION'S TOP MANAGEMENT OFFICIAL'S (EXECUTIVE DIRECTOR) COMPENSATION IS SET BY THE ASSOCIATION'S PERSONNEL COMMITTEE THE COMMITTEE USES COMPARABILITY DATA TO SET COMPENSATION STANDARDS (INCLUDING SALARY RANGES AND FRINGE BENEFITS) WHERE FEASIBLE THE COMPENSATION PAID TO THE EXECUTIVE DIRECTOR AND ALL OTHER EMPLOYEES ARE COMPARABLE TO POSITIONS AT THE AFFILIATED COLLEGE WITH SIMILAR RESPONSIBILITIES THE RECOMMENDATIONS OF THE PERSONNEL COMMITTEE ARE SUBJECT TO APPROVAL BY THE BOARD OF DIRECTORS
FORM 990, PART VI, SECTION C, LINE 19	ON THE ORGANIZATION'S WEBSITE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2(C)	NO CHANGES HAVE TAKEN PLACE DURING THE FISCAL YEAR ENDED JUNE 30, 2016

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
THE COLLEGE OF STATEN ISLAND ASSOCIATION

Employer identification number
13-2933777

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1)THE COLLEGE OF STATEN ISLAND 2800 VICTORY BOULEVARD STATEN ISLAND, NY 10314 13-3893536	EDUCATION	NY	501(C)(3)	LINE 6	N/A		No
(2)RESEARCH FOUNDATION OF CUNY 230 W 41ST NEW YORK, NY 10036 13-1988190	RESEARCH	NY	501(C)(3)	LINE 7	N/A		No
(3)THE COLLEGE OF STATEN ISLAND FOUNDATION 2800 VICTORY BOULEVARD STATEN ISLAND, NY 10314 13-3683723	FUND RAISING	NY	501(C)(3)	LINE 11A, I	N/A		No
(4)THE COLLEGE OF STATEN ISLAND AUXILIARY SERVICES 2800 VICTORY BOULEVARD STATEN ISLAND, NY 10314 13-2936232	EDUCATION	NY	501(C)(3)	LINE 9	N/A		No
(5)THE CITY UNIVERSITY OF NEW YORK 205 E 42ND STREET NEW YORK, NY 10017 13-3893536	EDUCATION	NY	501(C)(3)	LINE 6	N/A		No

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity? Yes	(i) No

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

		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1d	Yes	
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	1o		No
p Reimbursement paid to related organization(s) for expenses	1p		No
q Reimbursement paid by related organization(s) for expenses	1q		No
r Other transfer of cash or property to related organization(s)	1r		No
s Other transfer of cash or property from related organization(s)	1s	Yes	

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

(a) Name of related organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation