TAXABLE YEAR

## California Exempt Organization Annual Information Return

828941 12-12-18 FORM

201	8	Annual Information	on Return						19	9	
Calendar Yea	r 2018	or fiscal year beginning (mm/dd/yyyy)	07/01/2	2018	, and endir	ng (mm/d	d/yyyy)	06	6/30/2019		
Corporation/O	•						California cor	ooration	number		
		A STATE UNIVERSITY,		US					_		
		AND BUSINESS SERVI	CES				0403	3350	)		
Additional info	rmation	. See instructions.					FEIN O.4	1 2 2	2050		
Street address	(suite c	or room)					94 - 0		2059		
		RSITY CIRCLE					1 1115 110				
City	<u> </u>	MOIII CIRCUL				State	ZIP code	<del></del>			
TURLOC	'K					CA	9538	32			
Foreign countr			Foreign province/state	e/county			Foreign	postal c	:ode		
A First Retu				<b>J</b> If exer	npt under R&T	C Section	23701d, has	the or			
<b>B</b> Amended	ided Return Yes X No engaged in political activities? See instructions • Yes										
	IRC Section 4947(a)(1) trust Yes X No K Is the organization exempt under R&TC Section 23701g? • Ye								<u> </u>	X	No
		n Return?			," enter the gro						_
	Dissolv		erged/Reorganized		nization is a pu		-				
	Enter date: (mm/dd/yyyy) • Section 23701d and meets the filing fee exception, check										
	neck accounting method: (1) Cash (2) X Accrual (3) Other box. No filing fee is required								X	No	
	eturn filed? (1) ● □ 990T(2) ● □ 990PF (3) ● □ Sch H (990)   M Is the organization a Limited Liability Company?								Δ	NO	
		filing? See instructions	Yes X No		taxable income					X	Nο
		tion in a group exemption	Yes X No								NO
	ganization in a group exemption Yes X No 0 Is the organization under audit by what is the parent's name? IRS audited in a prior year?						•			X	No
				P Is fede	eral Form 1023	/1024 per	nding?			X	
I Did the o	rganiza	ation have any changes to its guidelines			led with IRS _						
		the FTB? See instructions •	Yes X No		_		_				
Part I	Comple	ete Part I unless not required to file this fo									
	1	Gross sales or receipts from other sources.	From Side 2, Part II	I, line 8			•	1	1,386,	780	00
Receipts	2	Gross dues and assessments from membe	rs and affiliates				•	2		000	00
	3	Gross contributions, gifts, grants, and simil Total gross receipts for filing requirement test. Add This line must be completed. If the result is less that	ar amounts received	j		ST	'MT 1 •	3	10,		
and	4	This line must be completed. If the result is less that	an \$50,000, see General	I Information	B			4	1,396,	780	00
Revenues	5	Cost of goods sold		•	6		00	-			
	6 7	T					00	7			100
	8	Total gross income. Subtract line 7 from lin						8	1,396,	780	00
	9	Total expenses and disbursements. From S					_	9	1,291,		
Expenses	10	Excess of receipts over expenses and disbu						10	104,	930	00
	11	Tatal a sussants					•	11	,		00
	12						•	12			00
	13	Payments balance. If line 11 is more than li	ne 12, subtract line	12 from lin	e 11		•	13			00
Filing Fee	14	Use tax balance. If line 12 is more than line	11, subtract line 11	from line 1	12		•	14			00
	15	Filing fee \$10 or \$25. See General Informat	ion F					15		10	00
	16	Penalties and Interest. See General Information						16			00
	17	Balance due. Add line 12, line 15, and line	16. Then subtract lin	ne 11 from	the result	atements :	and to the hest	17	howledge and helief	10	00
Sign	it is tr	penalties of perjury, I declare that I have examined ue, correct, and complete. Declaration of preparer (control of preparer (control of preparer)	ther than taxpayer) is ba	ased on all ir	formation of which	h preparer	has any knowle	dge.	lowledge and belief,		
Here	Signat	Signature . Date							Telephone		
	Signature of officer ► INTERIM EXECUT							● PTIN			
	Prepa	rer's vure			12/19/		Check if self-employed		P00485021		
Paid					14/13/	13   S	on employed		● Firm's FEIN		—
Preparer's	Firm's name (or yours, ALDRICH CPAS AND ADVISORS, LLP							93-062328	6		
Use Only	if self- employed) 7676 HAZARD CENTER DRIVE, STE 1300						• Telephone				
		ddress SAN DIEGO, CA 92		<b></b>	- <del>- •</del>				(619) 810	-49	40
	May	the FTB discuss this return with the prepare		instruction	ns		• <u>\</u>	Yes	<u> </u>		

828951 12-12-18

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

	_						
	1	Gross sales or receipts from all	business activities. See instruc	tions	• [	1	00
	2	Interest			•	2	8,478 00
	3	Dividends				3	44,890 00
Receipts	4	Gross rents				4	00
irom	5	Gross royalties				5	27,101 00
Other	6	Gross amount received from sal	e of assets (See Instructions)		•	6	00
Sources	7	Other income	, , , , , , , , , , , , , , , , , , ,	SEE STA	TEMENT 2 •	7	1,306,311 00
	8	Total gross sales or receipts fro	m other sources. Add line 1 th	rough line 7. Enter here and o	on Side 1, Part I, line 1	8	1,386,780 00
	9	Contributions, gifts, grants, and	similar amounts paid	STA	TEMENT 3 •	9	10,600 00
	10		rs		•	10	00
	11	Compensation of officers, direct	ors, and trustees	SEE STA	TEMENT 4 •	11	0 00
	12	Other salaries and wages	,		•	12	00
Expenses	13					13	209,862 00
and	1	Taxes				14	00
Disburse-		Rents				15	24,307 00
ments	16		inetructione)		•	16	392,021 00
iiciita	17		ante	SEE STA	TEMENT 5	17	655,060 00
		Total expenses and disburseme	nte Add ling 0 through ling 17	Enter here and on Side 1 Dr	ort L line 0	18	1,291,850 00
Schedu			Beginning of				ible year
Assets	iie L	Dalanco oncot	(a)	(b)	(c)		(d)
			(α)	977,705			• 818,947
1 Cash		i		64,166			• 64,166
		s receivable		04,100			• 04,100
		ceivable					•
		-1-1					<u>•</u>
		state government obligations				-	•
		in other bonds					<u>•</u>
		in stock					•
8 Mortga				1 024 062			1 146 650
<b>9</b> Other i	invest	ments STMT 6	10 150 050	1,034,263			• 1,146,658
<b>10 a</b> Dep	reciab	ole assets	12,158,272	6 045 050	12,167,83		5 050 005
		ımulated depreciation	( 5,912,294	6,245,978		J )	5,879,005
<b>11</b> Land		<u>.</u>		287,300			• 287,300
<b>12</b> Other a	assets	STMT 7		7,987			• 11,394
13 Total a	assets	3		8,617,399			8,207,470
Liabilities							
14 Accou	nts pa	yable		7,850			• 8,887
<b>15</b> Contril	bution	is, gifts, or grants payable					•
<b>16</b> Bonds	and n	notes payable STMT 8		5,456,631			• 5,015,245
17 Mortga	ages p	payable					•
<b>18</b> Other I	liabiliti	ies STMT 9		1,605,580			1,523,226
19 Capital	l stock	c or principal fund					•
20 Paid-in	or capi	ital surplus. Attach reconciliation					•
21 Retain	ed ear	rnings or income fund		1,547,338			• 1,660,112 8,207,470
22 Total I	iabili	ties and net worth		8,617,399			8,207,470
Schedu	ile N	<b>1-1</b> Reconciliation of income	per books with income per re	turn			
		Do not complete this sche	dule if the amount on Schedule	L, line 13, column (d), is les	s than \$50,000.		
1 Net inc	come i	per books	• 112,	774 7 Income recorded	on books this year		
2 Federa			11	• 11,268			
3 Excess	eral income tax  ourse of capital losses over capital gains  ourse of capital losses over capital gains						
	come not recorded on books this year • against book income this year						•
	Expenses recorded on books this year not 9 Total. Add line 7 and line 8						11,268
	deducted in this return STMT 10 • 3,424 10 Net income per return.						
		ne 1 through line 5	446				104,930
		J	. 1	1			,

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