

## TAX RETURN FILING INSTRUCTIONS

#### PUBLIC INSPECTION COPY

Prepared by	Grant Thornton Advisors LLC
Special Instructions	The return should be signed and dated by the appropriate officer(s).  Exempt organizations are required to provide copies of their returns for a period of three years from the filing date for public inspection upon request. On the Form 990 the names of any contributors should not be disclosed, so we have deleted them. Charities must also provide copies of: 1) Forms 990-T filed after August 17, 2006. 2) Forms 4720 filed by the organization.  Form 990-PF contributors must be disclosed.
Application for Recognition of Exemption	Exempt Organizations are also required to provide a copy of the Application for Recognition of Exemption (Form 1023 or 1024) including all documents and statements submitted in support of such application and any letter or other document issued by the Internal Revenue Service with respect to such application.  An organization that submitted its Form 1023 or 1024 on or before July 15, 1987 must make this form available for public inspection only if they had a copy of the Application on July 15, 1987.
Requests made in person	If the request is made in person, the organization must respond by the end of the business day.
Requests made in writing	If the request is made in writing, response is generally required within 30 days.
Fees charged for copies	The organization can make a reasonable charge for copying and postage. The regulations limit the copying charge to that charged by the IRS for providing copies, currently \$1.00 for the first page and \$0.15 for each additional page.
What if we post the Form 990 on our website?	The requirement to provide copies can be eliminated if the organization posts the relevant documents on its website. The public must be able to download the documents and print them in the exact form they were filed with the IRS (except for disclosing contributors). The download must be free and use software that is available without charge. Even if the documents are posted on the web, the organization must still have a copy available for inspection at its offices.
What if we fail to comply with requests?	Please be aware that significant monetary penalties may be imposed by the IRS on an organization for failure to follow the above provisions.

# PUBLIC DISCLOSURE COPY - STATE REGISTRATION NO. 0192019 | 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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

<u>A I</u>	OI LITE	e 2023 calendar year, or tax year beginning	ль 1, 2023 <b>and</b>	enuing o	UN 30, 2024	
<b>B</b>	Check if applicable	C Name of organization	птом		D Employer ident	ification number
	Addre	SAN DIEGO STATE UNIVERSITY FOUNDA	TION			
F	chang Name chang				95-604272	1
	Initial return	Number and street (or P.O. box if mail is not del	ivered to street address)	Room/suite	+	
F	Final return	5250 CAMPANTIE DRIVE MC1947	ivorca to stroot address;	1100111/3uito	(619) 594-3	
	termin ated	City or town, state or province, country, and	ZIP or foreign postal code		G Gross receipts \$	297,399,078.
	Ameno		0 1		H(a) Is this a group	return
	Application	F Name and address of principal officer: Machine	LE GOETZ		for subordinat	es? Yes X No
	pendir	SAME AS C ABOVE			H(b) Are all subordinate	s included? Yes No
1	Гах-ех	empt status: X 501(c)(3) 501(c) ( )	(insert no.) 4947(a)(1)	or 527	If "No," attach	a list. See instructions
	Nebsi				H(c) Group exempt	tion number
		organization,	sociation Other	<b>L</b> Year	of formation: 1943	M State of legal domicile; CA
Pá	art I	Summary				
ø	1	Briefly describe the organization's mission or most			FURTHER THE	
Governance		RESEARCH, EDUCATION AND COMMUNITY SERV				
ern	2		ntinued its operations or dispos		1.	1
્રે	3	Number of voting members of the governing body				3 17 4 4
8	1	Number of independent voting members of the gov				3772
Activities &		Total number of individuals employed in calendar y				3772
Ĕ		Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, col				a 356,435.
Ą		Net unrelated business taxable income from Form				<b>b</b> 0.
		Not different business taxable moome from Form	500 1,1 4111, 11110 11		Prior Year	Current Year
_	8	Contributions and grants (Part VIII, line 1h)			102,412,638	110,709,349.
ne	1	D ' 'D ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			107,918,263	<del>' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' </del>
Revenue	1	Investment income (Part VIII, column (A), lines 3, 4,			2,281,378	
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c,			-212,760	
	1	Total revenue - add lines 8 through 11 (must equal			212,399,519	226,239,172.
	13	Grants and similar amounts paid (Part IX, column (	A), lines 1-3)		27,517,555	29,507,577.
	1	Benefits paid to or for members (Part IX, column (A			0	0.
ø	15	Salaries, other compensation, employee benefits (F	Part IX, column (A), lines 5-10)		116,835,503	132,423,283.
Expenses	16a	Professional fundraising fees (Part IX, column (A), li	ne 11e)		403,535	489,842.
x	b	Total fundraising expenses (Part IX, column (D), line	25) 6,870,	797.		
Ш	''	Other expenses (Part IX, column (A), lines 11a-11d,			57,244,779	<u> </u>
	18	Total expenses. Add lines 13-17 (must equal Part I)	(, column (A), line 25)		202,001,372	
	19	Revenue less expenses. Subtract line 18 from line	12		10,398,147	<del></del>
Net Assets or				Ве	eginning of Current Yea	
Sset	20	Total assets (Part X, line 16)			283,318,319	
etA	21	Total liabilities (Part X, line 26)			163,758,433	
Z.	22 art II	Net assets or fund balances. Subtract line 21 from Signature Block	line 20		119,559,886	123,741,934.
		Ities of perjury, I declare that I have examined this return,	including accompanying echadular	and etatem	ante and to the heet of	my knowledge and helief it is
		t, and complete. Declaration of preparer (other than office				illy knowledge and belief, it is
uu	, 001100	t, and complete. Declaration of proparer (other than office	1) 13 basea on an information of wi	non proparoi	nas any knowledge.	
Sig	n	Signature of officer			Date	
Her		LESLIE R. LEVINSON, CFO				
	•	Type or print name and title				
		Print/Type preparer's name	Preparer's signature		Date Check	PTIN
Paid	i	DANIEL ROMANO			if self-em	ployed P00504182
Pre	oarer	Firm's name GRANT THORNTON ADVISORS LI	JC		Firm's EIN	99-1856619
	Only	Firm's address 757 THIRD AVENUE, 3RD FLOO	DR			
_		NEW YORK, NY 10017-2013			Phone no. (2	212) 599-0100
May	the IF	RS discuss this return with the preparer shown abo	ve? See instructions			X Yes No

### Form **8868**

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Type or Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number (TIN) SAN DIEGO STATE UNIVERSITY FOUNDATION **Print** SDSU RESEARCH FOUNDATION 95-6042721 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 5250 CAMPANILE DRIVE MC1947 return. See instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. SAN DIEGO, CA 92182-1947 Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1 Application Is For Return Application Is For Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 12 05 Form 8870 Form 990-T (trust other than above) 06 Form 5330 (individual) 13 07 Form 5330 (other than individual) 14 Form 990-T (corporation) Form 1041-A 80 After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of TERESA LOREN 5250 CAMPANILE DRIVE MC1947 - SAN DIEGO, CA 92182-1947 Telephone No. (619) 594-3141 Fax No. (619) 594-3224 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) . If this is for the whole group, check this and attach a list with the names and TINs of all members the extension is for. . If it is for part of the group, check this box ..... , 20 25 I request an automatic 6-month extension of time until  $\,$  MAY  $\,$  15  $\,$ , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year 20 JUL 1 , 20 <sup>23</sup> , and ending JUN 30 , 2024 」 tax year beginning Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3h Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Зс 0.

186,819,615.

Total program service expenses

Other program services (Describe on Schedule O.)

Form 990 (2023)

) (Revenue \$

### 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	<u> </u>		
•	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
3	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	· · · · · · · · · · · · · · · · · · ·	<del>"</del>		<del></del>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		,,
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
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	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
ızu	Schedule D, Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
b	•	12b	Х	
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
13	Did the appropriation projection of the construction of the Light of Object	14a	Х	<del></del>
14a		144		$\vdash$
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			
		445	х	
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b	21	$\vdash$
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	4-	Х	
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		$\vdash$
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	40	v	
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	-
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		v	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	Х	<del>                                     </del>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			,,
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
<b>20</b> a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	

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Part IV Checklist of Required Schedules (continued)

	· (continued)		V	N
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	<del></del>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			l
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			177
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		, l	
OF -	Part V, line 1	34	Х	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Λ	
р	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	OF.		Х
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(a)(2) arganizations. Did the arganization make any transfers to an exempt non charitable related arganization?	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	00		х
07	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		Х
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	x	
Pai	Note: All Form 990 filers are required to complete Schedule O  **T V Statements Regarding Other IRS Filings and Tax Compliance	JÖ	**	
. 41	Check if Schedule O contains a response or note to any line in this Part V			
	Shook if Soficialis of Cosponed of Hoto to any line in this fact v		Yes	N <sub>2</sub>
1-	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 974		162	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 974  Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
Ü	(manufalling) winging a familia winging and	1c	х	
	(gambling) winnings to prize winners?	10		

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SDSU RESEARCH FOUNDATION Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х	
b	If "Yes," enter the name of the foreign countryGEORGIA			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	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		X
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).			
а	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	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c	Х	
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
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	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the	_		
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
	Gross income from members or shareholders  Gross income from other sources. (Do not net amounts due or paid to other sources against			
b	to the state of th			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	u		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15	Х	
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

Form 990 (2023)

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SAN DIEGO STATE UNIVERSITY FOUNDATION SDSU RESEARCH FOUNDATION Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on 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 17 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 on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 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 **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 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,

	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on 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	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
200	tion C Disclosure			

17	List the states with which a copy of this Form 990 is required to be filed CA
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available
	for public inspection. Indicate how you made these available. Check all that apply.

X Own website X Upon request \_\_\_ Other (explain on Schedule O) Another's website

Describe on 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.

92182-1947

State the name, address, and telephone number of the person who possesses the organization's books and records TERESA LOREN - (619) 594-3141

Form 990 (2023)

5250 CAMPANILE DRIVE MC1947, SAN DIEGO,

## 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

X

#### 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization r	or any related	orga	niza	tion	con	npen	sate	ed any current officer, di	rector, or trustee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do			itior more	l than d	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	s both	n an	compensation	compensation	amount of
	week		Cei ai		II ecto	ii i us	(66)	from	from related	other
	(list any hours for	lirecto						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or c	trustee			sated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	ndividual trustee or director	al trus		yee	Highest compensated employee		1099-NEC)	10001120)	and related
	below	idual	Institutional t	e e	Key employee	est co oyee	er	<b>'</b>		organizations
	line)	Indiv	Instit	Officer	Key 6	High	Former			
(1) BRIAN DUTCHER	0.50									
COACH	50.00					Х		1,339,375.	358,956.	125,525.
(2) BRADY HOKE	0.50									
COACH	50.00					Х		965,417.	355,237.	128,914.
(3) ADELA DE LA TORRE	5.00									
PRESIDENT (SDSU EMPLOYEE)	45.00	Х		Х				0.	542,455.	187,852.
(4) JOHN WICKER	0.50									
ATHLETIC DIRECTOR	50.00					Х		215,500.	314,640.	130,542.
(5) MARK SUSSMAN	15.00	1								
RESEARCHER - FACULTY	35.00					Х		186,124.	263,587.	90,717.
(6) HALA MADANAT	15.00	_								
VICE PRESIDENT (SDSU EMPLOYEE)	35.00	Х		Х				52,763.	324,708.	137,009.
(7) AGNES WONG NICKERSON	5.00								_	
TREASURER (SDSU EMPLOYEE)	45.00	Х		Х				0.	327,145.	115,908.
(8) DEANNA MACKEY	50.00									
KPBS-GENERAL MANAGER (SDSU EMP)	0.00	Х						0.	287,340.	123,065.
(9) WILLIAM TONG	1.00									
DIRECTOR (SDSU EMP)	0.00	Х						0.	257,960.	97,949.
(10) JENNIFER THOMAS	15.00	-								
DIRECTOR (SDSU EMP)	35.00	Х						110,228.	155,297.	75,960.
(11) SALVADOR OCHOA (THRU 08/2023)	5.00									
DIRECTOR (SDSU EMPLOYEE)	45.00	Х						0.	268,276.	55,909.
(12) MICHELE GOETZ	38.00	-							006 600	T.C. 412
CHIEF EXECUTIVE OFFICER (SDSU EMP)	12.00		_	Х				0.	226,620.	76,413.
(13) GUADALUPE AYALA	15.00	١						00 553	144 000	75 005
DIRECTOR (SDSU EMP)	35.00	Х						80,553.	144,020.	75,825.
(14) SWETA SARKAR	15.00	.,						7 202	107 222	04.461
DIRECTOR (SDSU EMP)	35.00	Х						7,292.	187,323.	94,461.
(15) LESLIE R LEVINSON	38.00	-						0	212 224	72 676
CHIEF FINANCIAL OFFICER	12.00	-	-	Х				0.	213,324.	73,676.
(16) TERRENCE SHEPHERD NEWS DIRECTOR, KPBS	50.00	Ţ						220 002	0.	17 710
(17) DEB NAYLON	38.00	Х						229,902.	U .	17,710.
CHIEF HR OFFICER (SDSU EMP)	12.00	1			х			0.	17/ 126	67 775
CHIEF HA OFFICER (SDSO EMF)	12.00	<u> </u>			Λ			1 0.	174,126.	67,775.

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Dort VIII										- rage •	
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A)	(B)			(0	C)			(D)	(E)	(F)	
Name and title	Average	(do		Pos heck			one	Reportable	Reportable	Estimated	
	hours per	box	, unle	ss per	son i	s both	n an	compensation	compensation	amount of	
	week		l ai	lu a u	recto	i / ii us	(66)	from	from related	other 	
	(list any hours for	irecto						the	organizations (W-2/1099-MISC/	compensation from the	
	related	eord	tee			sated		organization (W-2/1099-MISC/	1099-NEC)	organization	
	organizations	ndividual trustee or director	Institutional trustee		99/	mpen		1099-NEC)	1099-1120)	and related	
	below	dualt	ution	<u></u>	key employee	st co	ь			organizations	
	line)	Indivi	Instit	Officer	Key e	Highest compensated employee	Former			· ·	
(18) ROBERT ZELLER	15.00										
DIRECTOR (SDSU EMP)	35.00	Х						3,535.	157,587.	72,280.	
(19) STEVEN GILL	15.00										
DIRECTOR (SDSU EMP)	35.00	Х						8,000.	146,283.	75,459.	
(20) RACHEL M. RAYNOHA	50.00										
CHIEF INFORMATION OFFICER	0.00				Х			185,857.	0.	40,361.	
(21) MING-HSIANG TSOU	15.00										
DIRECTOR/PRINCIPAL INV. (SDSU EMP)	35.00	Х						24,321.	131,588.	67,233.	
(22) BRENDA FOSTER	50.00										
DIRECTOR OF PEOPLE AND CULTURE, KPBS	0.00	Х						204,115.	0.	18,835.	
(23) STEPHEN FISHER	20.00										
COMMUNITY LIASON	20.00					Х		203,271.	0.	10,000.	
(24) RANDOLPH PHILIPP	15.00										
SECRETARY/PRINCIPAL INV. (SDSU EMP)	35.00	Х		Х				26,497.	82,267.	2,958.	
(25) TOM MCCARRON	1.00										
DIRECTOR/RETIRED VP (SDSU EMP)	0.00	Х						0.	0.	0.	
(26) VICKIE CAPPS	1.00										
DIRECTOR	0.00	Х						0.	0.	0.	
1b Subtotal								3,842,750.	4,918,739.	1,962,336.	
c Total from continuation sheets to Part VII	, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)								3,842,750.	4,918,739.	1,962,336.	

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

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			Yes	No
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		Х
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	Х	
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		Х

#### 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)	(B)	(C)
Name and business address	Description of services	Compensation
CARL BLOOM ASSOCIATES INC		
81 MAIN STREET, WHITE PLAINS, NY 10601	MAIL SERVICES	630,513.
SIERRA BUILDING CARE INC.		
923 STONEGATE CT., CHULA VISTA, CA 91913	JANITORIAL SERVICES	380,100.
QUERY		
5053 MOUNT DURBAN DR., SAN DIEGO, CA 92117	TECH SUPPORT	350,640.
GRANT THORNTON LLP		
P. O. BOX 51552, LOS ANGELES, CA 90071	ACCOUNTING	298,919.
ELLUCIAN COMPANY, LP		
2003 EDMUND HALLEY DR., RESTON, VA 20191	TECH SUPPORT	233,645.
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	12	
· · · · · · · · · · · · · · · · · · ·		000

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 95-6042721

Form 990 SDSU RESEARCE	H FOUNDATIO	N							95-60427	/21
Part VII Section A. Officers, Directors, Tru	ıstees, Key En	nplo	yee	s, aı	nd H	lighe	est (	Compensated Employe	ees (continued)	
(A) Name and title	(B) Average hours	(cl		Pos	C) ition that		lv)	( <b>D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	per week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
27) JOAN COPPENRATH	1.00									
IRECTOR	0.00	Х		_				0.	0.	
28) DAVID PAGE	1.00									
DIRECTOR	0.00	Х						0.	0.	
(29) ALEX WATERS	1.00									
DIRECTOR	0.00	Х		$\vdash$	$\vdash \vdash$			0.	0.	
(30) TAREK MORSY	1.00	х							0.	
DIRECTOR (SDSU EMP)	0.00							0.	0.	

# Form 990 (2023) SDSU RESEAR Part VIII Statement of Revenue

· ui		Statement of Revenue					
		Check if Schedule O contains a response or	note to any lin	e in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	( <b>D)</b> Revenue excluded from tax under
2 (0	1 .	a Federated campaigns 1a			Turiculori revenue	business revenue	sections 512 - 51
ij		b Membership dues 1b	41,837.				
5 8		c Fundraising events 1c					
ĽΫ́		d Related organizations 1d					
and Other Similar Amounts			74,604,657.				
Sign		f All other contributions, gifts, grants, and					
je je			36,062,855.				
3 ₹			2,575,991.				
D D		g Noncash contributions included in lines 1a-1f  h Total. Add lines 1a-1f	2,070,002	110,709,349.			
0 (0			Business Code	110,100,010.			
	0	GOLIEDING GOLIED I GEG	541900	58,777,096.	58,777,096.		
2	2 :		541900	26,739,060.	, , , , , , , , , , , , , , , , , , ,		
Revenue		THE A STATE OF	611310	15,897,467.			
e l			541900	10,754,835.		354,347.	
Be 2		TOWER GROWGODED PROGRAMS	541900	1,240,088.	1,240,088.	334,347.	
<u> </u>			541900	1,240,000.	1,240,000.		
-		f All other program service revenue		112 400 546			
-		g Total. Add lines 2a-2f		113,408,546.			
	3	3	i, and	2 515 056			2 545 050
		other similar amounts)		3,515,056.			3,515,056
	4		ceeds				
	5	Royalties		1,250,669.			1,250,669
		(i) Real	(ii) Personal				
		<b>a</b> Gross rents <b>6a</b> 7,758,764.					
	- 1	<b>b</b> Less: rental expenses <b>6b</b> 10,204,019.					
	(	c Rental income or (loss) 6c -2,445,255.					
		d Net rental income or (loss)		-2,445,255.			-2,445,255
	7 :	a Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 60,735,860.	7,500.				
	- 1	<b>b</b> Less: cost or other basis					
ne		and sales expenses <b>7b</b> 60,734,416.	0.				
Revenue	(	<b>c</b> Gain or (loss) <b>7c1</b> ,444.	7,500.				
Be		d Net gain or (loss)		8,944.			8,944
ē		a Gross income from fundraising events (not					
ğ		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 188a	11,166.				
		b Less: direct expenses 8b	221,471.				
				-210,305.			-210,305
		a Gross income from gaming activities. See					,
	•	Part IV, line 19					
		b Less: direct expenses 9b					
		c Net income or (loss) from gaming activities					
	10	a Gross sales of inventory, less returns					
		and allowances 10a					
		b Less: cost of goods sold 10b					
$\dashv$		c Net income or (loss) from sales of inventory					
2		<u> </u>	Business Code	2 160		2 000	80
g e		a PASSTHROUGH ENTITIES	211110	2,168.		2,088.	80
e d	١	b					
e e	•	С					
Miscellaneous Revenue		d All other revenue					
-		e Total. Add lines 11a-11d		2,168.			
	12	Total revenue. See instructions		226,239,172.	113,054,199.	356,435.	2,119,189

332009 12-21-23

#### 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).

Do 22	Check if Schedule O contains a respons t include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
7b, 8k	o, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	Grants and other assistance to domestic organizations	01 530 054	01 500 054		
	and domestic governments. See Part IV, line 21	21,539,874.	21,539,874.		
	Grants and other assistance to domestic	6 004 045	6 004 045		
	ndividuals. See Part IV, line 22	6,904,845.	6,904,845.		
	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	1 060 050	1 062 050		
	ndividuals. See Part IV, lines 15 and 16	1,062,858.	1,062,858.		
	Benefits paid to or for members				
	Compensation of current officers, directors,	E00 744	356 536	100 074	45 244
	rustees, and key employees	582,744.	356,526.	180,974.	45,244
	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
-	persons described in section 4958(c)(3)(B)	102 220 620	00 770 021	11 050 407	2 601 102
	Other salaries and wages	103,339,620.	88,779,031.	11,959,487.	2,601,102
	Pension plan accruals and contributions (include	7 262 702	6 222 566	044 140	105 000
	ection 401(k) and 403(b) employer contributions)	7,262,782.	6,233,566.	844,148.	185,068
	Other employee benefits	10,891,749.	9,348,268.	1,265,940.	277,541
	Payroll taxes	10,346,388.	8,880,191.	1,202,553.	263,644
	Fees for services (nonemployees):				
	Management	E63 0E0	67.663	406 106	
	_egal	563,859.	67,663.	496,196.	
	Accounting	298,919.		298,919.	
	obbying	120,254.		120,254.	400 042
	Professional fundraising services. See Part IV, line 17	489,842.		66,318.	489,842
	nvestment management fees	66,318.		00,310.	
_	Other. (If line 11g amount exceeds 10% of line 25,	14 002 221	10 010 525	2 521 707	1 240 000
	column (A), amount, list line 11g expenses on Sch O.)	14,892,231.	10,019,535.	3,531,787.	1,340,909
	Advertising and promotion	3,685,587.	2,015,211.	528,884.	1,141,492
	Office expenses	3,003,307.	2,015,211.	520,004.	1,141,492
	nformation technology				
	Royalties	3,337,220.	1,278,925.	2,058,295.	
	Decupancy	3,969,102.		· · · ·	27,842
	ravel	3,909,102.	3,469,728.	471,532.	27,042
	Payments of travel or entertainment expenses				
	or any federal, state, or local public officials	4,559,795.	3,749,270.	682,322.	128,203
	Conferences, conventions, and meetings	736,970.	3,743,270.	736,970.	120,203
	nterest	730,370.		730,370.	
	Payments to affiliates	6,653,497.	5,546,088.	1,107,409.	
	Depreciation, depletion, and amortization	525,410.	-75,187.	419,697.	180,900
		323,110.	73,107.	113,037.	100,500
a Ii	Other expenses. Itemize expenses not covered bove. (List miscellaneous expenses on line 24e. If ine 24e amount exceeds 10% of line 25, column (A),				
	mount, list line 24e expenses on Schedule 0.)	0 501 004	0.501.004		
	SUBCONTRACTS  DOOD OF THE STREET	9,501,984.	9,501,984.	0.070.044	4 050
	BROADCASTING EXPENSE	3,961,612.	1,077,518.	2,879,244.	4,850
	PRAINING COSTS	2,840,347.	2,741,376.	98,971.	176 570
	DPERATING EXPENSE	1,938,738.	-1,452,627.	3,214,795.	176,570
	All other expenses	6,294,453.	5,774,972.	511,891.	7,590
	otal functional expenses. Add lines 1 through 24e	226,366,998.	186,819,615.	32,676,586.	6,870,797
	loint costs. Complete this line only if the organization				
	eported in column (B) joint costs from a combined				
	ducational campaign and fundraising solicitation.				
Ĺ	Check here if following SOP 98-2 (ASC 958-720)				Form <b>990</b> (202

# Form 990 (2023) Part X Balance Sheet

Fai	LA	Charle if Schoolule O contains a vacanage or		line in this Dort V			
		Check if Schedule O contains a response or	note to any	I line in this part X	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			2,425.	1	2,425.
	2	Savings and temporary cash investments	11,092,824.	2	13,438,200.		
	3				32,433,653.	3	35,728,208.
	4	Accounts receivable, net			4,982,127.	4	6,091,685.
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, su					
		controlled entity or family member of any of t				5	
	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons describ	bed in sect	ion 4958(c)(3)(B)		6	
S	7	Notes and loans receivable, net			6,316,793.	7	5,479,594.
Assets	8	Inventories for sale or use		ı		8	
As	9	Prepaid expenses and deferred charges			1,618,169.	9	1,249,274.
	10a	Land, buildings, and equipment: cost or othe					
		basis. Complete Part VI of Schedule D		135,167,531.			
	b	Less: accumulated depreciation		68,579,037.	67,940,884.	10c	66,588,494.
	11	Investments - publicly traded securities			93,624,172.	11	107,720,260.
	12	Investments - other securities. See Part IV, Iir				12	
	13	Investments - program-related. See Part IV, lii				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11	65,307,272.	15	62,416,025.		
	16	Total assets. Add lines 1 through 15 (must e			283,318,319.	16	298,714,165.
	17	Accounts payable and accrued expenses	18,375,788.	17	22,749,166.		
	18	Grants payable				18	
	19	Deferred revenue			32,883,237.	19	46,071,590.
	20	Tax-exempt bond liabilities			260,000.	20	
	21	Escrow or custodial account liability. Comple				21	
S	22	Loans and other payables to any current or fo	ormer office	er, director,			
Liabilities		trustee, key employee, creator or founder, su	bstantial co	ontributor, or 35%			
abil		controlled entity or family member of any of t	hese perso	ons		22	
ت	23	Secured mortgages and notes payable to uni	related third	d parties	40,742,277.	23	37,939,609.
	24	Unsecured notes and loans payable to unrela	ated third p	arties		24	
	25	Other liabilities (including federal income tax,	payables t	o related third			
		parties, and other liabilities not included on li	nes 17-24).	Complete Part X			
		of Schedule D			71,497,131.	25	68,211,866.
	26	Total liabilities. Add lines 17 through 25			163,758,433.	26	174,972,231.
		Organizations that follow FASB ASC 958, o	check here	• 🗌			
Ses		and complete lines 27, 28, 32, and 33.					
au	27	Net assets without donor restrictions				27	
Ba	28	Net assets with donor restrictions				28	
nd I		Organizations that do not follow FASB ASG					
乓		and complete lines 29 through 33.					
5	29	Capital stock or trust principal, or current fun	ds		82,613,089.	29	98,128,911.
set	30	Paid-in or capital surplus, or land, building, or	equipmen	t fund	29,757,895.	30	18,350,325.
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated	d income, o	or other funds	7,188,902.	31	7,262,698.
Net	32	Total net assets or fund balances			119,559,886.	32	123,741,934.
	33	Total liabilities and net assets/fund balances			283,318,319.	33	298,714,165.

Pa	TEXT RECONCILIATION OF NET ASSETS				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	226,	239,	172.
2	Total expenses (must equal Part IX, column (A), line 25)	2	226,	366,	998.
3	Revenue less expenses. Subtract line 2 from line 1	3	-	127,	826.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	119,	559,	886.
5	Net unrealized gains (losses) on investments	5	3,	733,	363.
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 on Schedule O)	9		576,	511.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	123,	741,	934.
Pa	rt 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 X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?				Х
	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:				1
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis X Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х	
			Form	990	(2023)

#### SCHEDULE A

(Form 990)

Total

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.

SAN DIEGO STATE UNIVERSITY FOUNDATION

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Employer identification number** SDSU RESEARCH FOUNDATION 95-6042721 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 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). X 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. 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. 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. 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. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions)) SAN DIEGO STATE UNIVERSITY 33-0373293 6 Х 21,539,874

0.

21,539,874

#### 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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	82,828,123.	94,700,402.	92,474,373.	102,412,638.	110,709,349.	483,124,885.
2	Tax revenues levied for the organ-						
	ization'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	82,828,123.	94,700,402.	92,474,373.	102,412,638.	110,709,349.	483,124,885.
	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)						1,850,458.
6	Public support. Subtract line 5 from line 4.						481,274,427.
	etion B. Total Support						,,
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	82,828,123.	94,700,402.	92,474,373.	102,412,638.	110,709,349.	483,124,885.
	Gross income from interest,	02,020,120.	22,700,202.	22,272,070	202,122,000.		100,111,000.
0	,						
	dividends, payments received on						
	securities loans, rents, royalties,	8,895,025.	9,681,112.	8,612,079.	10,930,012.	12,524,489.	50,642,717.
•	and income from similar sources	0,033,023.	3,001,112.	0,012,075.	10,550,012.	12,324,403.	30,042,717.
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	20.052	6,082.	8,488.	1 170 005	13,334.	1,226,051.
	assets (Explain in Part VI.)	20,052.	0,082.	0,400.	1,178,095.	13,334.	534,993,653.
	<b>Total support.</b> Add lines 7 through 10		`			40	
	Gross receipts from related activities,					12	467,199,548.
13	First 5 years. If the Form 990 is for the					. , . ,	
800	organization, check this box and stop ction C. Computation of Publi						
				- l (f)		44	89.96 %
	Public support percentage for 2023 (li					14	,,,
	Public support percentage from 2022			Line 10 and line 1		15	
10a	33 1/3% support test - 2023. If the contain have The approximation available						v
	<b>stop here.</b> The organization qualifies		-		line 45 in 00 4/00/		
D	33 1/3% support test - 2022. If the constant have The average at a second star have a sec	-					
47-	and <b>stop here.</b> The organization quali				10 10 10-		
1/a	10% -facts-and-circumstances test						
	and if the organization meets the facts			=		_	
	meets the facts-and-circumstances te	•				7	
b	10% -facts-and-circumstances test						10% or
	more, and if the organization meets the				-		
	organization meets the facts-and-circu				•		
18	Private foundation. If the organizatio	n did not check a b	pox on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	S

Schedule A (Form 990) 2023

### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support	Т	T	T	1	T	1
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
10	regularly carried on Other income. Do not include gain						
12	or loss from the sale of capital						
40	assets (Explain in Part VI.)				-		
	Total support. (Add lines 9, 10c, 11, and 12.)				<u> </u>	04(-)(0) - : ::	
14	First 5 years. If the Form 990 is for the	•		•	•		
Se	check this box and stop here ction C. Computation of Publi						
	Public support percentage for 2023 (I			column (fl)		15	%
	Public support percentage from 2022	, (,,	,			16	<u>%</u> %
	ction D. Computation of Inves					, 10	70
	Investment income percentage for 20			ne 13. column (f))		17	%
	Investment income percentage from					18	<u> </u>
	33 1/3% support tests - 2023. If the						
	more than 33 1/3%, check this box ar						
b	33 1/3% support tests - 2022. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

Schedule A (Form 990) 2023

## Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes." answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? |f "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes." provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
	х	
1	Λ	
		Х
2		Λ
3a		Х
Sa		
3b		
- OD		
3с		
4a		Х
4b		
4c		
5a		Х
5b		
5c		
_		
6	Х	
_		Х
7		
8		Х
8		
9a		Х
Ju		
9b		Х
9с		Х
10a		Х
10b		
ıle A (Forn	n 990)	2023

	SAN DIEGO STATE UNIVERSITY FOUNDATION			
Sche	dule A (Form 990) 2023 SDSU RESEARCH FOUNDATION	95-6042721	Pa	age <b>5</b>
Pai	t IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
_	11c below, the governing body of a supported organization?	11a		х
h	A family member of a person described on line 11a above?	11b		Х
		110		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	44		
800	detail in Part VI. tion B. Type I Supporting Organizations	11c		Х
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of on			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office	cers,		
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one support	urtad		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among to			
	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,			
		2		
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations			
	aon or type in capperaing organizations		V	
			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		
Sec	tion 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, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	Х	
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 <b>Part VI</b> how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	х	
2				
3	By reason of the relationship described on line 2, above, 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	_		
<u> </u>	supported organizations played in this regard.	3	Х	
Sec	tion 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 instru	uctions).		
а	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.			
С	X The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity	y (see instructior	n <u>s).</u>	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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	2a		
<b>L</b>	that these activities constituted substantially all of its activities.	Zd		
b	Did the activities described on line 2a, above, 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 lines 3a and 3b below.			
а	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? If "Yes" or "No" provide details in Part VI.	3a		

**b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Organ	izations	. age c		
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( explain in Part VI). See instructions.					
	All other Type III non-functionally integrated supporting organizations mus	t complete	Sections A through E.			
Sect	ion 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				
Sect	ion 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):					
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				
е	<b>Discount</b> 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 0.015 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 0.035.	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, column A)	1				
2	Enter 0.85 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-functiona	lly integrate	ed Type III supporting orga	nization (see		
	instructions).					

Schedule A (Form 990) 2023

Sche	dule A (Form 990) 2023 SDSU RESEARCH FOUND				95-6042721	Page 7
Par	t V Type III Non-Functionally Integrated 509(	(a)(3) Supporting Orga	nizations (continu	ed)		
Secti	on D - Distributions		•	•	Current Y	ear
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported				
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	S	3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
6	Other distributions (describe in Part VI). See instructions.			6		
7	<b>Total annual distributions.</b> Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	ne organization is responsive				
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2023 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	s	(iii) Distributa Amount for	
1	Distributable amount for 2023 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2023 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2023					
a	From 2018					
	From 2019					
С	From 2020					
	From 2021					
е	From 2022					
f	Total of lines 3a through 3e					
	Applied to underdistributions of prior years					
	Applied to 2023 distributable amount					
	Carryover from 2018 not applied (see instructions)					
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2023 from Section D,					
	line 7: \$					
а	Applied to underdistributions of prior years					
	Applied to 2023 distributable amount					
	Remainder. Subtract lines 4a and 4b from line 4.					
	Remaining underdistributions for years prior to 2023, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in <b>Part VI.</b> See instructions.					
6	Remaining underdistributions for 2023. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2024. Add lines 3j					
•	and 4c.					
8	Breakdown of line 7:					
	Excess from 2019					
	Excess from 2020					
	Excess from 2021					
	Excess from 2022					
	Excess from 2023					

Schedule A (Form 990) 2023

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.) SCHEDULE A, PART II: THE ORGANIZATION IS NOT AN ORGANIZATION DESCRIBED IN IRC SECTIONS 170(B)(1)(A)(IV) OR (VI) BUT IS COMPLETING SCHEDULE A, PART II TO ELECT THE SPECIAL RULE RELATING TO THE CONTRIBUTION REPORTING ON FORM 990, SCHEDULE B. SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME: FUNDRAISING INCOME 2019 AMOUNT: \$ 20,052. 2020 AMOUNT: \$ 6,082. 2021 AMOUNT: \$ 8,488. 2022 AMOUNT: \$ 97,282. 2023 AMOUNT: \$ 11,166. OTHER INCOME 2022 AMOUNT: \$ 1,080,813. 2023 AMOUNT: \$2,168. PART IV, SECTION A, LINE 6: DESCRIPTION OF GRANTS OR PROVIDED BENEFITS TO OTHERS IN ADDITION TO ADMINISTERING FUNDS THAT DIRECTLY SUPPORT SAN DIEGO STATE UNIVERSITY, SDSU RESEARCH FOUNDATION ADMINISTERS FUNDS TO OUTSIDE ORGANIZATIONS OR INDIVIDUALS WHO ARE PARTNERED WITH SAN DIEGO STATE UNIVERSITY TO RESEARCH ISSUES IMPORTANT TO THE REGION, THE NATION, AND THE WORLD

Schedule A (Form 990) 2023

PART IV, SECTION D, LINE 3:

Schedule A (Form 990) 2023 SDSU RESEARCH FOUNDATION	95-6042721	Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a of 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 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 Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additing (See instructions.)	1 and 2; Part IV, Sectio V, Section B, line 1e; P	
ROLE THE ORGANIZATION'S SUPPORTED ORGS. PLAYED		
THE PRESIDENT OF SAN DIEGO STATE UNIVERSITY, (THE SUPPORTED		
ORGANIZATION) IS ALSO THE PRESIDENT OF SDSU RESEARCH FOUNDATION.		
FURTHERMORE, THE BOARD OF DIRECTORS OF SDSU RESEARCH FOUNDATION		
INCLUDES SENIOR MANAGEMENT OF SAN DIEGO STATE UNIVERSITY, SOME OF WHOM		
ALSO SERVE ON SDSU RESEARCH FOUNDATION'S INVESTMENT COMMITTEE.		
PART IV, SECTION E, LINE 1C:		
EXPLAIN HOW ORGANIZATION SUPPORTS GOVERNMENT ENTITY		
SDSU RESEARCH FOUNDATION IS AN AUXILIARY ORGANIZATION OF SAN DIEGO		
STATE UNIVERSITY, A CALIFORNIA PUBLIC EDUCATIONAL INSTITUTION. SDSU		
RESEARCH FOUNDATION'S ACTIVITIES SUPPORT THE RESEARCH, EDUCATIONAL, AND		
COMMUNITY SERVICE PROGRAMS OF THE UNIVERSITY.		
SDSU RESEARCH FOUNDATION ENGAGES IN ACTIVITIES ON BEHALF OF SAN DIEGO		
STATE UNIVERSITY, AND, IF NOT FOR THE INVOLVEMENT OF SDSU RESEARCH		
FOUNDATION, THE UNIVERSITY WOULD NORMALLY BE ENGAGED IN SIMILAR		
ACTIVITIES.		

SAN DIEGO STATE UNIVERSITY FOUNDATION

### Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Schedule B (Form 990) (2023)

**Employer identification number** 

SDSU RESEARCH FOUNDATION 95-6042721 Organization type (check one): Filers of: Section: Form 990 or 990-EZ X 501(c)( 3 ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

Name of organization
SAN DIEGO STATE UNIVERSITY FOUNDATION
SDSU RESEARCH FOUNDATION

Employer identification number

95-6042721

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$9,361,981.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$6,434,056.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$6,228,812.	Person X Payroll
(a)	(b)	(c)	(d)
4	Name, address, and ZIP + 4	\$ 5,815,212.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$5,454,640.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$4,400,361.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

Name of organization
SAN DIEGO STATE UNIVERSITY FOUNDATION
SDSU RESEARCH FOUNDATION

Employer identification number

95-6042721

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$4,138,107.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$3,841,474	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$3,584,991	Person X Payroll
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	Name, address, and ZIP + 4	- \$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11_		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
SAN DIEGO STATE UNIVERSITY FOUNDATION
SDSU RESEARCH FOUNDATION

**Employer identification number** 

95-6042721

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		_ _ _ _ \			
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate)	(d) Date received		
Part I		(See instructions.)	Date received		
(a)					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		  \$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		  \$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
		_			
	_	<del>-</del>   <sub>\$</sub>			

Schedule B (Form 990) (2023) Page **4** 

**Employer identification number** Name of organization SAN DIEGO STATE UNIVERSITY FOUNDATION SDSU RESEARCH FOUNDATION 95-6042721 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

#### SCHEDULE C (Form 990)

## Political Campaign and Lobbying Activities

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

ZU Open to

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

	Continue F01/a)/4) /F) au /C) aurani-at	kiana. Camulata Dart III			
	Section 501(c)(4), (5), or (6) organization SAN DIEGO	tions: Complete Part III. STATE UNIVERSITY FOUNDATI	ON	Em	player identification number
INAI		STATE UNIVERSITY FOUNDATI RCH FOUNDATION	ON	=	ployer identification number 95-6042721
D:		ganization is exempt unde	er section 501(c) o	or is a section 527 o	
	GITTA Complete if the org	janization is exempt unde		7 13 d 300tion 027 0	ngamzation.
	Provide a description of the organize	ration's direct and indirect politics	al compoign activities in	Dort IV	
					•
	Political campaign activity expendit Volunteer hours for political campai				Ψ
3	volunteer nours for political campai	gn activities			
Pá	art I-B Complete if the org	janization is exempt unde	er section 501(c)(3	3).	
1	Enter the amount of any excise tax	incurred by the organization under	er section 4955		\$
2	Enter the amount of any excise tax	incurred by organization manage	rs under section 4955		\$
3	If the organization incurred a section	n 4955 tax, did it file Form 4720 f	or this year?		Yes No
48	a Was a correction made?				Yes No
	o If "Yes," describe in Part IV.				
Pa	art I-C Complete if the org	janization is exempt unde	er section 501(c), o	except section 501	(c)(3).
1	Enter the amount directly expended	d by the filing organization for sec	tion 527 exempt function	on activities	\$
2	Enter the amount of the filing organ	ization's funds contributed to oth	er organizations for sec	ction 527	
	exempt function activities				\$
3	Total exempt function expenditures		•		
	line 17b				\$
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5	, , , , , , , , , , , , , , , , , , , ,	• •	,	•	• •
	made payments. For each organiza	· ·			•
	contributions received that were pro-	• •		•	ate segregated fund or a
	political action committee (PAC). If	I	1	I	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
					delivered to a separate
					political organization.  If none, enter -0
					ii riorie, criter o .
			1	1	1

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2023

		SDSU RESEARCH F		- 504/a\/0\ and file		042/21 Page 2
Part II-A	Complete if the organic section 501(h)).	anization is exe	empt under section	1 501 (c)(3) and file	a Form 5/68 (ele	ection under
A Check	if the filing organizat	ion belongs to an a	ffiliated group (and list in	Part IV each affiliated	group member's nam	e, address, EIN,
	expenses, and share	e of excess lobbying	g expenditures).			
<b>B</b> Check	if the filing organizat	ion checked box A	and "limited control" pro	visions apply.		
		s on Lobbying Exp itures" means am	penditures ounts paid or incurred.	)	<b>(a)</b> Filing organization's totals	(b) Affiliated group totals
1a Total lo	obbying expenditures to influ	ence public opinior	(grassroots lobbying)			
<b>b</b> Total lo	obbying expenditures to influ	ence a legislative b	ody (direct lobbying)			
c Total lo	obbying expenditures (add lir	nes 1a and 1b)				
<b>d</b> Other	exempt purpose expenditure	s				
e Total e	exempt purpose expenditures	(add lines 1c and	1d)			
f Lobby	ing nontaxable amount. Ente	r the amount from t	he following table in bot	h columns.		
If the a	mount on line 1e, column (a) oi	(b) is: The le	obbying nontaxable am	ount is:		
not ov	er \$500,000,		of the amount on line 1e.			
over \$	500,000 but not over \$1,000	,000, \$100,	000 plus 15% of the exc	ess over \$500,000.		
over \$	1,000,000 but not over \$1,50	0,000, \$175,	000 plus 10% of the exc	ess over \$1,000,000.		
over \$	1,500,000 but not over \$17,0	00,000, \$225,	000 plus 5% of the exce	ss over \$1,500,000.		
over \$	over \$17,000,000, \$1,000,000.					
<b>g</b> Grassr	oots nontaxable amount (ent	er 25% of line 1f)				
<b>h</b> Subtra	h Subtract line 1g from line 1a. If zero or less, enter -0-					
	act line 1f from line 1c. If zero					
j If there	e is an amount other than zer					
reporti	ng section 4911 tax for this	/ear?				Yes No
	(Some organizations th	at made a section	veraging Period Under 501(h) election do not arate instructions for li	have to complete all o	f the five columns b	elow.
	Т	Lobbying Exp	enditures During 4-Yea	ar Averaging Period		1
(or fisc	Calendar year cal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) Total
	ing nontaxable amount					
•	ing ceiling amount of line 2a, column(e))					
<b>c</b> Total lo	obbying expenditures					
<b>d</b> Grassr	oots nontaxable amount					
	roots ceiling amount of line 2d, column (e))					
<b>f</b> Grassr	oots lobbying expenditures					

Schedule C (Form 990) 2023

# Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:		v		
	Volunteers?		X X		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?		X		
	Mailings to members, legislators, or the public?		х		
	Publications, or published or broadcast statements?		X		
	Grants to other organizations for lobbying purposes?		Х		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Х			120,254.
_	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		х		
	Other activities?		х		
i	Total. Add lines 1c through 1i				120,254.
2 a	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		х		
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
Par	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6)	n 501(c)(	5), or sec	tion	
	501(c)(6).			Yes	No
	W 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			162	NO
1	Were substantially all (90% or more) dues received nondeductible by members?				
_	2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3 Par	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section			tion	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				3. is
	answered "Yes."		(D) : a	, .,	o, .c
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic				
_	expenses for which the section 527(f) tax was paid).	, u.			
а	Current year		2a		
	Carryover from last year				
c	Total				
3	4		ا م ا		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pe				
	expenditures next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Par					
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list)· Part II-	A lines 1 a	nd 2 (see	
	actions); and Part II-B, line 1. Also, complete this part for any additional information.	,,	, a.	(000	
	II-B				
DESC	RIPTION OF LOBBYING ACTIVITY				
SDSU	RESEARCH FOUNDATION PAID \$120,254 TO THE FIRM OF VAN SCOYOC				
ASSC	CIATES DURING THE FISCAL YEAR. THE FIRM REPRESENTS SDSU RESEARCH				
FOUN	DATION'S INTEREST IN WASHINGTON DC, PRIMARILY IN ACTIVITIES THAT				
TNVC	LVE THE COMPETITION FOR FEDERAL RESEARCH FUNDS.				
-14 A C					

Schedule C (Form 990) 2023

#### **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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Name of the organization

SAN DIEGO STATE UNIVERSITY FOUNDATION SDSU RESEARCH FOUNDATION

**Employer identification number** 95-6042721

Pai	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		nilar Funds or Ac	counts. Complete if the
		(a) Donor advised f	unds	(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 w	riting that the assets held	in donor advised fund	ds .
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any o	other purpose conferr	ing
	impermissible private benefit?			Yes No
Pai	rt II Conservation Easements. Complete if the organization	anization answered "Yes"	on Form 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (for example, recreati	ion or education) 🔲 F	Preservation of a histo	orically important land area
	Protection of natural habitat	F	Preservation of a certi	fied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution	on in the form of a co	nservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				2b
С	Number of conservation easements on a certified historic structure.			2c
d	Number of conservation easements included on line 2c acquir	red after July 25, 2006, and	d not	
	on a historic structure listed in the National Register	•		2d
3	Number of conservation easements modified, transferred, rele			zation during the tax
	year			
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the period	odic monitoring, inspection	n, handling of	
	violations, and enforcement of the conservation easements it l	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and	enforcing conservation	n easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and enfor	cing conservation ea	sements during the year
8	Does each conservation easement reported on line 2d above s	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	n easements in its revenue	and expense statem	ent and
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's fin	nancial statements tha	at describes the
_	organization's accounting for conservation easements.			
Pai	rt III Organizations Maintaining Collections of		ures, or Other S	imilar Assets.
	Complete if the organization answered "Yes" on Form 9	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenu	ue statement and bala	ance sheet works
	of art, historical treasures, or other similar assets held for publ	lic exhibition, education, or	research in furtherar	nce of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that descril	bes these items.	
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue st	tatement and balance	sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or re	search 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			<b>^</b>
2	If the organization received or held works of art, historical trea-	sures, or other similar asse	ets for financial gain, ¡	provide
	the following amounts required to be reported under FASB AS	SC 958 relating to these ite	ms:	
а	Revenue included on Form 990, Part VIII, line 1			\$
	Assets included in Form 990, Part X			
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.		Schedule D (Form 990) 2023

Par	t III Organizations Maintaining C	ollections of Art	t, Histor	ical Tre	asures, or	Other	Similar	Assets	(continu	ed)
3	Using the organization's acquisition, accession	on, and other records	s, check a	ny of the f	ollowing that	make sig	gnificant u	se of its		
	collection items (check all that apply).									
а	Public exhibition	d	I 🔲 Lo	an or excl	hange progra	ım				
b	b Scholarly research e Other									
С	c Preservation for future generations									
4	Provide a description of the organization's co	llections and explair	n how they	further th	e organizatio	n's exem	pt purpos	se in Part	XIII.	
5	During the year, did the organization solicit o	r receive donations o	of art, histo	orical treas	ures, or othe	r similar a	assets			
	to be sold to raise funds rather than to be ma								Yes	☐ No
Par	t IV Escrow and Custodial Arrang	gements Comple	te if the or	ganization	answered "\	es" on F	orm 990,	Part IV, li	ne 9, or	
	reported an amount on Form 990, Par	t X, line 21.								
1a	1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included									
	on Form 990, Part X?							L	Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing tab	ole:						
									Amount	
	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for esc	crow or cu	stodial accou	unt liabilit	y?	L	Yes	☐ No
	If "Yes," explain the arrangement in Part XIII.									
Par	t V Endowment Funds Complete if									
		(a) Current year	(b) Prid	•	(c) Two year		(d) Three y		` '	
	1a Beginning of year balance 37,184,737. 35,537,504. 35,299,070. 27,672,503. 26,676,449.									
	b Contributions 50,069. 557,193. 4,337,402. 4,216,648. 347,051.									
	Net investment earnings, gains, and losses	1,907,085.	1,2	04,329.	-3,997	,346.	3,4	64,256.	/	11,000.
	Grants or scholarships									
е	Other expenditures for facilities	77 222		14 200	1.01	600		F4 227		C1 007
_	and programs	77,222.	1	14,289.	101	,622.		54,337.		61,997.
f	Administrative expenses	30 064 660	27 1	04 727	25 527	504	25 21	00 070	27.6	70 502
g	End of year balance	39,064,669.				,504.	35,2	99,070.	27,0	72,503.
2	Provide the estimated percentage of the curr			column (a)	) held as:					
	Board designated or quasi-endowment	51.2200	_%							
b	Permanent endowment 13.8600	%								
С	Term endowment 34.9200									
0-	The percentages on lines 2a, 2b, and 2c short	•	41 41 - 4		al a also batalan					
<b>3</b> a	Are there endowment funds not in the posses	ssion of the organiza	ition that a	ire neid an	ia administer	ea for the	•		[v	es No
	organization by:									X
	<ul><li>(i) Unrelated organizations?</li><li>(ii) Related organizations?</li></ul>								3a(i) 3a(ii)	x
h	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir							33.(,	x
4	Describe in Part XIII the intended uses of the								30	
	t VI Land, Buildings, and Equipm		willelit lui	ius.						
	Complete if the organization answered		), Part IV, I	ine 11a. S	ee Form 990,	, Part X, li	ine 10.			
	Description of property	(a) Cost or o		(b) Cost			cumulate	ed l	(d) Book	value
	Besonption of property	basis (investn		basis (	I .	٠,	reciation		(a) Book	value
	Land	525	5,852.		,994,217.				16.5	20,069.
	Buildings		,		,180,567.	4	14,027,	331.		53,236.
	Leasehold improvements			,	•		. ,		•	
	Equipment	I		35	,466,895.		24,551,	706.	10,9	15,189.
	Other				-				· · · · · · · · · · · · · · · · · · ·	
	. Add lines 1a through 1e. (Column (d) must e		X. line 10c	. column	(B))		<u></u>		66,5	88,494.
	- (Section (Section Control Co	<u> </u>	<u> </u>						D (Form 9	

Schedule D (Form 990) 2023 SDSU RESEARCH FOU	NDATION	9	95-6042721	Page 3
Part VII Investments - Other Securities				
Complete if the organization answered "Yes" or	n 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 er	nd-of-year market	value
(1) Financial derivatives				
(2) Closely held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Fotal. (Col. (b) must equal Form 990, Part X, line 12, col. (B))				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" or	n 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 er	nd-of-year market	value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))				
Part IX Other Assets		•		
Complete if the organization answered "Yes" or	n Form 990, Part IV, line	11d. See Form 990, Part X, line 15.		
(a) [	Description		(b) Book v	value
(1) LEASES RECIEVABLE			54,3	313,686.
(2) OTHER POST-EMPLOYMENT BENEFIT OUTFLOWS			6,0	034,173.
(3) DEFERRED LOSS OF BOND REFUNDING			2,0	068,166.
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, line 15, col.	(B))		62,4	416,025.
Part X Other Liabilities				
Complete if the organization answered "Yes" or	n Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	5.	
1. (a) Description of liability			(b) Book v	value
(1) Federal income taxes				
(2) DEFERRED INFLOW OF RESOURCES			51,5	594,274.
(3) DUE TO SDSU AUXILIARIES			6,0	631,825.
(4) OTHER POST-EMPLOYMENT BENEFITS			3,3	338,461.
(5) UEI POOL			2,9	978,220.
(6) WORKERS COMPENSATION			3,6	669,086.
(7)				
(8)				
(9)				
Fotal. (Column (b) must equal Form 990. Part X. line 25. col.	(B))		68,2	211,866.
2. Liability for uncertain tax positions. In Part XIII, provide t	· //			

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2023

X

SDSU RESEARCH FOUNDATION

Page 4

Par	Reconciliation of Revenue per Audited Financial State  Complete if the organization answered "Yes" on Form 990, Part IV, line		Revenue per Re	turn	
1	T. I			1	241,745,287.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			•	211,713,207,
	Net unrealized gains (losses) on investments	2a	3,733,363.		
a b	Donated services and use of facilities		1,058,540.		
	Recoveries of prior year grants		2,000,010.		
c d	Other (Describe in Part XIII.)				
e				2e	4,791,903.
3	Add lines 2a through 2d Subtract line 2e from line 1			3	236,953,384.
4	Amounts included on Form 990. Part VIII. line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	66,318.		
b	Other (Describe in Part XIII.)		-10,780,530.		
				4c	-10,714,212.
5	Add lines <b>4a</b> and <b>4b</b> Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990. Part I. line 12.)			5	226,239,172.
	t XII Reconciliation of Expenses per Audited Financial State	ements With	Expenses per F		
	Complete if the organization answered "Yes" on Form 990, Part IV, line				
1	Total expenses and losses per audited financial statements			1	237,563,239.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				· · · · ·
а	Donated services and use of facilities	2a	1,058,540.		
b	Prior year adjustments		, ,		
С	Other losses				
d	Other (Describe in Part XIII.)		10,204,019.		
е	Add lines 2a through 2d			2e	11,262,559.
3	Subtract line 2e from line 1			3	226,300,680.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	66,318.		
b	Other (Describe in Part XIII.)				
С	Add lines 4a and 4b			4c	66,318.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	226,366,998.
Pai	t XIII Supplemental Information				
Provi	de 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 inforn	nation.		
PART	V, LINE 4:				
mo r	DOUTED THEE GENERALITONAL THRONE TO AMANDE PROGRAMS WHAT	. D. D. 3.33			
10 1	ROVIDE INTER-GENERATIONAL INCOME TO AUGMENT PROGRAMS THAT	ARE AN			
TNTE	GRAL PART OF THE RESEARCH, EDUCATIONAL, AND COMMUNITY SERV	TOE MISSION			
INTE	GRAD TAKE OF THE RESEARCH, EDUCATIONAL, AND COMMONITE SERV.	ICE MIDDION			
OF S	AN DIEGO STATE UNIVERSITY.				
	· · · · · · · · · · · · · · · · · · ·				
					_
PART	X, LINE 2:				
	·				
THE	SDSU RESEARCH FOUNDATION AND PRIMARILY ALL OF ITS AFFILIAT	ES ARE			
					_
RECO	GNIZED BY THE INTERNAL REVENUE SERVICE (IRS) AS EXEMPT FRO	M FEDERAL			
INCC	ME TAX UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE A	S CHARITABLE			
ORGA	NIZATIONS QUALIFYING UNDER INTERNAL REVENUE CODE SECTION 5	D1(C)(3),			
EV	DM BOD INCOME MAYER DEDMAINING MO HADDLAMDD DUGINDGS INCOM	a iindan			
EXCE	PT FOR INCOME TAXES PERTAINING TO UNRELATED BUSINESS INCOM	L. UNDER			
បួន	GAAP, THE TAX EFFECTS FROM UNCERTAIN TAX POSITIONS ARE TO	BE			

Part XIII   Supplemental Information (continued)		<u> </u>
RECOGNIZED IN THE FINANCIAL STATEMENTS ONLY IF THE POS	SITION IS MORE LIKELY	
THAN NOT TO BE SUSTAINED IF THE POSITION WERE TO BE CH	HALLENGED BY A TAX	
AUTHORITY.		
THE SDSU RESEARCH FOUNDATION COMPLETED AN ANALYSIS OF	ITS UNCERTAIN TAX	
POSITIONS IN ACCORDANCE WITH APPLICABLE ACCOUNTING GUI	DANCE AND DETERMINED	
THERE ARE NO AMOUNTS TO BE RECOGNIZED ON THE FINANCIAL	STATEMENTS AT JUNE	
30, 2024 OR 2023.		
PART XI, LINE 4B - OTHER ADJUSTMENTS:		
TRANSFER TO TCF	31,268.	
TRANSFERS FROM SDSU	-607,779.	
RENTAL EXPENSES NETTED ON RETURN	-10,204,019.	
TOTAL TO SCHEDULE D, PART XI, LINE 4B	-10,780,530.	
PART XII, LINE 2D - OTHER ADJUSTMENTS:		
RENTAL EXPENSES NETTED ON RETURN	10,204,019.	

Schedule D (Form 990) 2023

## SCHEDULE F (Form 990)

## Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

Open to Public

**Employer identification number** 

Department of the Treasury Internal Revenue Service

Name of the organization

Inspection

SAN DIEGO STATE UNIVERS	SITY FOUNDAT:	ION				
SDSU RESEARCH FOUNDATIO					95-6042721	
Part I General Infor	mation on A	ctivities Out	side the United States. Compl	ete if the organ	nization answered "\	∕es" on
Form 990, Part IV	/, line 14b.					
1 For grantmakers. Does	the organization	n maintain recor	ds to substantiate the amount of its gra	ants and other		
the grantees' eligibility for	or the grants or a	ssistance, and t	the selection criteria used to award the	grants or assis	stance? X	Yes No
	ribe in Part V the	organization's	procedures for monitoring the use of its	s grants and ot	her assistance outs	ide the
United States.						
			an be duplicated if additional space is r			
(a) Region	(b) Number of offices	èmplovees.	(d) Activities conducted in the region (by type) (such as, fundraising, pro-		vity listed in (d) gram service,	(f) Total expenditures
	in the region	agents, and independent	gram services, investments, grants to	1	e specific type	for and
		contractors	recipients located in the region)		(s) in the region	investments in the region
		in the region	-			in the region
RUSSIA AND						
NEIGHBORING STATES	1	6	PROGRAM SERVICES	EDUCATION		367,450.
MEIGHDORING STATES		•	I ROGRAM BERVICES	EDUCATION		307,430.
EAST ASIA AND THE						
PACIFIC			GRANTMAKING			21,026.
EUROPE			GRANTMAKING			254,894.
						,
NORTH AMERICA			GRANTMAKING			194,231.
SOUTH ASIA			GRANTMAKING			26,293.
aun alulnin lental						154 550
SUB-SAHARAN AFRICA			GRANTMAKING			154,758.
SOUTH AMERICA			GRANTMAKING			9,971.
DOOTH AMERICA			DIVINITIANTING			9,911.
RUSSIA AND						
NEIGHBORING STATES			GRANTMAKING			23,771.
3 a Subtotal	1	6				1,052,394.
<b>b</b> Total from continuation	_					
sheets to Part I	0	0				10,465.
		l				

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2023

1,062,859.

and 3b)

c Totals (add lines 3a

Schedule F (Form 990)		H FOUNDATION		95-6042721	Page
			(Schedule F (Form 990), Part I, line 3)		
<b>(a)</b> Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
HIDDLE EAST AND					
NORTH AFRICA			GRANTMAKING		10,465
Totals	•				10,465

Schedule F (Form 990) 202

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	SERVICE	11,761.	WIRE	0.		
		EUROPE (INCLUDING ICELAND &						
		GREENLAND)	SERVICE	188,294.	WIRE	0.		
		NORTH AMERICA	SUBCONTRACT	51,437.	WIRE	0.		
		NORTH AMERICA	SERVICE	57,005.	WIRE	0.		
		SOUTH AMERICA	SERVICE	5,400.	WIRE	0.		
		SOUTH ASIA	SERVICE	7,500.	WIRE	0.		
		av. a.v						
		SUB-SAHARAN AFRICA	SUBCONTRACT	150,158.	WIRE	0.		

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax
	exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Schedule F (Form 990) 2023

**<sup>3</sup>** Enter total number of other organizations or entities

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if	additional space is needed	j					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
TRAVEL	EAST ASIA AND THE PACIFIC	5	9,265.	СНЕСК	0.		
	EUROPE (INCLUDING ICELAND &						
SERVICE	GREENLAND)	8	52,325.	WIRE	0.		
	EUROPE (INCLUDING ICELAND &						
TRAVEL	GREENLAND)	6	10,775.	WIRE	0.		
SERVICE	NORTH AMERICA	61	75,386.	WIRE	0.		
TRAVEL	NORTH AMERICA	16	9,341.	WIRE	0.		
	RUSSIA AND NEIGHBORING						
FELLOWSHIP	STATES	4	23,771.	WIRE	0.		
SERVICE	SOUTH ASIA	3	16,998.	WIRE	0.		

SDSU RESEARCH FOUNDATION

Part	/ Foreign Forms	
1	Vas the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"	
	he organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign	
	Corporation (see the Instructions for Form 926)	Yes X No
2	old the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may	
	e required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and	
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a	
	J.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"	
	he organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to	
	Certain Foreign Corporations (see the Instructions for Form 5471)	Yes X No
4	Vas the organization a direct or indirect shareholder of a passive foreign investment company or a	
	ualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,	
	nformation Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing	
	und (see the Instructions for Form 8621)	Yes X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"	
	he organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain	
	oreign Partnerships (see the Instructions for Form 8865)	Yes X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If	
	Yes," the organization may be required to separately file Form 5713, International Boycott Report (see	

the Instructions for Form 5713; don't file with Form 990)

Schedule F (Form 990) 2023

Yes X No

Schedule F (Form 990) 2023 SDSU RESEARCH FOUNDATION 95-6042721	Page 5
Part V Supplemental Information	.g. 0
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of	
investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c)	
(estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.	
PART I, LINE 2:	
SDSU RESEARCH FOUNDATION DOES NOT ACT AS A PRIMARY GRANT MAKER. SDSU	
RESEARCH FOUNDATION ISSUES SUBCONTRACTS SPECIFICALLY APPROVED UNDER THE	
PRIMARY GRANTS AND CONTRACTS RECEIVED BY SDSU RESEARCH FOUNDATION. ALL	
SUCH SUBCONTRACTS, WHETHER FOREIGN OR DOMESTIC, ARE CLOSELY MONITORED BY	
SDSU RESEARCH FOUNDATION STAFF TO ENSURE COMPLIANCE WITH FEDERAL AND	
SPONSOR AGENCY REQUIREMENTS. ALL SUCH PAYMENTS ARE MADE IN ACCORDANCE	
WITH A DETAILED BUDGET AND SCOPE OF WORK. EACH SUBRECIPIENT'S PROGRESS IS	
MONITORED TO ENSURE THEY ARE IN COMPLIANCE WITH APPLICABLE REGULATIONS	
AND THAT ALL EXPENDITURES INCURRED BY THE SUBRECIPIENT ARE ALLOWABLE AND	
ALLOCABLE TO THE SUBAWARD.	
AS A RECIPIENT OF FEDERAL GRANTS AND CONTRACTS, SDSU RESEARCH FOUNDATION	
IS SUBJECT TO SPECIFIC SUB-RECIPIENT MONITORING AND AUDIT PROCEDURES AS	
PART OF ITS ANNUAL FINANCIAL AUDIT. IN ADDITION, ALL SUBCONTRACTS ARE	
SUBJECT TO REVIEW BY THE GRANT OR CONTRACT SPONSOR.	
BOBOLET TO KEVIEW BY THE GRANT OR CONTRACT STONDOR.	

Schedule F (Form 990) 2023

### SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** Name of the organization SAN DIEGO STATE UNIVERSITY FOUNDATION SDSU RESEARCH FOUNDATION 95-6042721 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations X Solicitation of non-government grants X Internet and email solicitations X Solicitation of government grants X Phone solicitations X Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) CARS, INC. - 4669 MURPHY Yes No CANYON RD, SAN DIEGO, CA Х AUTO DONATIONS 2,179,190 489,842 1,689,348. 489,842. 2,179,190. 1 689 348 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. CA

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990) 2023

SEE PART IV FOR CONTINUATIONS

			RCH FOUNDATION			-6042721 Page <b>2</b>
Pa	rt					
_		of fundraising event contributions and gro				ts greater than \$5,000.
			(a) Event #1	<b>(b)</b> Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			GI FILM FESTIVAL			col. <b>(c)</b> )
Φ			(event type)	(event type)	(total number)	55 <b>(5</b> )/
Revenue	1	Gross receipts	11,166.			11,166.
	_					
	2	Less: Contributions				<del> </del>
	_	Cross income (line 1 minus line 2)	11,166.			11,166.
_	3	Gross income (line 1 minus line 2)	11,100.			11,100.
	4	Cash prizes				
တ္သ	5	Noncash prizes				
sued	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Ö		Fatastainmant				
	ð	Entertainment Other direct expenses	221 471			221,471.
	10					221,471.
		Net income summary. Subtract line 10 from li				-210,305.
Pa		III Gaming. Complete if the organization				
		\$15,000 on Form 990-EZ, line 6a.		,,,		
			(-) Discour	(b) Pull tabs/instant	(-) (01)	(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
eve						
ш	1	Gross revenue				
nses	2	Cash prizes				
ct Expenses	3	Noncash prizes				<del> </del>
Direc	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
		ter the state(s) in which the organization condu				
		the organization licensed to conduct gaming a				Yes No
b	lf "	No," explain:				
	_					
	_					
		ere any of the organization's gaming licenses re			year?	
b	IT "	Yes," explain:				
	_					
33208	32 09	9-13-23			Sche	edule G (Form 990) 2023

#### SAN DIEGO STATE UNIVERSITY FOUNDATION

Sch	edule G (Form 990) 2023 SDSU RESEARCH FOUNDATION 95-	604272	1	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity conducted in:			
	a The organization's facility	13a		%
	o An outside facility	13b		<del>/</del> 6
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	100		/0
14	cinter the hame and address of the person who prepares the organization's garning/special events books and records.			
	Nama			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
k	o If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount			
	of gaming revenue retained by the third party \$			
(	If "Yes," enter name and address of the third party:			
	Name			
	Address			
	Address			
46	Coming manager information			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions:			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
•	vetein the state gaming licenses		Yes	No
		—	163	
r	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
Da	organization's own exempt activities during the tax year \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part IV	art III, lin	ies 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
SCH	EDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:			
(I)	NAME OF FUNDRAISER: CARS, INC.			
	,			
(T)	ADDRESS OF FUNDRAISER: 4669 MURPHY CANYON RD, SAN DIEGO, CA 92123			
( 1 /	ADDRESS OF FUNDATION. 4009 MORINI CANTON RD, SAN BIEGO, CA 92123			

#### SAN DIEGO STATE UNIVERSITY FOUNDATION

Schedule G	G (Form 990) SDSU RESEARCH FOUNDATION	95-6042721	Page 4
Part IV	G (Form 990)  SDSU RESEARCH FOUNDATION  Supplemental Information (continued)		<u> </u>
	(continued)		

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# **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.

Go to www.irs.gov/Form990 for the latest information.
SAN DIEGO STATE UNIVERSITY FOUNDATION

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

SDSU RESEARCH	I FOUNDATION						95-6042721
Part I General Information on Grants a	and Assistance						
Does the organization maintain records     criteria used to award the grants or assi	stance?						on X Yes No
2 Describe in Part IV the organization's pr							
Part II Grants and Other Assistance to					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient that received more than  1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
SAN DIEGO STATE UNIVERSITY 5500 CAMPANILE DRIVE							
SAN DIEGO, CA 92182	33-0373293	115	21,539,874.	0.	FMV		UNIVERSITY SUPPORT
<ul> <li>2 Enter total number of section 501(c)(3) a</li> <li>3 Enter total number of other organization</li> </ul>	-						1.

Schedule I (Form 990) 2023

SDSU RESEARCH FOUNDATION

95-6042721

Page 2

(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 noncash assistance
FELLOWSHIPS	1000	5,535,735.	0.		
BOOKS & SUPPLIES	400	1,091,400.	0.		
TRAVEL ASSISTANCE	400	270,070.	0.		
OTHER STUDENT COSTS	9	7,640.	0.		
Dest W   O makes while form the Deside the information	Dati la	- O Book III and a second	(h)		
Part IV Supplemental Information. Provide the information re	equired in Part I, iin	ie 2; Part III, column	(b); and any other ac	dditional information.	
PART I, LINE 2:		WDD OVER THE TO			
FELLOWSHIPS ARE PRIMARILY GRANTED TO INDIVIDUALS					
RESEARCH SKILLS. AS SUCH, THE RESPONSIBLE PRINCIP	AL INVESTIGATO	OR CLOSELY			
MONITORS THE PROGRESS OF THE RECIPIENTS.					

### SCHEDULE J (Form 990)

**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.

Go to www.irs.gov/Form990 for instructions and the latest information.

Internal Revenue Service Name of the organization

Department of the Treasury

SAN DIEGO STATE UNIVERSITY FOUNDATION

**Employer identification number** 95-6042721

OMB No. 1545-0047

Open to Public

Inspection

SDSU RESEARCH FOUNDATION

P	art i   Questions Regarding Co	mpensation				
					Yes	No
<b>1</b> a	a Check the appropriate box(es) if the or	ganization provided any of the fo	llowing to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete F	art III to provide any relevant info	ormation regarding these items.			
	First-class or charter travel	F	lousing allowance or residence for personal use			
	Travel for companions	F	Payments for business use of personal residence			
	Tax indemnification and gross-up	payments	lealth or social club dues or initiation fees			
	Discretionary spending account	F	Personal services (such as maid, chauffeur, chef)			
b	<b>b</b> If any of the boxes on line 1a are chec	ed, did the organization follow a	written policy regarding payment or			
	•	· ·	No," complete Part III to explain	1b		
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,						
			the items checked on line 1a?	2		
	, , , ,	, 3				
3	Indicate which, if any, of the following	he organization used to establish	h the compensation of the organization's			
			for methods used by a related organization to			
	establish compensation of the CEO/Ex					
	Compensation committee		Vritten employment contract			
	Independent compensation consi		Compensation survey or study			
	Form 990 of other organizations		Approval by the board or compensation committee			
	Tomi 330 of other organizations		approval by the board of compensation committee			
4	During the year, did any person listed	n Form 990. Part VII. Section A.	line 1a, with respect to the filing			
-	organization or a related organization:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	g			
а	Receive a severance payment or change	ue-of-control payment?		4a		х
	<b>b</b> Participate in or receive payment from					х
	c Participate in or receive payment from			···		Х
	If "Yes" to any of lines 4a-c, list the per					
	, , , ,					
	Only section 501(c)(3), 501(c)(4), and	501(c)(29) organizations must	complete lines 5-9.			
5	For persons listed on Form 990, Part V	I, Section A, line 1a, did the orga	anization pay or accrue any compensation			
	contingent on the revenues of:					
а				. 5a		х
	-					Х
	If "Yes" on line 5a or 5b, describe in Pa					
6			anization pay or accrue any compensation			
	contingent on the net earnings of:	-				
а	a The organization?			6a		х
	<b>b</b> Any related organization?			6b		Х
	If "Yes" on line 6a or 6b, describe in Pa	ırt III.				
7	•		anization provide any nonfixed payments			
				7	Х	
8			suant 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		Х
9						
				9		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2023

Page 2

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 aren't 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.

		(B) Breakdown of W	V-2 and/or 1099-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) BRIAN DUTCHER	(i)	1,034,375.	305,000.	0.	0.	0.	1,339,375.	0.
COACH	(ii)	358,560.	0.	396.	103,576.	21,949.	484,481.	0.
(2) BRADY HOKE	(i)	892,917.	72,500.	0.	0.	0.	965,417.	0.
COACH	(ii)	349,231.	0.	6,006.	103,576.	25,338.	484,151.	0.
(3) ADELA DE LA TORRE	(i)	0.	0.	0.	0.	0.	0.	0.
PRESIDENT (SDSU EMPLOYEE)	(ii)	527,407.	0.	15,048.	170,607.	17,245.	730,307.	0.
(4) JOHN WICKER	(i)	117,500.	80,000.	18,000.	0.	0.	215,500.	0.
ATHLETIC DIRECTOR	(ii)	314,502.	0.	138.	101,553.	28,989.	445,182.	0.
(5) MARK SUSSMAN	(i)	163,952.	0.	22,172.	18,612.	0.	204,736.	0.
RESEARCHER - FACULTY	(ii)	263,587.	0.	0.	50,358.	21,747.	335,692.	0.
(6) HALA MADANAT	(i)	52,763.	0.	0.	5,276.	0.	58,039.	0.
VICE PRESIDENT (SDSU EMPLOYEE)	(ii)	315,618.	0.	9,090.	101,728.	30,005.	456,441.	0.
(7) AGNES WONG NICKERSON	(i)	0.	0.	0.	0.	0.	0.	0.
TREASURER (SDSU EMPLOYEE)	(ii)	317,749.	0.	9,396.	101,303.	14,605.	443,053.	0.
(8) DEANNA MACKEY	(i)	0.	0.	0.	0.	0.	0.	0.
KPBS-GENERAL MANAGER (SDSU EMP)	(ii)	287,340.	0.	0.	92,801.	30,264.	410,405.	0.
(9) WILLIAM TONG	(i)	0.	0.	0.	0.	0.	0.	0.
DIRECTOR (SDSU EMP)	(ii)	257,198.	0.	762.	83,344.	14,605.	355,909.	0.
(10) JENNIFER THOMAS	(i)	110,228.	0.	0.	11,023.	0.	121,251.	0.
DIRECTOR (SDSU EMP)	(ii)	145,187.	0.	10,110.	48,199.	16,738.	220,234.	0.
(11) SALVADOR OCHOA (THRU 08/2023)	(i)	0.	0.	0.	0.	0.	0.	0.
DIRECTOR (SDSU EMPLOYEE)	(ii)	223,874.	0.	44,402.	46,733.	9,176.	324,185.	0.
(12) MICHELE GOETZ	(i)	0.	0.	0.	0.	0.	0.	0.
CHIEF EXECUTIVE OFFICER (SDSU EMP)	(ii)	226,224.	0.	396.	46,733.	29,680.	303,033.	0.
(13) GUADALUPE AYALA	(i)	80,553.	0.	0.	8,055.	0.	88,608.	0.
DIRECTOR (SDSU EMP)	(ii)	144,020.	0.	0.	46,111.	21,659.	211,790.	0.
(14) SWETA SARKAR	(i)	7,292.	0.	0.	0.	0.	7,292.	0.
DIRECTOR (SDSU EMP)	(ii)	187,233.	0.	90.	57,957.	36,504.	281,784.	0.
(15) LESLIE R LEVINSON	(i)	0.	0.	0.	0.	0.	0.	0.
CHIEF FINANCIAL OFFICER	(ii)	212,928.	0.	396.	46,733.	26,943.	287,000.	0.
(16) TERRENCE SHEPHERD	(i)	188,826.	0.	41,076.	16,525.	1,185.	247,612.	0.
NEWS DIRECTOR, KPBS	(ii)	0.	0.	0.	0.	0.	0.	0.

Page 2

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 aren't 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.

		(B) Breakdown of W	J-2 and/or 1099-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(17) DEB NAYLON	(i)	0.	0.	0.	0.	0.	0.	0.
CHIEF HR OFFICER (SDSU EMP)	(ii)	173,988.	0.	138.	55,945.	11,830.	241,901.	0.
(18) ROBERT ZELLER	(i)	3,535.	0.	0.	0.	0.	3,535.	0.
DIRECTOR (SDSU EMP)	(ii)	157,587.	0.	0.	50,533.	21,747.	229,867.	0.
(19) STEVEN GILL	(i)	8,000.	0.	0.	0.	0.	8,000.	0.
DIRECTOR (SDSU EMP)	(ii)	146,283.	0.	0.	46,228.	29,231.	221,742.	0.
(20) RACHEL M. RAYNOHA	(i)	185,488.	0.	369.	18,723.	21,638.	226,218.	0.
CHIEF INFORMATION OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(21) MING-HSIANG TSOU	(i)	24,321.	0.	0.	2,432.	0.	26,753.	0.
DIRECTOR/PRINCIPAL INV. (SDSU EMP)	(ii)	131,588.	0.	0.	38,420.	26,381.	196,389.	0.
(22) BRENDA FOSTER	(i)	204,041.	0.	74.	10,198.	8,637.	222,950.	0.
DIRECTOR OF PEOPLE AND CULTURE, KPBS		0.	0.	0.	0.	0.	0,	0.
(23) STEPHEN FISHER	(i)	200,000.	0.	3,271.	10,000.	0.	213,271.	0.
COMMUNITY LIASON	(ii)	0.	0.	0.	0.	0.	0,	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SDSU RESEARCH FOUNDATION

#### 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.

PART I, LINE 3:

UPON HIRE THE COMPENSATION OF THE CEO IS APPROVED BY THE SDSU RESEARCH

FOUNDATION (SDSURF) BOARD OF DIRECTORS. ANNUALLY IF CALIFORNIA STATE

UNIVERSITY (CSU) PROVIDES A COST OF LIVING/MERIT INCREASE TO ALL

ADMINISTRATIVE TYPE OF EMPLOYEES. THEN THE CEO OF SDSURF WOULD BE GIVEN

A SIMILAR INCREASE. THESE INCREASES ARE PROVIDED TO ALL EMPLOYEES OF

SDSURF AS SDSURF IS REQUIRED TO PROVIDE SIMILAR PAY AND BENEFITS TO

THE CSU IN COMPLIANCE WITH THE EDUCATION CODE.

PART I LINE 7:

UNIVERSITY COACHES RECEIVED ADDITIONAL COMPENSATION FOR ACHIEVING TEAM

ATHLETIC AND SCHOLASTIC MILESTONES.

PART II:

THE FOUNDATION IN SUPPORT OF SDSU PAYS COMPENSATION TO CERTAIN

INDIVIDUALS, LISTED ON PART VII AND SCHEDULE J. TO ALLOW SDSU TO

ATTRACT AND RETAIN THE BEST TALENT POSSIBLE IN ORDER TO EXECUTE ON ITS

EDUCATIONAL MISSION. THESE INDIVIDUALS PROVIDE, LITTLE OR NO DIRECT

SERVICES TO THE FOUNDATION AND THE AMOUNTS ARE PAID ONLY IN FURTHERANCE

Schedule J (Form 990) 2023

Page 3

Page 3

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.
OF THE FOUNDATIONS MISSION TO SUPPORT SDSU.

#### **SCHEDULE M** (Form 990)

## **Noncash Contributions**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

SAN DIEGO STATE UNIVERSITY FOUNDATION

Employer identification number

SDSU RESEARCH FOUNDATION 95-60427								
Pai	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of d noncash contrib	letermin	•	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles	Х	1,556	2,179,190.	AUCTION PRICE			
7	Boats and planes		,	, ,				
8	Intellectual property							
9	Securities - Publicly traded	Х	41	396,801.	FMV			
10	Securities - Closely held stock			,				
11	Securities - Partnership, LLC, or							
••	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
13								
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ( )							
29	Number of Forms 8283 received by the organization	zation during	g the tax year for co	ontributions				
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement <b>29</b>			22	
							Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least 3 years from the date of	the initial co	ntribution, and whi	ch isn't required to be used	for			
	exempt purposes for the entire holding period?	?				30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	policy that re	equires the review of	of any nonstandard contribut	ions?	31	Х	
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash				
	contributions?		_			32a	Х	
b	If "Yes," describe in Part II.		•					
33	If the organization didn't report an amount in c	olumn (c) foi	r a type of property	for which column (a) is ched	cked,			
	describe in Part II.	` ,		.,	•			

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2023

	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
HIRE AND USE OF THIRD PARTIES  KPBS CONDUCTS A VEHICLE DONATION PROGRAM WITH THE ASSISTANCE OF CARS,	
KPBS CONDUCTS A VEHICLE DONATION PROGRAM WITH THE ASSISTANCE OF CARS,	PART I, LINE 32:
	HIRE AND USE OF THIRD PARTIES
	KPBS CONDUCTS A VEHICLE DONATION PROGRAM WITH THE ASSISTANCE OF CARS,

Schedule M (Form 990) 2023

332142 09-11-23

## SCHEDULE O (Form 990)

Department of the Treasury

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 Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

2023
Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

Name of the organization

SAN DIEGO STATE UNIVERSITY FOUNDATION

Employer identification number

SDSU RESEARCH FOUNDATION 95-6042721 PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: STATE UNIVERSITY. FORM 990, PART VI, SECTION A, LINE 7A: HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY: THE PRESIDENT OF SAN DIEGO STATE UNIVERSITY IS ALSO THE EX OFFICIO PRESIDENT OF SDSU RESEARCH FOUNDATION AND A VOTING MEMBER OF THE BOARD OF DIRECTORS. FOUR OTHER SDSU RESEARCH FOUNDATION DIRECTORS ARE APPOINTED EX OFFICIO BY VIRTUE OF THEIR POSITIONS IN THE UNIVERSITY, AND ALL ELECTED DIRECTORS ARE NOMINATED BY THE PRESIDENT. FORM 990, PART VI, SECTION A, LINE 7B: DECISIONS OF GOVERNING BODY APPROVAL BY MEMBERS OR SHAREHOLDERS: UNDER TITLE 5 OF THE CALIFORNIA CODE OF REGULATIONS 42402. THE UNIVERSITY PRESIDENT IS REQUIRED TO ASSURE THAT SDSU RESEARCH FOUNDATION OPERATES IN CONFORMITY WITH POLICIES OF THE CALIFORNIA STATE UNIVERSITY AND SAN DIEGO STATE UNIVERSITY. THE PRESIDENT MAY DISCONTINUE ANY PROGRAM OR EXPENDITURE THAT HE OR SHE DETERMINES IS INCONSISTENT WITH THESE POLICIES. FORM 990, PART VI, SECTION B, LINE 11B: FORM 990 REVIEW PROCESS: A DRAFT OF THE FORM 990 IS PROVIDED TO EACH MEMBER OF THE FINANCE AND INVESTMENT COMMITTEE. THE DISCLOSURES, SIGNIFICANT CHANGES AND QUESTIONS ARE DISCUSSED AND ADDRESSED. AFTER REVIEW. THE FINANCE AND INVESTMENT COMMITTEE THEN APPROVES THE FORM 990. PRIOR TO FILING. EACH MEMBER OF THE BOARD OF DIRECTORS IS PROVIDED A COPY FOR REVIEW.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2023

<u>Schedule O (Form 990) 2023</u> Page **2** 

Name of the organization SAN DIEGO STATE UNIVERSITY FOUNDATION **Employer identification number** SDSU RESEARCH FOUNDATION 95-6042721 FORM 990, PART VI, SECTION B, LINE 12C: EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS: SDSU RESEARCH FOUNDATION REQUIRES EACH INTERESTED PARTY TO DISCLOSE ANNUALLY INTERESTS THAT COULD GIVE RISE TO CONFLICT. SDSU RESEARCH FOUNDATION ALSO MONITORS COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY THROUGH ITS PURCHASING AND SPONSORED RESEARCH DEVELOPMENT DEPARTMENTS. SDSU RESEARCH FOUNDATION STAFF REVIEWS CONTRACTS AND REQUISITIONS FOR POTENTIAL CONFLICTS. MANY OF ITS INTERNAL PROCESSING DOCUMENTS INCLUDE AFFIRMATIONS REGARDING LACK OF CONFLICTS. THE BOARD OF DIRECTORS IS AUTHORIZED TO TAKE WHATEVER ACTIONS IT DEEMS NECESSARY TO RESOLVE POTENTIAL OR ACTUAL CONFLICTS INCLUDING; (1) PROHIBITING THE INTERESTED PARTY FROM DISCUSSIONS OR DECISIONS REGARDING THE CONFLICT OF INTEREST, (2) MODIFYING OR REDEFINING THE DUTIES AND RESPONSIBILITIES OF THE INTERESTED PARTY, OR (3) REQUIRING THE RESIGNATION OF THE INTEREST PARTY. FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT: PURSUANT TO TILE 5 OF THE CALIFORNIA CODE OF REGULATIONS 42405, SDSU RESEARCH FOUNDATION MAINTAINS SALARY SCHEDULES COMPARABLE TO SAN DIEGO STATE UNIVERSITY (A CALIFORNIA PUBLIC INSTITUTION). THE SALARIES OF THE EXECUTIVE DIRECTOR AND THE CHIEF FINANCIAL OFFICER ARE ALSO SUBJECT TO APPROVAL BY THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION C, LINE 19: OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE: SDSU RESEARCH FOUNDATION'S 990 TAX RETURN IS AVAILABLE ON ITS WEBSITE. IN ADDITION, SDSU RESEARCH FOUNDATION PROVIDES PAPER OR ELECTRONIC COPIES OF

Schedule O (Form 990) 2023	Page 2
Name of the organization SAN DIEGO STATE UNIVERSITY FOUNDATION	Employer identification number
SDSU RESEARCH FOUNDATION	95-6042721
ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AUDITED FINANCIAL	
STATEMENTS, RESEARCH REPORTS, SINGLE AUDIT COMPLIANCE REPORTS AND ITS FORM	
990 TO THE PUBLIC ON REQUEST. MOST OF THESE DOCUMENTS ARE ALSO AVAILABLE ON	
THE MIDDELLE	
ITS WEBSITE.	
DADE VII CROSSON A	
PART VII, SECTION A	
THE DIRECTORS LISTED ON PART VII, SECTION A WERE NOT COMPENSATED FOR	
THEIR ROLE ON THE BOARD OF DIRECTORS, RATHER AS PRINCIPAL INVESTIGATORS	
INDIA NOLE ON THE BOIND OF BINDETONE, MITHER NO TRINCITIES INVESTIGATIONS	
ON THE RESEARCH PROJECTS OF THE FILING ORGANIZATION.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
TRANSFERS FROM SDSU 607,779.	
TRANSFERS TO THE CAMPANILE FOUNDATION -31,268.	
TOTAL TO FORM 990, PART XI, LINE 9 576,511.	

#### SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

## **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.

SAN DIEGO STATE UNIVERSITY FOUNDATION

Go to www.irs.gov/Form990 for instructions and the latest information.

2023

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

SDSU RESEARCH FOUNDATION 95-6042721 Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (f) (a) (b) (c) (d) (e) Name, address, and EIN (if applicable) Primary activity Legal domicile (state or Total income End-of-year assets Direct controlling of disregarded entity entity foreign country) 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 Part II organizations during the tax year. (a) (b) (c) (d) (e) (f) (g) Section 512(b)(13) Name, address, and EIN Legal domicile (state or **Exempt Code** Public charity Direct controlling Primary activity controlled of related organization section status (if section entity foreign country) entity? 501(c)(3)) Yes No SDSU FOUNDATION VEBA TRUST - 33-0712822 5250 CAMPNAILE DRIVE MC 1947 SAN DIEGO, CA 92182 VEBA TRUST CALIFORNIA 501(C)(9) N/A Х SAN DIEGO STATE UNIVERSITY - 33-0373293 5500 CAMPANILE DRIVE GOVERNMENT SAN DIEGO, CA 92182 HIGHER EDUCATION CALIFORNIA Х

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2023

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)	(b)	(c)	(d)	(e)	(f)	(g)	(i	h)	(i)	(j)	(k)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Share of end-of-year allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	e V-UBI General managin partner		age ship
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	10	
										Ш		

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>(b)</b> Primary activity	Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	tion b)(13) rolled tity?
CHARITABLE REMAINDER TRUST (1) 5250 CAMPANILE DR SAN DIEGO, CA 92182	TRUST		SDSU RESEARCH FOUND	TRUST	0.	0.		X	110
SAN DIEGO, CA 32102	TROST	CA	COND	INOSI	<u> </u>	•		A	

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

Not	ote: 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 organization engage in any of the following transactions with one or mo	re re	lated organizations listed i	n Parts II-IV?			
а	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		Х
	<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b	Х	
	c Gift, grant, or capital contribution from related organization(s)				1c	Х	
	d Loans or loan guarantees to or for related organization(s)				1d	Х	
	e Loans or loan guarantees by related organization(s)				1e	Х	
f	f Dividends from related organization(s)				1f		Х
g	g Sale of assets to related organization(s)				1g		Х
	h Purchase of assets from related organization(s)				1h		Х
i	i Exchange of assets with related organization(s)				1i		Х
	j Lease of facilities, equipment, or other assets to related organization(s)				1j	Х	
k	k Lease of facilities, equipment, or other assets from related organization(s)				1k	Х	
	Performance of services or membership or fundraising solicitations for related organization(s)				11	Х	
m	m Performance of services or membership or fundraising solicitations by related organization(s)				1m	Х	
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Х	
0	Sharing of paid employees with related organization(s)				10	Х	
р	p Reimbursement paid to related organization(s) for expenses				<b>1</b> p	Х	
	q Reimbursement paid by related organization(s) for expenses				1q	Х	
r	r Other transfer of cash or property to related organization(s)				1r		Х
s	s Other transfer of cash or property from related organization(s)				1s		Х
2	! If the answer to any of the above is "Yes," see the instructions for information on who must comple	te th	is line, including covered re	elationships and transaction thresholds.			
(a) (b) (c) (d)  Name of related organization Transaction type (a-s) Amount involved Method of determining amount involved							

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) SAN DIEGO STATE UNIVERSITY	В	7,364,419.	ACTUAL
(2) SAN DIEGO STATE UNIVERSITY	0	9,833,071.	ACTUAL
(3) SAN DIEGO STATE UNIVERSITY	P	4,342,384.	ACTUAL
<u>(4)</u>			
<u>(5)</u>			
<u>(6)</u>			

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)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.?  Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation	Code V-UBI amount in box 2 of Schedule K-	General of managing partner?  Yes No	(k) r Percentage ownership
	-									

Schedule R (Form 990) 2023