

Salisbury University

STEP 1: Review the list below and check the box if your department generates **REVENUE FROM SOURCES OUTSIDE THE UNIVERSITY** from any of these activities, which are examples of “potential” unrelated business income (include sources of revenue even if it results in a net loss after deducting related expenses)? This would **NOT** include revenue that is generated **ONLY** from Employees, Students and their Families. Also **DO NOT** include any revenue deposited with the Sal9.2(d -4.6eo3 -0.9.2(l)-4-0.9u.2(l)-4-0.9u.23.)M i

Other

Catalog Sales

Internet Sales

Yes

No

Maybe

V. **Royalties**

- A. Does the activity generate revenue from royalties?
- B. Is the royalty income derived in part from the performance
of services?

STEP 3: Please complete all questions below for each activity noted above as potential unrelated business income and provide as much detail in doing so as possible.

Revenue Activity: _____

- Expressed as a percentage of total revenue dollars generated by the activity in FY __, the estimated volume of revenues from:

Internal Customers:	
%	(A) Students, faculty, or staff
External Customers:	
%	(B) Other Universities/colleges
%	(C) Federal or state governments
%	(D) Private industry
%	(E) General Public
%	(F) Other
100 %	Total from internal and external customers. (Must equal 100%)

- Please describe how you make external customers aware of the goods or services you provide (e.g., advertising, websites, professional contacts, etc.):

3. Were the activities **regularly carried** on? (Regularly carried on means: is the activity conducted with the same frequency and continuity, and in a similar manner, as a for-profit organization would conduct a comparable activity) Please select one of the following:

(A) With the same frequency as it is by for-profit companies.

(B) With greater frequency than by for-profit companies.

(C) With less frequency than by for-profit companies.

4. At the time the activity was being established, was it expected that the activity would lose money, break even, or make a profit? Please describe a detailed response below:

5. Were any campus approvals obtained before this activity was conducted? If yes please provide the names and emails of the persons below:

STEP 4: Once a completed survey has been submitted for an activity, an updated survey is required whenever the activity procedure or purpose is amended. Please answer the following for each type of activity.

Activity Information

Revenue Activity _____

School/Department: _____ PS Department Number: _____

PS Department Name: _____

This is a change to an existing form

This is an Initial form

For the Fiscal Year ended June 30, _____(YYYY)

OVERALL DETERMINATION: Report as UBI: _____ Exempt: _____

Briefly explain the reason(s) why you believe the activity should be reported or exempt.

Certification of Responsible Person

Printed Name: _____

Title: _____

Phone Number: _____

Email: _____

Signature: _____

Date: _____
