

Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2017

Open to Public
Inspection

A For the 2017 calendar year, or tax year beginning 07-01-2017, and ending 06-30-2018

B Check if applicable

- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

C Name of organization
California State University Fresno
Alumni Association Incorporated

D Employer identification number
94-1085570

Doing business as

E Telephone number
(559) 278-2586

Number and street (or P O box if mail is not delivered to street address) Room/suite
2625 East Motoian Way M/S SH124

City or town, state or province, country, and ZIP or foreign postal code
Fresno, CA 93740

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission

The Fresno State Alumni Association (FSAA) is dedicated to uniting and advancing the interests and traditions of Alumni and friends of Fresno State, and providing scholarship opportunities that attract and support highly motivated students to the university

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

If "Yes," describe these new services on Schedule C.

3 Did the organization cease conducting, or make significant changes in how it conducts, any programs or services?

Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code) (Expenses \$ 485,760 including grants of \$) (Revenue \$ 372,529)
See Additional Data

See Additional Data

4b (Code) (Expenses \$ 179,819 including grants of \$ 157,343) (Revenue \$)

See Additional Data

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)

General program

including amounts of a

300 (Bouyou)

1

4a. Total program service expenses

665 530

Part IV Checklist of Required Schedules

1. Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Yes

a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities**

2a

b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the

Part IV Checklist of Required Schedules (continued)

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

25a **Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.**
Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I

26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

	Yes	No
20a		No
20b		
21	Yes	
22	Yes	
23		No
24a		No
24b		No
24c		No
24d		No
25a		No
25b		No
26		No
27		No
28a		No

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable **1a** 15

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable **1b** 0

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? **1c** Yes

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return **2a** 0

b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note**. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) **2b** No

3a Did the organization have unrelated business gross income of \$1,000 or more during the year? **3a** No

b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O **3b** No

4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? **4a** No

b If "Yes," enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) **5a** No

5b No

5c

6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? **6a** No

b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? **6b**

7 Organizations that may receive deductible contributions under section 170(c).

2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013.			
c From 2014.			
d From 2015.			
e From 2016.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7 \$			
a Applied to underdistributions of prior years			

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

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

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a	22	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b Enter the number of voting members included in line 1a, above, who are independent	1b	21	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6 Did the organization have members or stockholders?	6		No
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	8a	Yes	
a The governing body?	8b	Yes	
b Each committee with authority to act on behalf of the governing body?	9		No
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a Yes	
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b Yes	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a Yes	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a Yes	
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12b Yes	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12c Yes	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	13 Yes	
13 Did the organization have a written whistleblower policy?	14 Yes	
14 Did the organization have a written document retention and destruction policy?	15a	No
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15b	No
a The organization's CEO, Executive Director, or top management official	16a	No
b Other officers or key employees of the organization	16b	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed►	CA
18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply	
<input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20 State the name, address, and telephone number of the person who possesses the organization's books and records ►Jacquelyn Glasener 2625 East Motoian Way M/S SH124 Fresno, CA 937408000 (559) 278-2586	

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee".

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Nancy Akhavan Director	0 20 0 00	<input checked="" type="checkbox"/> Director <input type="checkbox"/> Individual trustee <input type="checkbox"/> Institutional trustee	<input type="checkbox"/> Officer <input type="checkbox"/> Key employee <input type="checkbox"/> Highest compensated employee	<input type="checkbox"/> Financial	<input type="checkbox"/> Highest compensated employee	<input type="checkbox"/> Financial	0	0	0
(2) Doug Brotan	0 20	<input checked="" type="checkbox"/> Director <input type="checkbox"/> Individual trustee <input checked="" type="checkbox"/> Institutional trustee	<input type="checkbox"/> Officer <input checked="" type="checkbox"/> Key employee <input type="checkbox"/> Highest compensated employee	<input type="checkbox"/> Financial	<input type="checkbox"/> Financial	<input type="checkbox"/> Highest compensated employee	0	0	0

c **Remainder** Subtract lines 4a and 4b from 4

5 **Remaining underdistributions for years prior to 2017, if any.** Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions

6 **Remaining underdistributions for 2017.** Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions

7 **Excess distributions carryover to 2018.** Add lines 3j and 4c

8 **Breakdown of line 7**

a Excess from 2013.

b Excess from 2014.

c Excess from 2015.

d Excess from 2016.

e Excess from 2017.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee			
(18) Scott Miller	0 20	X					0	0	0
Director	0 00								
(19) Tony Petrosino	0 20	X		X			0	0	0
VP Scholarships	0 00								
(20) Walter Plachta	0 20	X					0	0	0
Director	0 00								
(21) Adam Stirrup	0 20	X		X			0	0	0
Past President	0 00								
(22) Mark Torres	0 20	X					0	0	0
Director	0 00								
(23) Jacquelyn Glasener	45 00			X			0	0	0
Executive Dir	0 00								
1b Sub-Total									
c Total from continuation sheets to Part VII, Section A									
d Total (add lines 1b and 1c)									

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 0

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	No
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	No

Section B. Independent Contractors

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

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 0

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a				
	b Membership dues . . .	1b				
	c Fundraising events . . .	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	33,559			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	444,131			
	g Noncash contributions included in lines 1a-1f \$		42,906			
	h Total. Add lines 1a-1f		477,690			
		Business Code				
Program Service Revenue	2a Commission Income		109,991	109,991		
	b Event Income		123,893	123,893		
	c Program Revenue		935	935		
	d Sponsorship Income		137,710	137,710		
	e					
	f All other program service revenue					
g Total. Add lines 2a-2f		372,529				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		134,651	134,651		
	4 Income from investment of tax-exempt bond proceeds		0			
	5 Royalties		0			
	6a Gross rents	(i) Real	(ii) Personal			
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)			0		
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
	b Less cost or other basis and sales expenses	5,557,534				
	c Gain or (loss)	4,710,830				
d Net gain or (loss)	846,704		846,704	846,704		
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
b Less direct expenses	b					
c Net income or (loss) from fundraising events			0			
9a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses	b					
c Net income or (loss) from gaming activities			0			
10a Gross sales of inventory, less returns and allowances	a	174,153				
		101,570				

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX **Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21

2 Grants and other assistance to domestic individuals See Part IV, line 22

3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	40,000	40,000		
2	117,343	117,343		
3	0			

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

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

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

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX **Assets**

		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	1,152,890	1	735,437
2	Savings and temporary cash investments		2	0
3	Pledges and grants receivable, net		3	0
4	Accounts receivable, net	211,043	4	70,465
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	0
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	0
7	Notes and loans receivable, net		7	0
8	Inventories for sale or use	44,547	8	55,212
9	Prepaid expenses and deferred charges	22,575	9	26,030
10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	18,238		
b	Less accumulated depreciation	10b 9,480	8,482	10c 8,758
11	Investments—publicly traded securities		11	0
12	Investments—other securities See Part IV, line 11		12	0
13	Investments—program-related See Part IV, line 11		13	0
14	Intangible assets		14	0
15	Other assets See Part IV, line 11	4,873,733	15	5,858,921
		6,610,870		6,754,600

► _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
► \$ _____

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

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,907,860
2	Total expenses (must equal Part IX, column (A), line 25)	2	877,278
3	Revenue less expenses Subtract line 2 from line 1	3	1,030,582
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,290,043
5	Net unrealized gains (losses) on investments	5	-602,290
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	6,718,335

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII

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

Additional Data

Software ID: 17005038

Software Version: 2017v2.2

EIN: 94-1085570

Name: California State University Fresno
Alumni Association Incorporated

Form 990 (2017)

Form 990, Part III, Line 4a:

To engage and recognize alumni and students and award student scholarships. The association puts on several events throughout the years. Away Tailgates. Tailgate parties are held once or twice a year to encourage alumni and families out of the area to remain connected to Fresno State. Top Dog Alumni Gala. The top dog alumni awards gala is a FSAA signature event, whereby outstanding alumni are honored from the eight schools and colleges along with four awards from divisions on campus. In addition, an award is given to someone who has given outstanding service to Fresno State and the alumni Associate, plus an overall recipient as the distinguished Alumnus/Alumna. This black tie event is first class and shows the community our commitment to excellence. Grad Fest. All students who are eligible to graduate are invited to Grad Fest. They are encouraged to support the FSAA and get a grad box which includes their cap and gown, alumni merchandise, and off-campus benefits. Hopefully this will keep them in touch with the FSAA after graduation, therefore keeping them informed of campus activities. The Alumni E-Newsletter is sent throughout the year to alumni and friends to recognize and tell the stories of our alumni and students and as a way to let people know what is happening on campus with our chapters and clubs as well as with our programs and events. Chapter and Club Events. The Alumni Association's chapters and clubs also sponsor many events throughout the year to foster alumni ties and to bring attention to the alumni association program. Events include, but are not limited to golf tournaments, wine tasting, tailgates, conferences and award functions. Victor E Bulldog, Fresno State's live mascot, brings the spirit of the university to more than 200 appearances each year. Victor's appearances take place on campus, within the Fresno community and across the state of California. These events allow the University to engage with alumni, students, friends of the university and future Bulldogs.

Form 990, Part III, Line 4b:

The exempt purpose was carried out by providing scholarships to students at Fresno State. Students must apply for the scholarships and must meet certain qualifications requirements. 96 scholarships were awarded by the Fresno State Alumni Association (FSAA) during the current fiscal year. The FSAA is a leader among the 23 campus alumni associations of the CSU system in scholarship giving.

SCHEDULE A
(Form 990 or
990EZ)**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**2017****Open to Public
Inspection**Department of the Treasury
Internal Revenue Service**Name of the organization**
California State University Fresno
Alumni Association Incorporated**Employer identification number**

94-1085570

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

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.

2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))

3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.

4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____

5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)

6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.

7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)

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

9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university

10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)

11 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.

12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g

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

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

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

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

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

f Enter the number of supported organizations _____

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						
For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.			Cat No 11285F			Schedule A (Form 990 or 990-EZ) 2017

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

	Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	335,508	448,946	653,820	668,804	477,690	2,584,768
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	407,303	486,513	617,931	579,570	600,964	2,692,281
4	Total. Add lines 1 through 3	742,811	935,459	1,271,751	1,248,374	1,078,654	5,277,049
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						74,818
6	Public support. Subtract line 5 from line 4						5,202,231

Section B. Total Support

	Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	742,811	935,459	1,271,751	1,248,374	1,078,654	5,277,049
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	145,827	208,433	133,058	165,358	134,651	787,327
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	104,885	113,942	118,808	115,454	174,153	627,242
11	Total support. Add lines 7 through 10						6,691,618
12	Gross receipts from related activities, etc (see instructions)					12	

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

Section C. Computation of Public Support Percentage

14	Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	77 740 %
15	Public support percentage for 2016 Schedule A, Part II, line 14	15	78 900 %
16a	33 1/3% support test—2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b	33 1/3% support test—2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a	10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b	10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

	Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2	

Part IV Supporting Organizations (continued)

11 Has the organization accepted a gift or contribution from any of the following persons?

a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?

b A family member of a person described in (a) above?

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

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

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

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

	Yes	No
1		

Section D. All Type III Supporting Organizations

1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?

2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s)

3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard

	Yes	No
1		
2		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

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

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

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

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

Activities Test. Answer (a) and (b) below.

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount		Current Year	
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI) See instructions	
7	Total annual distributions. Add lines 1 through 6	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9	Distributable amount for 2017 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	
Section E - Distribution Allocations (see instructions)		(i) Excess Distributions
		(ii) Underdistributions Pre-2017
		(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6	
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions	
3	Excess distributions carryover, if any, to 2017	
a		
b	From 2013.	
c	From 2014.	
d	From 2015.	
e	From 2016.	
f	Total of lines 3a through e	
g	Applied to underdistributions of prior years	
h	Applied to 2017 distributable amount	
i	Carryover from 2012 not applied (see instructions)	
j	Remainder Subtract lines 3g, 3h, and 3i from 3f	
4	Distributions for 2017 from Section D, line 7 \$	
a	Applied to underdistributions of prior years	
b	Applied to 2017 distributable amount	
c	Remainder Subtract lines 4a and 4b from 4	
5	Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions	
6	Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions	
7	Excess distributions carryover to 2018. Add lines 3j and 4c	
8	Breakdown of line 7	
a	Excess from 2013.	
b	Excess from 2014.	
c	Excess from 2015.	
d	Excess from 2016.	
e	Excess from 2017.	

Additional Data

Software ID: 17005038
Software Version: 2017v2.2
EIN: 94-1085570
Name: California State University Fresno
Alumni Association Incorporated

Schedule A (Form 990 or 990-EZ) 2017

Page 8

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

Facts And Circumstances Test

SCHEDULE D
(Form 990)**Supplemental Financial Statements**

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service► Complete if the organization answered "Yes," on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.**2017****Open to Public
Inspection****Name of the organization**
California State University Fresno
Alumni Association Incorporated**Employer identification number**
94-1085570**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No**Part II Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

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

a Total number of conservation easements

Held at the End of the Year	
2a	
2b	
2c	
2d	

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

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

4 Number of states where property subject to conservation easement is located ► _____

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

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

See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

Yes No

1b "Yes" _____ Date _____

1c _____ Amount _____

1d _____

1e _____

1f _____

1g _____

1h _____

1i _____

1j _____

1k _____

1l _____

1m _____

1n _____

1o _____

1p _____

1q _____

1r _____

1s _____

1t _____

1u _____

1v _____

1w _____

1x _____

1y _____

1z _____

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

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

Part VIII Investments—Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

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

(a) Description	(b) Book value
(1) Rounding	1
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

5,858,921

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

1.	(a) Description of liability	(b) Book value
(1) Federal income taxes		
Sales Tax Payables		2,519
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)		2,519

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	2,008,104
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-602,290
b	Donated services and use of facilities	2b	600,964
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	101,570
e	Add lines 2a through 2d	2e	100,244
3	Subtract line 2e from line 1	3	1,907,860
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		

Alumni Association Incorporated

Return Reference	Explanation
Part X FIN48 Footnote	Generally accepted accounting principles provide accounting and disclosures guidance about positions taken by an entity in its tax returns that might be uncertain. The FSAA has considered its tax positions and believes that all of the positions taken in its federal and state exempt organization returns are more likely than not to be sustained upon examination. The FSAA's returns are subject to examination by federal and state taxing authorities, generally for three years and four years, respectively, after they are filed.

Part XIII Supplemental Information (continued)

Return Reference	Explanation

Additional Data

Software ID: 17005038
Software Version: 2017v2.2
EIN: 94-1085570
Name: California State University Fresno
Alumni Association Incorporated

Supplemental Information

Return Reference	Explanation
Part X FIN48 Footnote	Generally accepted accounting principles provide accounting and disclosures guidance about positions taken by an entity in its tax returns that might be uncertain. The FSAA has considered its tax positions and believes that all of the positions taken in its federal and state exempt organization returns are more likely than not to be sustained upon examination. The FSAA's returns are subject to examination by federal and state taxing authorities, generally for three years and four years, respectively, after they are filed.

Supplemental Information

Return Reference	Explanation
Part XI, Line 2d Other revenue amounts included in F/S but not included on form 990	Cost of Goods Sold \$101570

Supplemental Information

Return Reference	Explanation
Part XII, Line 2d Other expenses and losses per audited F/S	Cost of Goods Sold \$101570

**Schedule I
(Form 990)****Grants and Other Assistance to Organizations,
Governments and Individuals in the United States**

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.**2017****Open to Public
Inspection**Department of the
Treasury
Internal Revenue ServiceName of the organization
California State University Fresno
Alumni Association IncorporatedEmployer identification number
94-1085570**Part I General Information on Grants and Assistance**

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

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CSUF Foundation 4910 N Chestnut Ave Fresno, CA 93726	94-6003272	501(c)(3)	40,000	0			

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

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

1

0

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) Scholarships Paid	96	117,343			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation

SCHEDULE M
(Form 990)

Noncash Contributions

OMB No 1545-0047

2017

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

► Attach to Form 990.

►Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990Open to Public
InspectionDepartment of the Treasury
Internal Revenue ServiceName of the organization
California State University Fresno
Alumni Association Incorporated

Employer identification number

94-1085570

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	2	8,770	FMV
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (Materials)	X	12	34,136	Cost
26 Other ► (_____)				
27 Other ► (_____)				
28 Other ► (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions
for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it
must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt
purposes for the entire holding period?

	Yes	No
30a		No

b If "Yes," describe the arrangement in Part II

30a		No
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31	Yes	
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32a		No
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Part II**Supplemental Information.**

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

California State University Fresno

Alumni Association Incorporated

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017**Open to Public
Inspection****Employer identification number**

94-1085570

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 7b Describe Decisions of Governing Body Approval by Members or Shareholders	Depending on the circumstances, some decisions may be subject to the approval of the University

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 11b Form 990 Review Process	The draft form 990 is provided to each board member prior to filing, either via email or other methods. Any questions or concerns are resolved by the Board of Directors prior to submission of the Form 990 to the IRS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	Annually each director, principal officer, key employee and member of a committee with governing board delegated powers shall annually sign a statement which affirms such person 1) has received a copy of the conflicts of interest policy, 2) has read and understands the policy, 3) has agreed to comply with the policy, and 4) understands the organization is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of its tax-exempt purposes. The executive committee and the Board of Directors as a whole have been diligent about self-monitoring any conflict of interest as it arises and formally recording it in the minutes

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	It is the policy of the FSAA to provide the governing documents upon request

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	Annual Fund Expense Column (A) - Total = \$4365, Column (B) - Program Services = \$0, Column (C) - Management & General = \$4365, Column (D) - Fundraising = \$0

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	Banking Fees Column (A) - Total = \$14647, Column (B) - Program Services = \$811, Column (C) - Management & General = \$13836, Column (D) - Fundraising = \$0

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	Business Meals Column (A) - Total = \$7255, Column (B) - Program Services = \$3125, Column (C) - Management & General = \$3576, Column (D) - Fundraising = \$554

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	Community Relations Column (A) - Total = \$5994, Column (B) - Program Services = \$4542, Co lumn (C) - Management & General = \$1129, Column (D) - Fundraising = \$323

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	Dues & Subscriptions Column (A) - Total = \$2469, Column (B) - Program Services = \$0, Column (C) - Management & General = \$2469, Column (D) - Fundraising = \$0

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	Foundation Charge Column (A) - Total = \$2464, Column (B) - Program Services = \$0, Column (C) - Management & General = \$2464, Column (D) - Fundraising = \$0

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	Grants Awarded Column (A) - Total = \$13979, Column (B) - Program Services = \$13979, Column (C) - Management & General = \$0, Column (D) - Fundraising = \$0

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	License Fees Column (A) - Total = \$760, Column (B) - Program Services = \$760, Column (C) - Management & General = \$0, Column (D) - Fundraising = \$0

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	Misc Expenses Column (A) - Total = \$1380, Column (B) - Program Services = \$1133, Column (C) - Management & General = \$187, Column (D) - Fundraising = \$60

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	Misc Staff Expenses Column (A) - Total = \$2129, Column (B) - Program Services = \$0, Column (C) - Management & General = \$2129, Column (D) - Fundraising = \$0

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	Office Equip Rent & Maint Column (A) - Total = \$11500, Column (B) - Program Services = \$0 , Column (C) - Management & General = \$11500, Column (D) - Fundraising = \$0

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	Over/Short Column (A) - Total = \$158, Column (B) - Program Services = \$158, Column (C) - Management & General = \$0, Column (D) - Fundraising = \$0

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	Postage and Shipping Column (A) - Total = \$32172, Column (B) - Program Services = \$10333, Column (C) - Management & General = \$15927, Column (D) - Fundraising = \$5912

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	Printing and Publications Column (A) - Total = \$12601, Column (B) - Program Services = \$9 558, Column (C) - Management & General = \$102, Column (D) - Fundraising = \$2941

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	Prize Expense Column (A) - Total = \$4770, Column (B) - Program Services = \$4770, Column (C) - Management & General = \$0, Column (D) - Fundraising = \$0

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	Repairs & Maintenance Column (A) - Total = \$1444, Column (B) - Program Services = \$135, C olumn (C) - Management & General = \$1309, Column (D) - Fundraising = \$0

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	Special Events Column (A) - Total = \$6104, Column (B) - Program Services = \$6104, Column (C) - Management & General = \$0, Column (D) - Fundraising = \$0

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 24e Other Expenses	State Income Taxes Column (A) - Total = \$10, Column (B) - Program Services = \$0, Column (C) - Management & General = \$10, Column (D) - Fundraising = \$0

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part XII, Line 2 Change of Oversight or Selection Process	Audit of financial statements is currently underway, but was not completed by the due date of the tax return

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part I, Line 6	Volunteers are an invaluable asset to the FSAA. All of the board of directors of the organization are volunteers. Each of the chapters and clubs have volunteer boards as well. They host various events and activities in support of the FSAA and the University, utilizing additional volunteers. These volunteers are enthusiastic, energetic, experienced and provide countless hours of dedicated service.