	000 -	Exe	empt Organia	zation B	usine	ss Income	e Tax	Keturn		OMB No.	. 1545-0047
Fo	orm 990-T		(and pi	oxy tax u	nder se	ection 6033	(e))		20	20	19
	į.	or calendar yea	r 2019 or other tax yea	beginning	//01	, 2019, and end	ding <u>6</u>	/30 , 20	120	20	, 1 5
			o to www.irs.gov/F							Open to Publi	ic Inspection for
Interna	ment of the Treasury Il Revenue Service	► Do not e	enter SSN numbers on	this form as it i	may be ma	de public if your	organiza	tion is a 501(c)(3).	0.00	501(c)(3) Org	anizations Only fication number
A	Check box if address changed					ged and see instru			D Em	nployer identi nployees' trus tructions.)	t, see
BE	xempt under section	Print	CALIFORNIA	STATE UN	IVERS	ITY, FRES	NO				
	501(C)(3)	or	ASSOCIATION	, INC.	TTE					4-1512	286 ness activity code
	408(e) 220(e	Type	2771 EAST S		UE				E Ur	ee instruction	s.)
	408A 530(a)	FRESNO, CA	93/10							
	529(a)								4	53220	722210
C Bo	ook value of all assets end of year		exemption number								70
	119,428,260	G Check	k organization type	× X	501(c) c	orporation [01(a) t		Other trust
H E	Inter the number of th	e organization	's unrelated trades o	r businesses.	▶ [5	Des	cribe the only (or			L D- +- L W
t	rade or business hei	e ► CONCES	SIONS, CATE	RING				. If o	nly on	e, comple	ete Parts I–V.
ŀ	f more than one, de	scribe the firs	t in the blank spac	e at the end	of the p	revious senten	ice, con	ipiete Parts i ai	iu ii, c	umpiete a	ochedule W
	or each additional tr During the tax year,	age or busine	ess, then complete	in an affilial	ed arou	n or a parent-s	subsidia	rv controlled ard	up?	. ► □ Y	es X No
1 1	f 'Yes,' enter the na	was the corpt	ifing number of th	narent corr	noration		3030.0.0	.,	21		رقعا
	he books are in care			o paront corp	3074110111		Te	lephone number	▶ 55	9-278-	0800
_			Business Incom	e		(A) Income		(B) Expense			C) Net
	Gross receipts or s										N 5.10 4.4
	Less returns and allowa			: Balance ►	1c		Į.				
2	Cost of goods sold				2						
3	Gross profit. Subtra				3				8.1.		
_	Capital gain net in				4a						
	Net gain (loss) (Form 4)				4b						
	Capital loss deduct				4c		1	Street 121 Bin 4			
5	Income (loss) from a	a partnership o	or an S corporation								:
	(attach statement).				5			Canana 1946	The state of	-	
6	Rent income (Sche				6				_	-	
7	Unrelated debt-fina				7						
8	Interest, annuities, roya				8						
9	Investment income of a				9					-	
10	Exploited exempt				10						
11	Advertising income				11						
12	Other income (See	e instructions;	attach schedule).	£%	12		1			1	
	-	2 11	10				0.		0.		0.
	Total. Combine lin	es 3 through	en Elsewhere (See instru	ctions	for limitatio	ns on	deductions.)			
Pa	rt II Deduction	onnected w	ith the unrelate	d busines:	s incon	ne.)	113 011	acadenonion	,		ALL DOMESTIC STATE
14		officers, direct	tors, and trustees (Schedule K)				(4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,	. 14		
15	Salaries and wage	S							. 15		
16	Repairs and maint	enance							. 16		
17	Bad debts	04							. 17		
18	Interest (attach sc	hedule) (see	instructions).	*****					. 18		
19	Taxes and license	S							. 19		
20			2)								
21	Less depreciation	claimed on S	chedule A and else	where on re	turn		а		21	0	
22	Depletion		g		9)9090				. 22		
23	Contributions to d	eferred comp	ensation plans						. 23		
24	Employee benefit	programs		0000 0 5					. 24		
25	Excess exempt ex	penses (Sche	edule I)	Si Sin	g- e- energy		*******		. 25		
26	Excess readership	costs (Scher	dule J)	. 29	656 - 5555				- 26		
27	Other deductions	(attach sched	ule)				,		_ 27		
28	Total deductions.	Add lines 14	through 27						. 28		
29	Unrelated busines	s taxable inco	ome before net ope	erating loss of	deduction	n. Subtract line	e 28 froi	m une la	. 29		
30	Deduction for net opera	ating loss arising	in tax years beginning o	in or aπer Janua 30 from line	119 1, ZUI8 20	(see mstructions)	90-90	- 10 - 10 · 10 00 · 10 00 00 00 00 00	31		0.
_ 31	Unrelated busines	s taxable inco	ome. Subtract line	SO HOTH TIME	CJ	commence contract of	V5111101				

Par	t III Total Unrelated Business Taxable Income			
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	32	47	543.
	instructions)		47,	545.
	Amounts paid for disallowed fringes			
34	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from	34		
35	the sum of lines 32 and 33	33		543.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instr.) SEE ST 1	36	47,	543.
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35.			0.
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38		
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37, enter the smaller of zero or line 37.	39		0.
Dar	t IV Tax Computation			
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40		0.
	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount			
	on line 39 from: Tax rate schedule or Schedule D (Form 1041)			
42	Proxy tax. See instructions.	42		
43 44	Alternative minimum tax (trusts only)	44		
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies.	45		0.
	t V Tax and Payments			
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 46a			
b	Other credits (see instructions)	200	1	
C	General business credit. Attach Form 3800 (see instructions)	-		
C	Credit for prior year minimum tax (attach Form 8801 or 8827)	46 e		0.
47	Subtract line 46e from line 45			0.
48	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866			
	Other (attach schedule)			0.
49	Total tax. Add lines 47 and 48 (see instructions).	49		0.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	30		
	Payments: A 2018 overpayment credited to 2019			
	Tax deposited with Form 8868	738		
c	Foreign organizations: Tax paid or withheld at source (see instructions) 51 d			
	Backup withholding (see instructions)	- 18		
	Credit for small employer health insurance premiums (attach Form 8941) 51 f Other credits, adjustments, and payments: Form 2439	8/5	1	
,	Form 4136 Other Total ► 51 g		A .	
52	Total payments. Add lines 51a through 51g	52		0.
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached	53		
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54		
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	► 55 ► 56		
56	Enter the amount of line 55 you want: Credited to 2020 estimated tax	30		
_	rt VI Statements Regarding Certain Activities and Other Information (see instructions) At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority	over a	Ye	es No
57	financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization may have to file FinC	EN For		
	Report of Foreign Bank and Financial Accounts. If 'Yes,' enter the name of the foreign country here			X
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor t	o, a for	eign trust?	X
	If 'Yes,' see instructions for other forms the organization may have to file.			
_59	Enter the amount of tax-exempt interest received or accrued during the tax year > \$ 0.	et of my	knowledge and	
Sia	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the be belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has	any know	ledge. the IRS discuss this re	eturn with
Sig Her	TALLECTIVE BILLION	the p	reparer shown below	(see
	Signature of officer Date Title		X Yes	No
Pai	d Print/Type preparer's name Preparer's signature Date 4/30/21 self-ample] if	PTIN	
Pre	FAUSTO HINOJOSA, CPA, CFE FAUSTO HINOJOSA, CPA, CFE / sen-emplo		P00196912	
par	er Firm's name PRICE, PAIGE & COMPANY Firm's EIN	77-	-0203007	
Use On	lu lu	1	559) 299-954	0
BAA	010/10/, 011 00011		Form 990 -	

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(1) (2)(3)(4)5 Average adjusted basis of or allocable to debt-financed reportable (column 2 x divided by column 5 acquisition debt on or columns 3(a) and 3(b)) property (attach schedule) column 6) allocable to debt-financed property (attach schedule) % (1) 왕 (2)왕 (3)왕 (4)Enter here and on page 1, Enter here and on page 1, Part I, line 7, column (A). Total dividends-received deductions included in column 8.

TEEA0203L 09/19/19

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Form 990-T (2019)

Schedule F – Interest, A	nnuitie							rgar	nizations (s	ee ins	tructions)	
	_	1			rolled Org		200	- cl	5 Part of c	olumn	4 6000	luctions directly
1 Name of controlled organization	iden	mployer tification umber	in	Net unre come (e instru		4	Total of specific payments mad	ed e	that is included the control organization gross in	uded in rolling ition's	n cor	nnected with me in column 5
(1)												
(2)								- 9				
(3)												
(4)												
Nonexempt Controlled Organiz	ations		li-									
7 Taxable Income	inco	et unrelated ome (loss) instructions)	e (loss) p		Total of specified payments made		10 Part of co included in t organization's		controlling	connected		ions directly with income umn 10
(1)												
(2)												
(3)												
(4)										_		
							Add columns here and on page 8, col	age 1	, Part I, line		and on pa	6 and 11. Enter age 1, Part I, line umn (B).
Totals												
Schedule G – Investme	nt Inco	me of a Se	ction	501(c)(7), (9)), 0	r (17) Organ	iizat	ion (see ins	truction	ns)	1.1.2.2
1 Description of income		2 Amount	Amount of income		directly				4 Set-asides attach schedu	s 5 Tota ale) set-a		deductions and ides (column 3 s column 4)
(1)												
(2)												
(3)						_						
(4)		1/									make te	re and on page 1
Totals	>	Enter here as Part I, line 9	, colun	nn (A).	or Tho	n ^	dvorticina	nco	me (see inst	ruction	Part I, lir	ne 9, column (B).
Schedule I – Exploited	Exemp									C Ev	penses	7 Excess exempt
1 Description of exploited	activity	2 Gros unrelate busines income fi trade of busines	ed ss rom or	conne pro of u	nses directly ected with duction Inrelated ess income	fro or 2 n	Net income (loss) m unrelated trade business (column ninus column 3). a gain, compute umns 5 through 7.	acti	ss income from vity that is not elated business income	attribu	utable to umn 5	expenses (column 6 minus column 5, but not more than column 4).
(1)												
(2)												
(3)												
(4)												
Totals		Enter her on pag Part I, lin column	e 1, ie 10,	on Part	here and page 1, I, line 10, Imn (B).	(3)						Enter here and on page 1, Part II, line 25.
Schedule J – Advertisi		me (see ins	tructio	ns)								
Part I Income From P					nsolida	ite	d Basis					
1 Name of periodica		2 Gros advertis incom	ss sing	3 adv	Direct ertising costs	4 (1	Advertising gain or loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 (Circulation income		adership costs	7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).
(1)						į						
(2)								_				
(3)												
(4)						118	March earli					
Totals (carry to Part II line (5	i))											

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94-1512286

Part II Income From Periodical 7 on a line-by-line basis.)	s Reported or	a Separate E	Basis (For each p	eriodical listed in	Part II, fill in co	lumns 2 through
1 Name of periodical	2 Gross advertising income	3 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)						
(3)						
(4)				TRANSPORTER		
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 26.
Totals, Part II (lines 1 – 5) ▶					Minaria San	
Schedule K - Compensation of	Officers, Dire	ctors, and Tri	ustees (see instr	uctions)		
1 Name			2 Title	3 Percent time devot to busines	ed to unrel	ation attributable ated business
					%	
					%	
					%	
					2	

TEEA0204 L 09/19/19

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

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

94-1512286

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization For calendar year 2019 or other tax year beginning $\frac{7}{01}$, 2019, and ending $\frac{6}{30}$ ► Go to www.irs.gov/Form990T for instructions and the latest information.

CALIFORNIA STATE UNIVERSITY, FRESNO

Describe the unrelated trade or business ► IINTVERSITY DINING SERVICES

ASSOCIATION, INC. Unrelated Business Activity Code (see instructions) ► 445200

▶ 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

Open to Public Inspection for 501(c)(3) Organizations Only

Part	Unrelated Trade or Business Income		(A) Income	(B) Expense	s	(C) Net	
1a	Gross receipts or sales 178,222.						
ь	Less returns and allowances c Balance ►	1c	178,222.				
2	Cost of goods sold (Schedule A, line 7)	2	51,016.		119716		
3	Gross profit. Subtract line 2 from line 1c	3	127,206.			127,206	
4a	Capital gain net income (attach Schedule D)	4a			(8)		
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			100		
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					
0	Exploited exempt activity income (Schedule I)	10					
11	Advertising income (Schedule J)	11					
12	Other income (See instructions; attach schedule)	12		THE REAL PROPERTY.			
13	Total. Combine lines 3 through 12	13	127,206.			127,206	
Part 4	Deductions Not Taken Elsewhere (See instructions for liconnected with the unrelated business income.) Compensation of officers, directors, and trustees (Schedule				14	unectly	
5	Salaries and wages				15		
16	Repairs and maintenance				16		
7	Bad debts	u			17		
18	Interest (attach schedule) (see instructions)				18		
19	Taxes and licenses				19		
20	Depreciation (attach Form 4562)				(1 se		
20 21	Less depreciation claimed on Schedule A and elsewhere or	retur	21a		21b		
21 22	Depletion			paramara	22		
22 23	Contributions to deferred compensation plans				23		
23 24	Employee benefit programs				24		
4	Employee belieff programs						

BAA For Paperwork Reduction Act Notice, see instructions.

25

26

27

28

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30

31

Schedule M (Form 990-T) 2019

102,601

102,601

24,605.

24,605.

25

26

27

28

29

30

Excess exempt expenses (Schedule I).....

Excess readership costs (Schedule J)

Total deductions. Add lines 14 through 27.

Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13.....

instructions)....

Unrelated business taxable income. Subtract line 30 from line 29.

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see

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Form 990-T (2019) CALIFORN	IIA STATE	UNIVERSITY	, FRESNO)			94	-1512286	Page 3		
Schedule A - Cost of Good	ds Sold. Ent	er method of inve	ntory valuat	ion •	LO	WER	OF COST OR M	MARKET			
1 Inventory at beginning of year	ar	1		6	Inventor	y at e	end of year	6			
2 Purchases		2	51,016.	7	Cost of	good	s sold. Subtract				
3 Cost of labor		3					ne 5. Enter here	7	51,016.		
4 a Additional section 263A costs (attack	n schedule)				and mi	aiti,	III C 2.1.202.1.1.22	,	Yes No		
	*****	4 a		8	Do tho	ulos (of section 263A (wit	h respect to	103 100		
b Other costs (attach sch)		4 b		•			luced or acquired fo				
5 Total. Add lines 1 through 4th	3	5	51,016.				zation?		. X		
Schedule C - Rent Income	(From Rea	l Property and	Persona	l Pro	perty	Leas	ed With Real P	roperty) (see	instructions)		
Description of property											
(1)											
(2)											
(3)											
(4)											
	2 Rent receiv	ed or accrued					3(a) Deduction	s directly conn	ected with		
(a) From personal prop (if the percentage of rent for property is more than 10% more than 50%)	(if the perce property ex	eal and person entage of reroceeds 50% of on profit or	nt for or if t	persona he rent i	al S	the income in	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)				
(1)											
(2)											
(3)											
(4)											
Total		Total					(IA) Tabel dedications	Fator			
(c) Total income. Add totals of colhere and on page 1, Part I, line 6							(b) Total deductions. here and on page 1, Pa I, line 6, column (B).	rt			
Schedule E - Unrelated De	ebt-Finance	ed Income (see	instructions)							
1 Description of debt	-financed proj	nerty	2 Gross ind			3 D∈	eductions directly co debt-fina	nnected with o	or allocable to SEE ST 4		
i Description of desc	Amaricea proj	ocity	financed			depr	(a) Straight line reciation (attach sch	(b) Other (attach	deductions schedule)		
(1)											
(2)											
(3)											
(4)											
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	or allocable	djusted basis of to debt-financed ttach schedule)	6 Col divid colu		y 5	rep	7 Gross income portable (column 2 x column 6)	(column	e deductions 6 x total of (a) and 3(b))		
(1)					ે						
(2)					%						
(3)					8						
(4)					%						
Takala						Ente Part	r here and on page I, line 7, column (A	A). Part I, line	and on page 1 7, column (B)		
Totals						<u> </u>		•			

TEEA0203L 09/19/19

Schedule F — Interest, A	nnuitie				nts From	_		rgai	nizations (s	see ins	tructions)	
1 Name of controlled organization	ider	mployer htification umber	3 N	Net unr	elated		Total of specification payments mad	that is inc the cont organiza	ncluded in		ductions directly nnected with me in column 5	
(1)												
(2)												
(3)												
(4)												
Nonexempt Controlled Organiz	ations											
7 Taxable Income	inc	et unrelated ome (loss) instructions)	(loss) pa		Total of specified payments made		10 Part of or included in organization	the o	controlling		connected	ions directly with income umn 10
(1)												
(2)												
(3)												
(4)												
	1						Add columns here and on page 8, col	age 1	I, Part I, line		and on page	6 and 11. Enter age 1, Part I, line umn (B).
Totals.						10					0.00	
Schedule G — Investment 1 Description of income		me of a Se 2 Amount			3 direc	Dec	ductions connected		ion (see ins 4 Set-asides attach schedu	;	5 Total set-as	deductions and ides (column 3
					(atta	ich	schedule)				pic	s column 4)
(1)												
(2)												
(3)												
Totals	>	Enter here ar Part I, line 9,	colun	nn (A).			dvorticina I	200	mo (see inst	ruction	Part I, li	re and on page 1 ne 9, column (B).
Schedule I — Exploited I	Exemp											7 Fuence everynt
1 Description of exploited	activity	2 Gross unrelate busines income fr trade o busines	ess pro from of u		nnected with foroduction of unrelated 2		Net income (loss) m unrelated trade business (column minus column 3). a gain, compute umns 5 through 7.	activ	ss income from vity that is not lated business income	attributable to		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)												
(2)												
(3)												
(4)												
Totals		Enter here on page Part I, lin column	e 1, e 10,	on Part	here and page 1, I, line 10, ımn (B).	8 2						Enter here and on page 1, Part II, line 25.
Schedule J — Advertisir		ma a / i		>					Name of the last		3 24 150	
					naalida	+	d Pacie					
Part I Income From Pe	erioaic							-	O:	6 Day	- davabia	7 Excess readership
1 Name of periodical		2 Gros advertis income	sing advertising		\mathbf{I}	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.		5 Circulation income		adership costs	costs (col. 6 minus col. 5, but not more than col. 4).	
(1)												
(2)		-				8		-				
(3)						1						
(4)						-						
Tatala (corru to Dort II. lino (5	1)											

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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 2 Gross advertising 3 Direct 6 Readership 7 Excess readership 5 Circulation advertising costs (col. 6 minus col. 5, but not more than col. 4). costs income 1 Name of periodical col. 3). If a gain, costs income compute cols. 5 through 7. (1) (2) (3) (4) Totals from Part I Enter here and Enter here and Enter here and on page 1, Part II, line 26. on page 1, Part I, line 11, on page 1, Part I, line 11, column (B). column (A) Totals, Part II (lines 1-5) Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 4 Compensation attributable 3 Percent of 2 Title time devoted to unrelated business 1 Name to business 왕 왕 읭 왕 Total. Enter here and on page 1, Part II, line 14. Form 990-T (2019)

TEEA0204 L 09/19/19

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

For calendar year 2019 or other tax year beginning 7/01 , 2019, and ending 6/30 , 20 20

4,227,942.

94-1512286

2,828,685.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

13

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

CALIFORNIA STATE UNIVERSITY, FRESNO

ASSOCIATION, INC.

Total. Combine lines 3 through 12

▶ 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

Open to Public Inspection for 501(c)(3) Organizations Only

Unrelated Business Activity Code (see instructions) > 713990 Describe the unrelated trade or business ► ASM GLOBAL - SAVE MART CENTER (C) Net (B) Expenses **Unrelated Trade or Business Income** (A) Income Part I 1a Gross receipts or sales c Balance ► 1c Less returns and allowances Cost of goods sold (Schedule A, line 7).... 2 2 3 3 Gross profit. Subtract line 2 from line 1c..... 4a Capital gain net income (attach Schedule D) 4a 4b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) ... Capital loss deduction for trusts 4c 5 Income (loss) from a partnership or an S corporation (attach statement)..... 5 Rent income (Schedule C)..... 6 6 Unrelated debt-financed income (Schedule E)..... -2,175,425. 2,828,685. 7 653,260. Interest, annuities, royalties, and rents from a controlled 8 organization (Schedule F)..... 8 Investment income of a section 501(c)(7), (9), or (17) 9 9 organization (Schedule G) Exploited exempt activity income (Schedule I). 10 10 11 Advertising income (Schedule J)..... 11 3,574,682. 12 3,574,682. 12 Other income (See instructions; attach schedule) STMT . 5. 13 1,399,257.

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

Compensation of officers, directors, and trustees (Schedule K)	14	
	15	753,217.
· ·	16	79,578.
	17	<u></u>
	18	
Taxes and licenses	19	
	-	
	22	
	23	
Employee henefit programs		
Evenes example expenses (Schedule I)		
Other deductions (ettech schedule) SEE STATEMENT 6	1 1	991,597.
Trial deductions (attach schedule)	28	1,824,392.
Total deductions. Add liftes 14 tillough 27	29	-425,135.
	25	-425,133.
	20	
		.45.405
Unrelated business taxable income. Subtract line 30 from line 29		-425,135.
	Less depreciation claimed on Schedule A and elsewhere on return	Salaries and wages

BAA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

Form 990-T	(2019) CALIFORN	IA STATE	UNIVERSITY	, FRESNO					12286	P	age 3
Schedule	A - Cost of Good	s Sold. Ent	er method of inve	entory valuation			OF COST OR I	_	ET		
1 Invent	ory at beginning of year		1	6	Inventor	y at e	nd of year	6			
2 Purch	ases		2	7	Cost of	goods	e 5. Enter here				
	of labor		3				line 2	7			
4 a Addition	nal section 263A costs (attach	schedule)				,		_		Yes	No
			4 a	8	Do the r	ules o	of section 263A (wi	th res	pect to	(100)	TXIII 8
	sch)		4 b		property	produ	uced or acquired for	or res	ale) apply	- 100	х
	Add lines 1 through 4b		5			_	ation?		LECTION AND A P.		
Schedule	C - Rent Income	(From Rea	Property and	d Personal P	roperty	Leas	ed With Real P	'rop€	erty) (see i	nstruct	tions)
1 Descripti	on of property										
(1)											_
(2)											
(3)										_	
(4)											
			ed or accrued				3(a) Deductio	ns din	ectly conne	cted w	ith
(if the	(a) From personal proper percentage of rent for the perty is more than 10% more than 50%)	personal	(if the perco	eal and persona entage of rent f ceeds 50% or i I on profit or inc	or persona the rent i	al I	the income	in colt	umns 2(a) a schedule)	nd 2(t	o)
(1)											_
(2)											
(3)											
(4)											
Total			Total				(b) Total deductions	Enter			
here and o	come. Add totals of coluning page 1, Part I, line 6,	column (A).					here and on page 1, P I, line 6, column (B).	art			
Schedule	e E – Unrelated De	bt-Finance	d Income (see	instructions)							
	1 Description of debt-	financed prot	oortv	2 Gross incomor allocable		3 De	eductions directly o debt-fin	anced	cted with or property S	EE S	ible to
	Description of debt-	illianceu prop	Del ty	financed pr		depr	(a) Straight line eciation (attach so	:h)	(b) Other ((attach s	deduct chedu	ions le)
(1) SAVE	MART CENTER			78	1,551.		2,596,23	7.		787,	961.
(2)											
(3)											
(4)											
acqu allocab	nount of average isition debt on or le to debt-financed y (attach schedule)	or allocable	djusted basis of to debt-financed ttach schedule)	6 Colum divided colum	by	rep	7 Gross income ortable (column 2 column 6)	x	8 Allocable (column 6 columns 3(a	x tota a) and	al of 3(b))
(1)	51,507,202.		61,622,488.	83.	5851 %		653,26	0.	2,	828,	685
(2)					%						
(3)					%						
(4)					%						
						Ente Part	r here and on pag I, line 7, column	e 1, E (A). F	nter here a Part I, line 7	nd on ', colui	page 1 mn (B)
Totals						-	653,26	50.	2,	828	, 685
	ends-received deduction	ons included	in column 8	•••••							- (00)

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Schedule F – Interest, A	Annuiti	es, Royaltic						rgar	nizations (see ins	tructions)	
			Exem	pt Cont	trolled Org	gar	nizations					
Name of controlled organization	ide	Employer ntification number	in	Net unro Icome (e instru		4	Total of specif payments mad		5 Part of contract that is incompleted that is incompleted to the contract organization of the contract of t	luded i rolling ation's	n co	ductions directly nnected with me in column 5
(1)												
(2)												
(3)												
(4)												
Nonexempt Controlled Organiz	zations											
7 Taxable Income	ind	et unrelated come (loss) instructions)			specified ts made	1	10 Part of colur included in the organization's g		controlling	connected		tions directly with income lumn 10
(1)												
(2)												
(3)												
(4)												
Totals							Add columns here and on p 8, col	age 1	, Part I, line		and on p	6 and 11. Enter age 1, Part I, line umn (B).
Schedule G - Investme	0.000.000.000.000.000.000.000					_	or (17) Organ	iizat	ion (see ins	truction	ns)	
1 Description of income			2 Amount of income		ne directi		eductions		4 Set-asides	š	5 Total deductions and set-asides (column 3 plus column 4)	
(1)												
(2)												
(3)												
(4)												
Totals	>	Enter here ar Part I, line 9									Enter he Part I, li	re and on page 1, ne 9, column (B).
Schedule I - Exploited		t Activity I	ncom	e. Oth	ner Tha	n A	Advertising I	nco	me (see inst	ruction	s)	
1 Description of exploited		2 Gros unrelate busines income fr trade o busines	s ed ss om or	3 Expen	ises directly ected with duction nrelated ess income	fro or 2 r	Net income (loss) om unrelated trade business (column minus column 3). f a gain, compute umns 5 through 7.	5 Gros	ss income from rity that is not lated business income	6 Ex	penses itable to umn 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, lin column	e 1, e 10	on p	here and page 1, I, line 10, mn (B).	83						Enter here and on page 1, Part II, line 25.
Totals								-			ACAVS/III	
Schedule J – Advertision	_					_						
Part I Income From Po	eriodic					_						
1 Name of periodica	al	2 Gros advertis income	ing	adve	Direct ertising osts	16	Advertising gain or loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.		Circulation income		adership osts	7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).
(1)												
(2)												
(3)						- 17		_				
(4)						G.	August 1					
Totale (carry to Part II. line (5	5))	•										

94-1512286 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. 7 Excess readership 3 Direct 6 Readership 2 Gross 5 Circulation costs (col. 6 minus col. 5, but not more than col. 4). advertising costs advertising income 1 Name of periodical income costs (1) (2)(3)(4) Totals from Part I Enter here and Enter here and Enter here and on page 1, Part II, line 26. on page 1, Part I, line 11, on page 1, Part I, line 11, column (A) column (B). Totals, Part II (lines 1-5)...... Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3 Percent of 4 Compensation attributable time devoted to unrelated business 2 Title 1 Name to business 응 % 왕 왕

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

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Form 990-T (2019)

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SCHEDULE M (Form 990-T)

Department of the Treasury

Internal Revenue Service

Unrelated Business Taxable Income from an Unrelated Trade or Business

For calendar year 2019 or other tax year beginning $\frac{7}{01}$, 2019, and ending $\frac{6}{30}$, 20 $\frac{20}{30}$.

► 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). CALIFORNIA STATE UNIVERSITY, FRESNO

Open to Public Inspection for 501(c)(3) Organizations Only Employer identification number

OMB No. 1545-0047

94-1512286

Name of the organization ASSOCIATION, INC.

Unrelated Business Activity Code (see instructions) ► 453220

Part	Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales 122, 487.				
b	Less returns and allowances c Balance ►	1c	122,487.		
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit. Subtract line 2 from line 1c.	3	122,487.		122,487.
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	Total. Combine lines 3 through 12	13	122,487.		122,487

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	Depreciation (attach Form 4562).			
21	Less depreciation claimed on Schedule A and elsewhere on return		21b	
22	Depletion		22	
23	Contributions to deferred compensation plans		23	
24	Employee benefit programs		24	
25	Excess exempt expenses (Schedule I)		25	
26	Excess readership costs (Schedule J)		26	
27	Other deductions (attach schedule)		27	99,549.
28	Total deductions. Add lines 14 through 27.	6-1896	28	99,549.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from	1 line 13	29	22,938.
30	Deduction for net operating loss arising in tax years beginning on or after			
	instructions)		30	
31	Unrelated business taxable income. Subtract line 30 from line 29		31	22,938.

BAA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

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Form 990-T (2019) CALIFOR	NIA STATE	UNIVERSITY	FRESNO			94-1	.512286		age 3	
Schedule A - Cost of Goo	ds Sold. Ent	er method of inve	entory valuation	► LO	WER	OF COST OR MA	RKET			
1 Inventory at beginning of ye	6	Inventor	y at e	end of year	6					
2 Purchases			7							
3 Cost of labor		3				ne 5. Enter here	7			
4 a Additional section 263A costs (attack	ch schedule)			and in r	aiti,	IIIIC 2	<u>, </u>	Yes	No	
4a			8 Do the rules of section 263A (with respect to						300	
b Other costs (attach sch).			°	Do the rules of section 263A (with respect to property produced or acquired for resale) apply						
5 Total. Add lines 1 through 4	to the organization?									
Schedule C - Rent Income	e (From Rea	l Property and	Personal Pr	operty	Leas	ed With Real Pro	perty) (see ir	nstruct	ions)	
Description of property										
(1)										
(2)										
(3)										
(4)										
	2 Rent receiv	ed or accrued				2(a) Dadustians disastly connected with				
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)		(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)			3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)					
(1)										
(2)										
(3)										
(4)										
Total Total										
(c) Total income. Add totals of cohere and on page 1, Part I, line 6						(b) Total deductions. En here and on page 1, Part I, line 6, column (B)	ter			
Schedule E - Unrelated D	ebt-Finance	d Income (see	instructions)							
1 Description of debt-financed property			2 Gross income from or allocable to debt-financed property			eductions directly connected with or allocable to debt-financed property SEE ST 4				
						(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)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)		6 Column 4 divided by column 5			7 Gross income ortable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))			
(1)			8							
(2)				8						
(3)				8						
(4)				8						
Totals		na matan			Ente Part	r here and on page 1, I, line 7, column (A).	Enter here ar Part I, line 7,	id on p colun	page 1 nn (B)	
Total dividends-received deduct	inne included i	in column 8			2	mysys see saaan maanaa 🕨				

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Schedule F – Interest, An	nuitie	s, Royalti	es, ar	nd Rer	nts Fron	n (Controlled O	rgar	nizations (s	ee inst	tructions)	
		Exempt Controlled Organizations							1 600	luntions disastly		
1 Name of controlled organization	2 Employer identification number		3 Net unrelated income (loss) (see instructions)			4	4 Total of specified payments made		d 5 Part of column 4 that is included in the controlling organization's gross income			
(1)												
(2)												
(3)												
(4)												
Nonexempt Controlled Organizat	ions											
7 Taxable Income	8 Net unrelated income (loss) (see instructions)		9 Total of specified payments made			10 Part of colur included in the organization's g		e controlling c		onnected	ons directly with income umn 10	
(1)												
(2)						_						
(3)												
(4)												C 111 Falar
Totals							Add columns here and on p 8, col	age 1	, Part I, line		and on pa	6 and 11. Enter age 1, Part I, line umn (B).
Schedule G - Investment), c	or (17) Organ	iizat	ion (see inst	ruction	ns)	
1 Description of income			of income direct		Dec	Deductions ly connected ch schedule)		4 Set-asides (attach schedule)		5 Total deductions and set-asides (column 3 plus column 4)		
(1)												
(2)												
(3)						_						
(4)								Day of the			Catas box	re and on page 1
TotalsSchedule I — Exploited Ex	>	Enter here and Part I, line 9	, colun	nn (A).	er Thai	n A	Advertising	nco	me (see inst	ruction	Part I, lii	ne 9, column (B)
Scriedule I — Exploited Ex	cinp	2 Gros	$\overline{}$		ses directly		Net income (loss)		ss income from		penses	7 Excess exempt
1 Description of exploited activity		unrelat busine income f trade o busine	ated conning property c		connected with from production of unrelated 2		om unrelated trade r business (column minus column 3). If a gain, compute olumns 5 through 7.		vity that is not lated business			expenses (column 6 minus column 5, bu not more than column 4).
(1)												
(2)						T						
(3)						\vdash						
(4)												
Totals		Enter her on pag Part I, lir column	e 1, ie 10,	on p	here and page 1, I, line 10, mn (B).							Enter here and on page 1, Part II, line 25.
Schedule J – Advertising		me less inc	tructio	ns)		198		-				
Part I Income From Per					nsolida	to	d Basis	-				
ratti income From Per	louic	2 Gros			Direct		Advertising gain or	5	Circulation	6 Re	adership	7 Excess readershi
1 Name of periodical		advertis	advertising adv		vertising costs		(loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	income		costs		costs (col. 6 minus col. 5, but not mor than col. 4).
(1)								_				
(2)						-		-				
(3)						-		\vdash		-		
(4)						153		-				
Totals (carry to Part II, line (5))		-									=	
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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. 7 Excess readership 3 Direct 5 Circulation 6 Readership 2 Gross costs (col. 6 minus col. 5, but not more than col. 4). advertising advertising income costs 1 Name of periodical income costs (1)(2)(3) (4)Totals from Part I Enter here and Enter here and Enter here and on page 1, Part II, line 26. on page 1, Part I, line 11, on page 1, Part I, line 11, column (B). column (A) Totals, Part II (lines 1-5) Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3 Percent of 4 Compensation attributable to unrelated business 2 Title time devoted 1 Name to business 왕

왕 왕 왕 Total. Enter here and on page 1, Part II, line 14..... Form 990-T (2019) BAA

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FEDERAL STATEMENTS

CALIFORNIA STATE UNIVERSITY, FRESNO ASSOCIATION, INC.

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94-1512286

STATEMENT 1 FORM 990-T, PART III, LINE 36 NET OPERATING LOSS DEDUCTION

NET OF ENATING E033	DEDOGRAM		
LOSS YEAR ENDING	ORIGINAL LOSS	LOSS PREVIOUSLY USED	LOSS AVAILABLE
6/30/10 6/30/11 NET OPERATING LOSS TAXABLE INCOME NET OPERATING LOSS	\$ 1,442,818. 2,773,100. AVAILABLE DEDUCTION (LIMITED TO TA	\$ 1,142,470. \$ 0. AXABLE INCOME)	300,348. 2,773,100. \$ 3,073,448. \$ 47,543. \$ 47,543.
STATEMENT 2 SCHEDULE M, PART II, OTHER DEDUCTIONS CATERING OVERHEAD A DINING HALL OVERHEA	LLOCATION		\$ 35,818. 66,783. OTAL \$ 102,601.
ADVERTISING (UBI SO COMMERCIALS EXCLUSIVE RIGHTS FOOD AND BEVERAGE J MERCHANDISE INCOME.	CHEDULE)		115,667. 26,160. 1,418,611. 99,223.
GENERAL AND ADMINIS INSURANCE - SMG OPERATIONS EXPENSE SMG MANAGEMENT FEE. SUPPLIES - SMG	S - SMG STRATIVE - SMG - SMG		103,056. 57,348. 19,961. 230,412. 27,873.

2019

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FEDERAL STATEMENTS

PAGE 2

CALIFORNIA STATE UNIVERSITY, FRESNO ASSOCIATION, INC.

94-1512286

STATEMENT 7 SCHEDULE M, PART II, LINE 27 OTHER DEDUCTIONS

OVERHEAD ALLOCATION \$ 99,549.