	orm <b>990-T</b>	Ex	empt Organ					x Return		OMB No. 1545	-0687
	orm 990-1		•	-		section 603		C / 20 /		2018	2
		•	or 2018 or other tax y						2019	2010	)
Depa	artment of the Treasury		o to www.irs.gov						100	Open to Public hea	ection for
A	nal Revenue Service Check box if	- Do not	enter SSN numbers of			changed and see ins		zation is a bui(c)(3		501(c)(5) Organization	
	address changed		CALTEODNIA			•	•		(E	mployees' trust, see structions.)	Humber
	Exempt under sectio	n Print or	CALIFORNIA ASSOCIATIO	N. TNC.	NT A G	KSIII, FRE	PONO			4-1512286	
	X <sub>501</sub> ( C )( 3 ) 408(e)		0004 0300	SHAW AVE	NUE					related business a	
	408(e) 220( 408A 530(		FRESNO, CA	93710						ee instructions.)	
	529(a)								4	53220 722	210
C	Book value of all assets at end of year	F Group	exemption number	r (See instruct	ions.)	-			<u> </u>	100220 122	
,	129, 409, 136		k organization typ				501	(c) trust	401(a)	trust Oth	er trust
Н	Enter the number of the	=				<b>≻</b> 5		escribe the only (			
	trade or business he	ere - BOOKST	ORE, CONCES	SSIONS, C	ATER	RING		. If	only or	e, complete Pa	ırts I-V.
	If more than one, de	escribe the firs	t in the blank spa	ce at the end	of the	previous sente	ence, co	mplete Parts I a	nd ÎI, c	omplete a Sch	dule M
	for each additional to				t - 1						==
	During the tax year,				_		t-subsidi	ary controlled gi	oup?	. ► ∐Yes	XNo
	If 'Yes,' enter the na			ne parent cor	poration	on –	-				
	The books are in care					(A) In a seri		elephone numbe			
VANCO 2002	Int I Unrelated			ne	1	(A) Incon	ne	(B) Expens	es	(C) Net	
	<b>a</b> Gross receipts or s <b>b</b> Less returns and allowa			<b>c</b> Balance►	1 c						
	Cost of goods sold				2		*				, y
3			•		3						
_	a Capital gain net in				4a						<del></del>
	<b>b</b> Net gain (loss) (Form 4		•		4b						
	c Capital loss deduc				4c						
5	Income (loss) from a	a partnership o	r an S corporation								
_	(attach statement)										
6	Rent income (Sche	•			6						
7	Unrelated debt-fina				7 8						<del></del>
8 9	Interest, annuities, roya Investment income of a		<del>-</del>		9						
10	Exploited exempt a				10		-		-, -		<del></del>
11	Advertising income	-			11			_			
12					<b>- ''</b>						
	01.101 11.001110 (000	, mondonomo,	attaoti borioaaloji		12						
13	Total. Combine line	es 3 through 1	2				0.		0.		0.
			en Elsewhere			s for limitation		deductions.)		ept for	
1812200-00	contribution	ons, deducti	ions must be d	directly con	necte	ed with the u	ınrelate	ed business î	ncome	e.)	
14	•										
15	Salaries and wage										
16	Repairs and maint										
17	Bad debts										
18	Interest (attach sch										
19	Taxes and licenses										
20	Charitable contribu	•		•		_					<del></del>
21	Depreciation (attac	on Form 4562)	to adula A anatala			21	<u> </u>				
22	Less depreciation	ciaimed on Sc	nedule A and else	ewnere on ret	urn		za	<u></u>	22b	_	
23 24	Contributions to de										
24 25	Employee benefit p		•								
25 26	Excess exempt exp								1		
27	Excess readership										
28	Other deductions (									-	
29	Total deductions.	Add lines 14 tl	hrough 28						. 29		<del></del>
30	Unrelated business		· ·								
31	Deduction for net operat										CONTRACTOR AND
32	Unrelated business	s taxable incor	ne. Subtract line	ত। trom line 3	5U				.   32		0.

Par	t III	Total Unrelated Business Taxable Income				
33		of unrelated business taxable income computed from all unrelated trades or businesses (see				
		uctions)		3 1,	769,7	87.
34		unts paid for disallowed fringes	34	4		
35		ction for net operating loss arising in tax years beginning before January 1, 2018 (see	-	_		
20		uctions) SEE STATEMENT 1	35	<sup>5</sup> 1,	769,7	<u>87.</u>
36		of unrelated business taxable income before specific deduction. Subtract line 35 from the sum es 33 and 34.	. 36	۵		0
27						0.
37 38		ific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	/		
30		the smaller of zero or line 36	. 38	R		0.
Dar		Tax Computation				<u> </u>
39		nizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	▶   39	0		
40		is <b>Taxable at Trust Rates.</b> See instructions for tax computation. Income tax on the amount	3:			0.
40						
41	(= tot (total)	ne 38 from: Tax rate schedule or Schedule D (Form 1041)	40			
41		y tax. See instructions.	4	-		
42		native minimum tax (trusts only).				
43		on Noncompliant Facility Income. See instructions				
44		Add lines 41, 42, and 43 to line 39 or 40, whichever applies	. 44	4		0.
		Tax and Payments				
		gn tax credit (corporations attach Form 1118; trusts attach Form 1116) 45 a				
		r credits (see instructions)				
		ral business credit. Attach Form 3800 (see instructions)				
		t for prior year minimum tax (attach Form 8801 or 8827)				
		credits. Add lines 45a through 45d		5 e		0.
	Subtr	act line 45e from line 44	. 46	6		0.
47		taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866				
		Other (attach schedule)				
48		tax. Add lines 46 and 47 (see instructions)		_		0.
49	2018	net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	. 49	9		
50 a	Paym	nents: A 2017 overpayment credited to 2018				
b	2018	estimated tax payments				
C	: Tax d	leposited with Form 8868				
d	Forei	gn organizations: Tax paid or withheld at source (see instructions) 50 d				
		up withholding (see instructions)				
		t for small employer health insurance premiums (attach Form 8941) <b>50 f</b>				
g		credits, adjustments, and payments: Form 2439				
	F	orm 4136 Other Total ▶ <b>50 g</b>				
51	Total	payments. Add lines 50a through 50g	. 5	1		0.
52	Estin	nated tax penalty (see instructions). Check if Form 2220 is attached	52	2		
53	Tax d	lue. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	▶ 53	3		
54	Over	payment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	▶ 54	4		
55		the amount of line 54 you want: Credited to 2019 estimated tax ► Refunded	▶ 5!	5		
	t VI		1 2			-
56	At any	y time during the 2018 calendar year, did the organization have an interest in or a signature or other authority	over a	a	Yes	No
		cial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization may have to file FinC			103	
		t of Foreign Bank and Financial Accounts. If 'Yes,' enter the name of the foreign country here		, ,	KIND OF THE PERSON OF THE PERS	V
57		g the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to	·	oreign truct?	-	X
3/		g the tax year, and the organization receive a distribution from, or was it the grantor of, or transferor to s,' see instructions for other forms the organization may have to file.	o, a 10	oreigii trus(?		X
F0		the constant of the constant indicate which is a second in the constant of the				
_58	⊏nter	the amount of tax-exempt interest received or accrued during the tax year \( \begin{array}{c} \\$ 0. \] Under regalities of periusy. I declare that I have examined this return, including accompanying schedules and statements, and to the beginning to the perius of the p	et of m	v knowledge and		
Sigr	1	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has				
Here		≥ 2020 ► EXECUTIVE DIRECTO	R Ma	y the IRS discus: preparer shown	s this return below (see	with
. 101	-	Signature of officer Date Title	ins	tructions)?	Yes	No
		Print/Type preparer's name Preparer's signature Date Check	if	PTIN	05.00	
Paid		\(\lambda_1 \) \(\lambda_2 \) \(\lambda_2 \) \(\lambda_1 \) \(\lambda_2 \) \(\lam			0	
Pre-		Thousand introduction of the property of the control of the contro		P0019691	۷	
pare		TRICE, TRICE IND CONTINU	77	7-0203007	-	
Use Only		Firm's address 677 SCOTT AVENUE				
	у	CLOVIS, CA 93612 Phone no.		(559) 299-		
BAA		TEEA0202L 01/24/19		Form	990-T (20	018)

Schedule A — Cost of Goo	ods Sold. En	ter method of inve	entory valuation	LOWE	R OF COST OR MA	ARKET	
1 Inventory at beginning of ye		1	······································		t end of year	6	
2 Purchases		2	7 Cos	of go	ods sold. Subtract	16	
3 Cost of labor		3					
4 a Additional section 263A costs (atta	•		and	ın Part	: I, line 2	7 Yes No	
<b>b</b> Other costs		4 a   4 b			s of section 263A (with		
(attach sch)	\$b	5			oduced or acquired for nization?	resale) apply	
Schedule C — Rent Incom		l Property and					
1 Description of property							
(1)	_	,-					
(2)							
(3)			_				
(4)							
		red or accrued			3(a) Deductions	directly connected with	
(a) From personal prop (if the percentage of rent fo property is more than 10% more than 50%)	r personal	(if the perce property ex	eal and personal prope entage of rent for pers ceeds 50% or if the re I on profit or income)	onal	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)		
(1)					-	<del></del>	
(2)							
(3)							
(4)							
Total		Total					
(c) Total income. Add totals of cohere and on page 1, Part I, line 6					(b) Total deductions. Er here and on page 1, Part I, line 6, column (B)		
Schedule E - Unrelated D	ebt-Finance	d Income (see	instructions)				
1 Description of deb	t-financed pror	porty	2 Gross income from or allocable to debt-	3	Deductions directly con debt-finance	nected with or allocable to ced property	
r bescription of deb	r-inianced prop	Del ty	financed property	de	(a) Straight line preciation (attach sch)	(b) Other deductions (attach schedule)	
(1)							
(2)		·					
(3)							
(4)							
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	4 Amount of average acquisition debt on or allocable to debt-financed property (attach sci		6 Column 4 divided by column 5	re	<b>7</b> Gross income eportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))	
(1)				%			
(2)				8			
(3)				%			
(4)				%			
				En Pa	ter here and on page 1 ort I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).	
Totals				<b>-</b>			
Total dividends-received deducti	ions included i	n column 8					
BAA		TE	EA0203L 01/30/19			Form <b>990-T</b> (2018)	

Schedule F — Interest, A		es, regula			trolled Or			Jigui	inzations (	300 1113	tructions	
Name of controlled organization	ide	Employer ntification number	inco	me	related (loss) uctions)	4	Total of speci payments ma		<b>5</b> Part of that is inception that is inception the conformation organizers in the conformation of the con	cluded in trolling ation's	n c	eductions directly onnected with ome in column 5
(1)						_						
(2)						↓_						<u> </u>
(3)						↓						
(4)	L											
Nonexempt Controlled Organiz	,											
<b>7</b> Taxable Income	inc	et unrelated come (loss) instructions)			f specified nts made	d	<b>10</b> Part of included in organizatio	n the c	controlling		onnecte	tions directly d with income olumn 10
(1)												-
(2)	-											
(3)						$\neg$						
(4)												<del></del>
Totals							Add columns here and on p 8, co		, Part I, line		and on p	6 and 11. Enter page 1, Part I, line lumn (B).
Schedule G - Investmer						···	r (17) Organ	nizati	on (see ins	truction	<u>c)</u>	
1 Description of income		2 Amount			3 direc	Dec	ductions connected schedule)		4 Set-asides ttach schedu	3	<b>5</b> Tota set-a	l deductions and sides (column 3 us column 4)
(1)					<del>'</del> -		<del></del>					
(2)		*						-				
(3)												
(4)											-	
TotalsSchedule I — Exploited E		Enter here an Part I, line 9,	column	(A).	ner Tha	n A	Advertisina	Incor	<b>ne</b> (see inst		Part I, Ii	re and on page 1 ne 9, column (B).
1 Description of exploited a		2 Gross unrelate business income fro trade of business	d 31	Exper conne pro of u	nses directly ected with duction nrelated ess income	4 N froi or I 2 n	Net income (loss) m unrelated trade business (column ninus column 3). a gain, compute umns 5 through 7.	5 Gros activi unrela	s income from ity that is not ated business income	6 Exp	·	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)											<del></del>	
(2)												
(3)						<u> </u>						
(4)												
Totals		Enter here on page Part I, line column (	1, 10, P	on p art	here and page 1, l, line 10, mn (B).				Section 1997			Enter here and on page 1, Part II, line 26.
Schedule J – Advertisin	a Inco	me (see insti	ructions)					207245334				<u> </u>
Part I Income From Pe		<u> </u>		Ca	nsolida	ter	l Racic					
i dici i i i i i i i i i i i i i i i i i	iiodice	2 Gross			Direct	_	Advertising gain or	E C	iroulation	6 Door		7 5
1 Name of periodical		advertisir income		adve	ertising osts	(10	col. 3). If a gain, compute cols. 5 through 7.		irculation ncome		dership sts	7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).
(1)							1-4					
(2)		ļ										
(3)		ļ			<del></del>					_		
(4)  Totals (carry to Part II, line (5))	······ •	•										
DAA		•	ı	_								000 T (0010)

왕

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

7 Ult a little-by-fille basis.)						
1 Name of periodical	<b>2</b> Gross advertising income	<b>3</b> Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	<b>5</b> Circulation income	<b>6</b> Readership costs	7 Excess readershi costs (col. 6 minus col. 5, but not more than col. 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I			Lieu Lieu and Lieu and Lie Lieu and Lieu and Lie	Section 2		
	Enter here and on page 1, Part I, line 11, column (A)	on page 1.		a webspar		Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1– 5) ▶						
Schedule K — Compensation of	Officers, Dire	ctors, and Tr	<b>ustees</b> (see instr	uctions)		
1 Name			<b>2</b> Title	3 Percent of time devoted to business	4 Compens to unrela	ation attributable ated business
				ક		
				8		
				0		

BAA

TEEA0204 L 12/31/18

# SCHEDULE M (Form 990-T)

### Unrelated Business Taxable Income for Unrelated Trade or Business

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

For calendar year 2018 or other tax year beginning 7/01 , 2018, and ending 6/30 , 20 19

2018

OMB No. 1545-0687

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990T for instructions and the latest information.

Open to Public Inspection to

Name of the organization

13

CALIFORNIA STATE UNIVERSITY, FRESNO

Employer identification number

94-1512286

Unrelated business activity code (see instructions) ► 445200

Describe the unrelated trade or business ► UNIVERSITY DINING SERVICES

**Total.** Combine lines 3 through 12.....

Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net Gross receipts or sales b c Balance ► Less returns and allowances 1c 291,712. 2 Cost of goods sold (Schedule A, line 7).... 2 86,840 3 3 Gross profit. Subtract line 2 from line 1c..... 204,872 204,872 Capital gain net income (attach Schedule D) ..... 4a Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) . . . 4b Capital loss deduction for trusts..... 4c Income (loss) from a partnership or an S corporation (attach statement)..... 5 6 Rent income (Schedule C)..... 6 7 Unrelated debt-financed income (Schedule E)..... 7 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)..... 8 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)..... 9 10 Exploited exempt activity income (Schedule I)..... 10 11 Advertising income (Schedule J)..... 11 12 Other income (See instructions; attach schedule)..... 12

13

204,872

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)	14		
15	Salaries and wages	15		
16	Repairs and maintenance	16		
17	Bad debts	17		
18	Interest (attach schedule) (see instructions)	18		
19	Taxes and licenses	19		
20	Charitable contributions (See instructions for limitation rules)	20		
21	Depreciation (attach Form 4562)			
22	Less depreciation claimed on Schedule A and elsewhere on return 22a	22b		
23	Depletion	23		
24	Contributions to deferred compensation plans	24		
25	Employee benefit programs	25		
26	Excess exempt expenses (Schedule I)	26		
27	Excess readership costs (Schedule J)	27		
28	Other deductions (attach schedule)	28	155	,388.
29	Total deductions. Add lines 14 through 28	29	155	,388.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	49	,484.
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		CONCENSION CANADA CONTRACTOR CONT	
	instructions)	31		
32	Unrelated business taxable income. Subtract line 31 from line 30	32	49	,484.

BAA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

204,872.

Schedule A - Cost of Goo	ds Sold. Enter	method of inve	entory valua	tion >	LC	WER	OF COST OR MA	ARKET	
1 Inventory at beginning of ye	ear 1			6 Inv	_		end of year	6	
2 Purchases		!	86,840.	7 Co	st of	aood	ls sold. Subtract		-
<b>3</b> Cost of labor			.,	line	e 6 f	rom lii	ne 5.Enter here 🔣		
4 a Additional section 263A costs (attac	h schedule)			ane	d in	Part I,	line 2	7	86,840.
		l a							Yes No
<b>b</b> Other costs		l b	_				of section 263A (with		
(attach sch)	b 5	i	86,840.	to	the c	y proc organi:	duced or acquired for zation?	resale) apply	
Schedule C - Rent Income	(From Real P			l Prope	erty	Leas	sed With Real Pro	perty) (see i	nstructions)
1 Description of property									
(1)		•							
(2)									
(3)									
(4)									
	2 Rent received	or accrued					24-> Doodsootioss	P. H	
(a) From personal prop (if the percentage of rent for property is more than 10% more than 50%)	personal	(if the perce	eal and persentage of re ceeds 50% of on profit or	nt for per or if the r	sona ent	al	<b>3(a)</b> Deductions the income in (attack)		
(1)				·					
(2)			-			•	-		
(3)							_		
(4)									
Total	То	tal						<u> </u>	
(c) Total income. Add totals of colhere and on page 1, Part I, line 6							(b) Total deductions. Er here and on page 1, Part I, line 6, column (B)		
Schedule E — Unrelated De	ebt-Financed I	ncome (see	instructions	)					
1 Description of debt	financed propert	,	2 Gross in or allocab			<b>3</b> De	eductions directly con debt-financ	nected with or ced property S	allocable to
1 Description of debt	-mariced propert		financed			depr	(a) Straight line eciation (attach sch)	(b) Other d	leductions
(1)									
(2)						<b></b>			
(3)		-							
(4)									
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjust or allocable to control property (attac	ebt-financed	divid	umn 4 led by ımn 5			7 Gross income ortable (column 2 x column 6)	8 Allocable (column 6 columns 3(a	x total of
(1)					٧				
(2)					%				
(3)					%				
(4)				·	%				
						Enter Part	here and on page 1, line 7, column (A).	Enter here an Part I, line 7,	d on page 1, column (B).
Totals					. ►				
Total dividends-received deduction	ons included in co	lumn 8		. <i></i>					
BAA		TE	EA0203L 01/3	0/19				Form	990-T (2018)

Page 4

Schedule F — Interest, A					ganizations	gau	COCC HISTIACI	
Name of controlled organization	<b>2</b> Emploidentification	ation	3 Net uni income (see instru	(loss)	<b>4</b> Total of spec payments ma	de that is in the cor organi	column 4 ncluded in ntrolling zation's income	6 Deductions directly connected with income in column 5
(1)								
(2)				·				
(3)							-	
(4)								
Nonexempt Controlled Organiz	ations		<u> </u>					
	8 Net un	rolated	9 Total o	f specified	10 Part of	column 9 that is	11.0	eductions directly
7 Taxable Income	income (see instr	(loss)		its made	included in	the controlling	conne	ected with income in column 10
(1)								
(2)						_		
(3)				-				
(4)								
Totals	<u></u>				here and on p 8, co	s 5 and 10. Enter page 1, Part I, line lumn (A).	e here and	umns 6 and 11. Enter on page 1, Part I, line 3, column (B).
Schedule G - Investmer	t Income	of a Sect	ion 501(	c)(7), (9)	, or (17) Orga	<b>nization</b> (see in	structions)	
1 Description of income	2	Amount of	income	direc	Deductions tly connected ch schedule)	<b>4</b> Set-aside (attach sched		Total deductions and set-asides (column 3 plus column 4)
(1)								
(2)								
(3)								
(4)								
	Part	er here and o					Ente Par	er here and on page 1 t I, line 9, column (B).
Totals								· · · · · · · · · · · · · · · · · · ·
Schedule I — Exploited E	xempt Ac	tivity Inc	ome, Otl	ner Thar	n Advertising	ncome (see ins	structions)	
1 Description of exploited a		<b>2</b> Gross unrelated business income from trade or business	conne prod of u	duction nrelated ss income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute columns 5 through 7.	5 Gross income from activity that is not unrelated business income	6 Expense attributable column !	e to expenses (column 6
(1)								<del></del>
(2)								
(3)			-					
(4)		<u> </u>	1				-	
Totals	Р	nter here a on page 1, art I, line 1 column (A)	on p 0, Part I	here and page 1, , line 10, mn (B).		Section 2		Enter here and on page 1, Part II, line 26.
Schedule J - Advertisin	a Income	(see instruc	ctions)	<u></u>				2130000
Part I Income From Pe	<u> </u>	,		nsolidat	ed Basis			
medic Home	ilouicuis i	2 Gross		Direct	4 Advertising gain or	5 Circulation	6 Readers	hin 7 Evenes readership
1 Name of periodical		advertising income	adve	ertising osts	(loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	income	costs	hip 7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).
(1)								
(2)								
(3)								
(4)								100
Totals (carry to Part II, line (5))	▶							
BAA	'		TE	EA0204 L 1	2/31/18	•	·	Form <b>990-T</b> (2018)

Form 990-T (2018) CALTFORNIA STATE UNIVERSITY FRESN	Form 990-T (2018)	CALTEORNIA	CTATE HMINEDCITY	FDFCMO
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94-1512286

Page 5

Form **990-T** (2018)

Part II Income From Periodical 7 on a line-by-line basis.)	ls Reported or	า a Separate B	<b>Basis</b> (For each p	eriodical listed in	Part II, fill in col	umns 2 through
1 Name of periodical	2 Gross advertising income	<b>3</b> Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income	<b>6</b> Readership costs	7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).
(1)						
(2) (3) (4)						
(3)						
(4)						
Totals from Part I ▶			and the lightness.			
Enter here at on page 1, Part I, line 1 column (A)		Enter here and on page 1, Part I, line 11, column (B).				Enter here and on page 1, Part II, line 27.
<b>Totals,</b> Part II (lines 1 – 5) ▶		, ,				
Schedule K - Compensation of	Officers, Dire	ctors, and Tr	<b>ustees</b> (see instru	uctions)		
1 Name			2 Title	3 Percent or time devoted to business	d to unrela	ation attributable ated business
				ş	8	
				9	8	
				9	8	
	_			ş	è	
Total. Enter here and on page 1, Part II,	, line 14				<b>&gt;</b>	
BAA		TEEA0204 L	12/31/18			orm <b>990-T</b> (2018)

TEEA0204 L 12/31/18

### SCHEDULE M (Form 990-T)

### **Unrelated Business Taxable Income for Unrelated Trade or Business**

For calendar year 2018 or other tax year beginning 7/01, 2018, and ending 6/30,**20** 19

5,789,947.

OMB No. 1545-0687

Department of the Treasury Internal Revenue Service Name of the organization

► Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

CALIFORNIA STATE UNIVERSITY, FRESNO

Unrelated business activity code (see instructions) ► 713990

Employer identification number

3,143,151.

94-1512286

Describe the unrelated trade or business ► SMG - SAVE MART CENTER Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales b c Balance ► 1c Less returns and allowances Cost of goods sold (Schedule A, line 7).... 2 2 3 Gross profit. Subtract line 2 from line 1c..... 3 4a Capital gain net income (attach Schedule D) ..... 4a Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)... 4b Capital loss deduction for trusts..... 4c Income (loss) from a partnership or an S corporation (attach statement)..... 5 Rent income (Schedule C)..... 6 7 Unrelated debt-financed income (Schedule E)..... 7 1,092,192. 3,143,151. -2,050,959.8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)..... 8 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)..... 9 10 Exploited exempt activity income (Schedule I)..... 10 11 Advertising income (Schedule J)..... 11 12 Other income (See instructions; attach schedule). STMT. 5. 12 4,697,755. 4,697,755. 13 Total. Combine lines 3 through 12..... 13

Part Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

BAA	For Paperwork Reduction Act Notice, see instructions.	Sched	ule M (Form 990-T) 2018
32	Unrelated business taxable income. Subtract line 31 from line 30	32	1,655,095.
	instructions)	31	
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	1,655,095.
29	<b>Total deductions.</b> Add lines 14 through 28	29	991,701.
28	Other deductions (attach schedule)	28	538,543.
27	Excess readership costs (Schedule J)	27	
26	Excess exempt expenses (Schedule I)	26	
25	Employee benefit programs	25	
24	Contributions to deferred compensation plans	24	
23	Depletion	23	
22	Less depreciation claimed on Schedule A and elsewhere on return 22a 2,597,162.		
21	Depreciation (attach Form 4562)	Contrate Contract Contract	
20	Charitable contributions (See instructions for limitation rules)	20	
19	Taxes and licenses.	19	
18	Interest (attach schedule) (see instructions)	18	
17	Bad debts	17	
16	Repairs and maintenance	16	52,749.
15	Salaries and wages	15	400,409.
14	Compensation of officers, directors, and trustees (Schedule K)		

Schedule M (Form 990-T) 2018

2,646,796.

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Schedule A — Cost of Good	's Sold Enter method of in	<b>'</b>	OMED O	F COST OR MA	DVCT	1 age 2
1 Inventory at beginning of year				of year	6	
2 Purchases	<u> </u>		-			
3 Cost of labor		line 6 1	from line	5. Enter here		
4 a Additional section 263A costs (attach		and in	Part I, lin		7	
Ta raditional decision 2557 costs (attack					Ye	s No
b Other costs (attach sch)	4 b	proper	ty produc	section 263A (with ed or acquired for ion?	resale) apply	x
Schedule C - Rent Income	(From Real Property a	nd Personal Property	Leased	With Real Pro	perty) (see instru	uctions)
1 Description of property						<u> </u>
(1)					<u> </u>	
(2)						
(3)					······································	
(4)						
	2 Rent received or accrued			-	1: 11	
(a) From personal proper (if the percentage of rent for property is more than 10% more than 50%)	personal (if the perbut not property	real and personal propert centage of rent for person exceeds 50% or if the rent ed on profit or income)	īal l	the income in o	directly connected columns 2(a) and 2 ch schedule)	with (b)
(1)						
(2)						
(3)				·		
(4)				<u> </u>		
Total  (c) Total income. Add totals of columere and on page 1, Part I, line 6,	column (A)		he	) Total deductions. En re and on page 1, Part line 6, column (B)		
Schedule E — Unrelated De	bt-Financed Income (se	e instructions)				
1 Description of debt-	financed property	2 Gross income from or allocable to debt-	<b>3</b> Dedu	ctions directly conr debt-financ	nected with or alloc ed property SEE	able to
		financed property		Straight line ation (attach sch)	(b) Other deduction (attach sched	tions ule)
(1) SAVE MART CENTER		1,324,580.		2,597,162.	1,214	,765.
(2)						
(3)						
(4)						
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of allocable to debt-financed property (attach schedule)		report	Gross income able (column 2 x column 6)	8 Allocable dedu (column 6 x to columns 3(a) and	al of
(1) 52,960,149.	64,228,611			1,092,192.	3,143	,151.
(2)		8	1			
(3)		%	1	_		
(4)		%				
			Enter he Part I, I	ere and on page 1, ine 7, column (A).	Enter here and on Part I, line 7, colu	page 1, mn (B).
			<b>-</b>	1,092,192.	3,143	,151.
Total dividends-received deduction	ons included in column 8					
BAA		TEEA0203L 01/30/19			Form <b>990</b> -	T (2018)

Schedule F — Interest, A	uiu	<del></del>			ganizations	oryanizat	1011 <b>5</b> (S6	e instruc	LIONS	)
Name of controlled organization	ider	Employer ntification number	3 Net unrelated income (loss) (see instructions)		4 Total of spec payments ma	sified ade 5 Part of c that is included the control organiza gross in		cluded in cutrolling inconstants		eductions directly onnected with ome in column 5
(1)										·
(2)										
(3)			_				-			
(4)										
Nonexempt Controlled Organiz	ations					·				
7 Taxable Income	ind	et unrelated come (loss) instructions)		of specified nts made	included i	column 9 th n the contro n's gross in	Ilina İ	11 C	nected	tions directly I with income lumn 10
(1)									<del></del>	
(2)										
(3)			<u> </u>							
(4)		-								<u> </u>
Totals						page 1, Part Jumn (A).	I, line	here and	d on p	6 and 11. Enter age 1, Part I, line umn (B).
Schedule G – Investmer	nt Inco	me of a Sec	tion 501(	(c)(7), (9)	, or (17) Orga	nization (	see instru	uctions)		
1 Description of income		2 Amount o		3 direc	Deductions tly connected ch schedule)	(attach schedule) set-asi		deductions and sides (column 3 us column 4)		
(1)	İ									
(2)	Í									
(3)										
(4)										
Totals  Schedule I — Exploited E  1 Description of exploited a	xempt	Enter here and Part I, line 9, of the Activity Inc.  2 Gross unrelated business	come, Ot		A Net income (loss) from unrelated trade or business (column	Income (s  5 Gross incor activity that unrelated bu	ne from is not a	Pa	rt I, lii	re and on page 1 ne 9, column (B)  7 Excess exempt expenses (column 6 minus column 5, bu
	-	income from trade or business	busin	inrelated ess income	2 minus column 3). If a gain, compute columns 5 through 7.	income				not more than column 4).
(1)									•	
(2)										
(3)										
(4)										
Totals		Enter here on page Part I, line column (A	1, on a	here and page 1, I, line 10, imn (B).						Enter here and on page 1, Part II, line 26.
Schedule J – Advertisin	a Inco	<b>me</b> (see instru	uctions)	B		<u> </u>			20.20	
Part I Income From Pe				nsolidat	ed Rasis					<del></del>
, and a modification of the	· · · · · · · ·	2 Gross		Direct	4 Advertising gain or	<b>5</b> Circula	tion 6	6 Readers	chin	7 Evenes readership
1 Name of periodical		advertising income	g adv	ertising osts	(loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	incom		costs		7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).
(1)		ļ								
(2)										
(3)		-	-		44	-				
(4)  Fotals (carry to Part II, line (5))	. •	•								
Totals (carry to r art ii, line (3))		l		FFA02041 1	0/21/19	<u> </u>	<u> </u>		<del></del>	orm <b>000 T</b> (2019)

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Page 5

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.) 4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. 2 Gross 3 Direct 5 Circulation 6 Readership 7 Excess readership advertising advertising costs (col. 6 minus col. 5, but not more than col. 4). income costs 1 Name of periodical income costs (1) (2) (3) (4) Enter here and Enter here and Enter here and on page 1, Part I, line 11, on page 1, Part I, line 11, on page 1, Part II, line 27. column (A) column (B). Schedule K — Compensation of Officers, Directors, and Trustees (see instructions) 3 Percent of time devoted to business 4 Compensation attributable 1 Name 2 Title to unrelated business 왕 왕 왕

Total. Enter here and on page 1, Part II, line 14..... BAA

TEEA0204 L 12/31/18

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

## **Unrelated Business Taxable Income for Unrelated Trade or Business**

,20 19

OMB No. 1545-0687

Department of the Treasury Internal Revenue Service Name of the organization For calendar year 2018 or other tax year beginning 7/01, 2018, and ending 6/30

► Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Employer identification number

94-1512286

CALIFORNIA STATE UNIVERSITY, FRESNO Unrelated business activity code (see instructions) ► 451211

Describe the unrelated trade or business ► BOOKSTORE SALES

Par	Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales 125,587.				
b	Less returns and allowances	1c	125,587.	K N	
2	Cost of goods sold (Schedule A, line 7)	2	88,947.	Constitution of the Consti	
3	Gross profit. Subtract line 2 from line 1c	3	36,640.	35-46-5	36,640.
4a	Capital gain net income (attach Schedule D)	4a		1	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach statement)	5			
6	Rent income (Schedule C)	6			
7	Unrelated debt-financed income (Schedule E)	7			
8	Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8			
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9			
10	Exploited exempt activity income (Schedule I)	10			
11	Advertising income (Schedule J)	11			
12	Other income (See instructions; attach schedule)	12			
13	Total. Combine lines 3 through 12	13	36,640.		36,640

Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	*
20	Charitable contributions (See instructions for limitation rules)	20	· · · · · · · · · · · · · · · · · · ·
21	Depreciation (attach Form 4562)		
22	Less depreciation claimed on Schedule A and elsewhere on return 22a	<b>22</b> b	
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach schedule)	28	28,687.
29	Total deductions. Add lines 14 through 28	29	28,687.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	7,953.
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	31	
32	Unrelated business taxable income. Subtract line 31 from line 30.	32	7,953.

BAA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

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Schedule A — Cost of Goo	ods Sold. Ent	er method of inve	entory valuati	on ► LC	WER	OF COST OR MA	ARKET		
1 Inventory at beginning of ye	ear	1	<u> </u>			end of year	6		
2 Purchases		2	88,947.	7 Cost of	good	ls sold. Subtract			
<b>3</b> Cost of labor		3	00/04/5	line 6 fi	rom li	ne 5.Enter here 🛮 🖺			
4 a Additional section 263A costs (atta				and in t	Part I	, line 2 [	7	88,947.	
		4 a		• D II				Yes No	
<b>b</b> Other costs (attach sch)		4 b				of section 263A (with duced or acquired for			
5 Total. Add lines 1 through 4	‡b	5	88,947.	to the c	organi	zation?		X	
Schedule C - Rent Incom	e (From Rea	Property and	d Personal	Property	Lea	sed With Real Pro	operty) (see ir	nstructions)	
1 Description of property									
(1)									
(2)									
(3)									
(4)									
	2 Rent receive					3(a) Deductions	directly copped	tod with	
(a) From personal proj (if the percentage of rent fo property is more than 10% more than 50%)	eal and perso entage of ren ceeds 50% o I on profit or i	t for persona r if the rent i	al	the income in	columns 2(a) ar ch schedule)	nd 2(b)			
(1)									
(2)									
(3)				· <del>-</del>					
(4)									
Total		Total				(1) Talahada da 5	-1	· <del></del>	
<b>(c) Total income.</b> Add totals of co here and on page 1, Part I, line 6	5, column (A)	<u></u>				(b) Total deductions. En here and on page 1, Part I, line 6, column (B)	iter . ►		
Schedule E — Unrelated D	ebt-Finance	d Income (see	instructions)						
1 Description of deb	t-financed prop	ertv	2 Gross income from or allocable to debt-			Deductions directly connected with or allocable to debt-financed property SEE ST 4			
, , , , , , , , , , , , , , , , , , , ,			financed		depi	(a) Straight line reciation (attach sch)	(b) Other deductions (attach schedule)		
(1)								· · ·	
(2)									
(3)									
(4)									
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	acquisition debt on or allocable to debt-financed property (attach schedule)		<b>6</b> Colu divide colun	ed by nn 5	rep	<b>7</b> Gross income ortable (column 2 x column 6)	8 Allocable d (column 6 ) columns 3(a)	x total of	
(1)				%					
(2)				%					
(3)				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					
(4)				%					
					Ente Part	r here and on page 1 I, line 7, column (A).	Enter here and Part I, line 7,	l on page 1, column (B).	
Totals									
Total dividends-received deducti	ions included in					·····			
BAA		TE	EA0203L 01/30/	119			Form 9	<b>990-T</b> (2018)	

94-1512286

Schedule F — Interest, A	nnuitio	es, Royalti	es, aı	nd Re	nts Froi	m (	Controlled (	Orgai	nizations (	see ins	structions	)
			Exem	pt Con	trolled Or	gan	nizations					
1 Name of controlled organization	ider	mployer ntification umber	ir	Net unr ncome e instri		4	Total of speci payments mad	fied de	<b>5</b> Part of that is income the concept organizers in the concept organizers in the concept organizers in the concept organizers in the concept organizers in the concept organizers in the concept organizers in the concept or the con	luded i trolling ation's	in c	eductions directly onnected with ome in column 5
(1)			,									
(2)							•					
(3)												
(4)												_
Nonexempt Controlled Organiza	ations											
<b>7</b> Taxable Income	inc	et unrelated ome (loss) instructions)			f specified its made	t	10 Part of columnication included in the organization's g		controlling		connected	tions directly d with income dumn 10
(1)												
(2)												···
(3)						Î						
(4)						Ì			,			
Tatala							Add columns here and on p 8, co		, Part I, line		and on p	6 and 11. Enter page 1, Part I, line lumn (B).
Totals Schedule G — Investmen						···	r (17) Organ	aizati	on /see ins	truction		
1 Description of income	it inco	2 Amount			<b>3</b> direc	Dec	ductions connected schedule)	4 Set-asides 5 To (attach schedule) set		<b>5</b> Tota set-a	Total deductions and et-asides (column 3 plus column 4)	
(1)												
(2)												
(3)												
(4)												
Totals	►	Enter here an Part I, line 9,	colum	nî (A).	-						Part I, li	re and on page 1 ne 9, column (B).
Schedule I – Exploited E	xempt				1				<u> </u>		·	
1 Description of exploited a	ctivity	2 Gross unrelate busines income fro trade of busines	d s om	conne prod of u	ses directly cted with duction nrelated ss income	fror or b 2 m	Net income (loss) m unrelated trade pusiness (column ninus column 3). a gain, compute umns 5 through 7.	activ	s income from ity that is not ated business income	attribu	penses stable to simn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)												-
(2)												
(3)												-
(4)												
		Enter here on page Part I, line column (	1,	on p Part I	here and age 1, , line 10, nn (B).							Enter here and on page 1, Part II, line 26.
Totals	• • • •	1										
Schedule J – Advertising												
Part I Income From Per	iodica	<del> </del>									_	
1 Name of periodical		2 Gross advertisir income		adve	Pirect Prtising Posts	(10	Advertising gain or oss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.		irculation ncome		dership osts	7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).
(1)												
(2)												
(3)			$\longrightarrow$									
(4)												
<b>Fotals</b> (carry to Part II, line (5))	<b>&gt;</b>											

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Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.) 4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. 3 Direct 2 Gross 5 Circulation 6 Readership 7 Excess readership advertising advertising costs (col. 6 minus col. 5, but not more than col. 4). income costs 1 Name of periodical income costs (1) (2) (3) (4) Enter here and Enter here and Enter here and on page 1, Part I, line 11, on page 1, Part I, line 11, on page 1, Part II, line 27. column (A) column (B). **Totals, Part II** (lines 1-5)...... Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 4 Compensation attributable to unrelated business 3 Percent of time devoted to business 1 Name 2 Title 왕 왕 왕

Total. Enter here and on page 1, Part II, line 14..... BAA

TEEA0204 L 12/31/18

# SCHEDULE M (Form 990-T)

### Unrelated Business Taxable Income for Unrelated Trade or Business

For calendar year 2018 or other tax year beginning 7/01 , 2018, and ending 6/30 , 20 19

2018

OMB No. 1545-0687

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for

Name	of the	organiza	ation

CALIFORNIA STATE UNIVERSITY, FRESNO

94-1512286

Employer identification number

Unrelated business activity code (see instructions) ► 453220

Describe the unrelated trade or business ► USU REC SALES

Part	Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales 154,191.				
b	Less returns and allowances c Balance ▶	1c	154,191.		
2	Cost of goods sold (Schedule A, line 7)	2	,		
3	Gross profit. Subtract line 2 from line 1c	3	154,191.	3.00	154,191.
4a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation				
	(attach statement)	5			
6	Rent income (Schedule C)	6			
7	Unrelated debt-financed income (Schedule E)	7			
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Schedule F)	8			
9	Investment income of a section 501(c)(7), (9), or (17)				
	organization (Schedule G)	9			
10	Exploited exempt activity income (Schedule I)	10			
11	Advertising income (Schedule J)	11			
12	Other income (See instructions; attach schedule)	12			-
13	<b>Total.</b> Combine lines 3 through 12	13	154,191.		154,191.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	
20	Charitable contributions (See instructions for limitation rules)	20	
21	Depreciation (attach Form 4562)		
22	Less depreciation claimed on Schedule A and elsewhere on return 22a	22b	
23	Depletion	23	· · · · · · · · · · · · · · · · · · ·
24	Contributions to deferred compensation plans	24	<del></del>
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach schedule)	28	96,936.
29	Total deductions. Add lines 14 through 28	29	96,936.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	57,255.
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		0,,400.
	instructions)	31	
32	Unrelated business taxable income. Subtract line 31 from line 30	32	57,255.

BAA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

Form 990-T (2018) CALIFORNIA STATE	UNIVERSITY,	FRESNO	94-1512286	Page 3
Schedule A — Cost of Goods Sold. Ent	er method of inven	tory valuation LOWER OF C	OST OR MARKET	
1 Inventory at beginning of year	1	6 Inventory at end of y	/ear <b>6</b>	
<b>2</b> Purchases	2	7 Cost of goods sold.	Subtract	
<b>3</b> Cost of labor	3	line 6 from line 5. E	nter here	
4 a Additional section 263A costs (attach schedule)		and in Part I, line 2.		
	4 a			Yes No
b Other costs		8 Do the rules of secti	on 263A (with respect to	

i inventory at beginning of year.	1	6 Invent	ory at	end of year	6		
2 Purchases	2	7 Cost o	of good	ds sold. Subtract		•	
<b>3</b> Cost of labor		line 6	from li	ne 5.Enter here 🏻 🎏			
4 a Additional section 263A costs (attach se		and in	Part I	, line 2	7		
						Yes	No
<b>b</b> Other costs	4 b	8 Do the	rules	of section 263A (with duced or acquired for	respect to		
(attach sch)				zation?		NONAMED AND STREET	X
Schedule C - Rent Income (			•			astructi	
1 Description of property	· · · · · · · · · · · · · · · · · · ·	and resonar report	,	Joa Will Hour Fe	perty) (see ii		
(1)							
(2)							
(3)							
(4)				·			
	Rent received or accrued				<del></del>		
(a) From personal propert		m real and personal proper	tv	<b>3(a)</b> Deductions	directly connec	ted wit	th
(if the percentage of rent for per property is more than 10% by more than 50%)	ercentage of rent for person exceeds 50% or if the rent sed on profit or income)	centage of rent for personal xceeds 50% or if the rent is  the income in columns 2(a) and (attach schedule)				)	
(1)		<u> </u>			<del></del>		
(2)							
(3)							
(4)							
Total	Total				<del></del>		
(c) Total income. Add totals of column here and on page 1, Part I, line 6, co		<b>&gt;</b>		(b) Total deductions. En here and on page 1, Part I, line 6, column (B)			
Schedule E — Unrelated Deb	t-Financed Income (	see instructions)		·			
1 Description of debt-fir	nanced property	2 Gross income from or allocable to debt-	<b>3</b> De	eductions directly coni debt-financ	nected with or seed property SE	allocab EE S'I	le to
1 Description of dest in	and a property	financed property	depi	(a) Straight line reciation (attach sch)	<b>(b)</b> Other de (attach so	eductio	ns
(1)	-						
(2)						-	
(3)							
(4)							
acquisition debt on or o	Average adjusted basis r allocable to debt-financ property (attach schedule	ed divided by	rep	7 Gross income cortable (column 2 x column 6)	8 Allocable of (column 6 columns 3(a)	x total	of
(1)		96					
(2)		9					_
(3)		96					
(4)		2	:			-	
			Ente Part	r here and on page 1, I, line 7, column (A).	Enter here and Part I, line 7.	d on pa	age 1,

Total dividends-received deductions included in column 8. BAA

Schedule F - Interest, Ann	nuiti	es, Royalti	es, a	nd Re	nts Fro	m	Controlled (	Orgai	nizations	see ins	struction	s)
			Exer	npt Con	trolled Or	rgai	nizations		4			
Name of controlled organization	idei	Employer ntification number	i	Net uni income ee instri			<b>4</b> Total of speci payments ma	ified de	<b>5</b> Part of that is income the conorganize gross in	cluded trolling ation's	in inc	eductions directly connected with come in column 5
(1)												
(2)												
(3)												
(4)												
Nonexempt Controlled Organization	ons											
7 Taxable Income	inc	et unrelated come (loss) instructions)			f specified nts made	d	included in	n the d	e controlling connected v		ctions directly d with income olumn 10	
(1)					-							
(1) (2) (3)												
(3)												
(4)												
							Add columns here and on p 8, co	s 5 and page 1 lumn (	, Part I, line		and on	s 6 and 11. Enter page 1, Part I, line plumn (B).
Totals							(17) 0	,	,			
Schedule G — Investment   1 Description of income	псо	2 Amount			3 dire	De ctly	ductions connected schedule)	4 Set-asides 5 Total (attach schedule) set-as		al deductions and asides (column 3 lus column 4)		
(1)		<del>.</del>			(4.11	4011	- Suricadicy				P	
(2)	$\longrightarrow$				ļ							
(3)												
(4)												
Totals Schedule I — Exploited Exe	. ►	Enter here ar Part I, line 9,	colui	mn (A).	ner Tha	n A	Advertisina	Incor	<b>ne</b> (see insi	ruction	Part I,	ere and on page 1 line 9, column (B)
		2 Gross			ses directly	$\overline{}$	Net income (loss)		s income from		penses	7 Excess exempt
1 Description of exploited acti	vity	unrelate busines income fro trade o busines	ed s om r	conne prod of u	ected with duction nrelated ess income	fro or 2 r	m unrelated trade business (column minus column 3). a gain, compute umns 5 through 7.	activ	ity that is not ated business income	attribu	itable to imn 5	expenses (column 6 minus column 5, bu not more than column 4).
(1)												
(2)						<u> </u>						
(3)	•					t						
(4)										_		
		Enter here on page Part I, line column (	1, ∋ 10,	on p	here and page 1, I, line 10, mn (B).		parties		1			Enter here and on page 1, Part II, line 26.
Schedule J - Advertising I							95.9				, 1884 1884 1884	
					12.1					_		
Part I Income From Perio	dica					_						
1 Name of periodical		<b>2</b> Gross advertisi income	ng	adve	Direct ertising osts	(1	Advertising gain or oss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.		irculation ncome		adership osts	7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).
(1)												
(2)		<b>.</b>					100					
(3)		<u> </u>					1.0					
(4)			-						+			
Totals (carry to Part II, line (5))	<b>•</b>	•										

Earm	DOO T	(2010)	CATTEODNES	CHARD	IINTVERSTTY	EDECMO
Form	990-1	(2018)	CALIFORNIA	STATE	TINTARRETTY	FRESNO

94-1512286

Page 5

Part II Income From Periodical 7 on a line-by-line basis.)	ls Reported or	n a Separate E	Basis (For each p	eriodical listed in	Part II, fill in col	umns 2 through	
1 Name of periodical	<b>2</b> Gross advertising income	<b>3</b> Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).	
(1)			•				
(2)							
(2)							
(4)							
Totals from Part I ▶							
	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B).				Enter here and on page 1, Part II, line 27.	
<b>Totals,</b> Part II (lines 1 − 5)							
Schedule K - Compensation of	Officers, Dire	ctors, and Tru	<b>istees</b> (see instri	uctions)			
1 Name			<b>2</b> Title	3 Percent o time devote to business	d   to unrela	4 Compensation attributable to unrelated business	
				5	8		
				9	8		
				9	8		
				9	è		
Total. Enter here and on page 1, Part II,	, line 14				<b>&gt;</b>		
<b>SAA</b> TEEA0204 L 12/31/18					F	Form <b>990-T</b> (2018)	

2018

# **FEDERAL STATEMENTS**

CALIFORNIA STATE UNIVERSITY, FRESNO ASSOCIATION, INC.

PAGE 1

94-1512286

#### STATEMENT 1 FORM 990-T, PART III, LINE 35 NET OPERATING LOSS DEDUCTION

LOSS YEAR ENDING	ORIGINAL LOSS		LOSS PREVIOUSLY USED			LOSS AVAILABLE		
6/30/09 6/30/10 6/30/11 NET OPERATING LOSS TAXABLE INCOME NET OPERATING LOSS						\$	1,900,029. 1,442,818. 2,773,100. 6,115,947. 1,769,787. 1,769,787.	
STATEMENT 2 SCHEDULE M, PART II, OTHER DEDUCTIONS CATERING OVERHEAD DINING HALL OVERHE	ALLOCATION	ON			TOTAL	·	73,628. 81,760. 155,388.	
STATEMENT 5 SCHEDULE M, PART I, OTHER INCOME  ADVERTISING	CHEDULE)					·	685,000. 584,252. 115,667. 26,160. 2,326,850. 128,896. 830,930. 4,697,755.	

#### STATEMENT 6 SCHEDULE M, PART II, LINE 28 OTHER DEDUCTIONS

CONTRACTED SERVICES - SMG	\$ 105,640.
GENERAL AND ADMINISTRATIVE - SMG	57,189.
INSURANCE - SMG	33,190.
OPERATIONS EXPENSE - SMG	16,099.
SMG MANAGEMENT FEE	114,388.
SUPPLIES - SMG	27,849.
UTILITIES - SMG	 <u> 184,188.</u>
TOTAL	\$ <u>538,543.</u>

2018

## **FEDERAL STATEMENTS**

CALIFORNIA STATE UNIVERSITY, FRESNO ASSOCIATION, INC.

PAGE 2

94-1512286

STATEMENT 7 SCHEDULE M, PART II, LINE 28 OTHER DEDUCTIONS

OVERHEAD ALLOCATION \$
TOTAL \$

TOTAL \$ 28,687.

STATEMENT 8 SCHEDULE M, PART II, LINE 28 OTHER DEDUCTIONS