

TAX RETURN FILING INSTRUCTIONS

CALIFORNIA FORM 199

FOR THE YEAR ENDING
JUNE 30, 2019

PREPARED FOR:

STUDENT UNION OF SAN JOSE
STATE UNIVERSITY
ONE WASHINGTON SQUARE
SAN JOSE, CA 95192-0201

PREPARED BY:

RSM US LLP
1145 BROADWAY PLAZA, SUITE 900
TACOMA, WA 98402-3529

TO BE SIGNED AND DATED BY:

NOT APPLICABLE

AMOUNT OF TAX:

TOTAL TAX	\$	10
LESS: PAYMENTS AND CREDITS	\$	0
PLUS: OTHER AMOUNT	\$	0
PLUS: INTEREST AND PENALTIES	\$	0
BALANCE DUE	\$	10

OVERPAYMENT:

CREDITED TO YOUR ESTIMATED TAX	\$	0
OTHER AMOUNT	\$	0
REFUNDED TO YOU	\$	0

MAKE CHECK PAYABLE TO:

FRANCHISE TAX BOARD

MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:

THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. AFTER YOU HAVE REVIEWED YOUR RETURN FOR COMPLETENESS AND ACCURACY, PLEASE SIGN, DATE AND RETURN FORM 8453-EO TO OUR OFFICE. WE WILL THEN TRANSMIT YOUR RETURN ELECTRONICALLY TO THE FTB. DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE FTB.

RETURN MUST BE MAILED ON OR BEFORE:

NOT APPLICABLE

SPECIAL INSTRUCTIONS:

YOUR PAYMENT SHOULD BE MADE AS INSTRUCTED BELOW ON OR BEFORE MAY 15, 2020.

SEPARATELY MAIL CALIFORNIA FORM FTB 3586 WITH A CHECK OR MONEY
ORDER FOR \$10, PAYABLE TO FRANCHISE TAX BOARD.

MAIL TO:
FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0531

COPY

TAXABLE YEAR
2018

California e-file Return Authorization for Exempt Organizations

FORM
8453-EO

Exempt Organization name STUDENT UNION OF SAN JOSE STATE UNIVERSITY	Identifying number 94-2830732
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Part I Electronic Return Information (whole dollars only)

1 Total gross receipts (Form 199, line 4)	1	28,805,107
2 Total gross income (Form 199, line 8)	2	15,217,241
3 Total expenses and disbursements (Form 199, line 9)	3	13,800,327

Part II Settle Your Account Electronically for Taxable Year 2018

4 <input type="checkbox"/> Electronic funds withdrawal	4a Amount	4b Withdrawal date (mm/dd/yyyy)
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Part III Banking Information (Have you verified the exempt organization's banking information?)

5 Routing number	6 Account number	7 Type of account: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
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Part IV Declaration of Officer

I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, Box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.


Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2018 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay.

Sign Here  | 5/13/20 | 

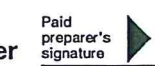
Signature of officer Date Title

Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer.

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2018 Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for four years from the due date of the return or four years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

ERO Must Sign	ERO's signature 	Digitally signed by Christy Engelmann Date: 2020.05.12 08:31:43 -07'00'	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's PTIN P00745224
	Firm's name (or yours if self-employed) and address	RSM US LLP 1145 BROADWAY PLAZA, SUITE 900 TACOMA, WA	FEIN 42-0714325	ZIP code 98402-3529	

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Paid Preparer Must Sign	Paid preparer's signature 	Date	Check if self-employed <input type="checkbox"/>	Paid preparer's PTIN
	Firm's name (or yours if self-employed) and address			FEIN
				ZIP code

TAXABLE YEAR
2018

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6 Account number _____	

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Sign Here

Signature of officer _____	Date _____	Title AD ACCOUNTING & FINANCE
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ERO Must Sign	ERO's signature Christy Engelmann	Digitally signed by Christy Engelmann Date: 2020.05.12 07:49:42 -07'00'	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's PTIN P00745224
	Firm's name (or yours if self-employed) and address RSM US LLP 1145 BROADWAY PLAZA, SUITE 900 TACOMA, WA	FEIN 42-0714325	ZIP code 98402-3529		

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Paid Preparer Must Sign	Paid preparer's signature _____	Date _____	Check if self-employed <input type="checkbox"/>	Paid preparer's PTIN _____
	Firm's name (or yours if self-employed) and address _____	FEIN _____	ZIP code _____	

Voucher at bottom of page.

DO NOT MAIL A PAPER COPY OF THE CORPORATE OR EXEMPT ORGANIZATION TAX RETURN WITH THE PAYMENT VOUCHER. If the amount of payment is zero, do not mail this voucher.

WHERE TO FILE: Using black or blue ink, make check or money order payable to the "Franchise Tax Board." Write the corporation number, FEIN, CA SOS file number and "2018 FTB 3586" on the check or money order. Detach voucher below. Enclose, but do not staple, payment with voucher and mail to: FRANCHISE TAX BOARD PO BOX 942857 SACRAMENTO CA 94257-0531

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

WHEN TO FILE: Corporations - File and Pay by the 15th day of the 4th month following the close of the taxable year. S corporations - File and Pay by the 15th day of the 3rd month following the close of the taxable year. Exempt organizations - File and Pay by the 15th day of the 5th month following the close of the taxable year.

When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day.

ONLINE SERVICES: Corporations can make payments online using Web Pay for Businesses. Corporations can make an immediate payment or schedule payments up to a year in advance. Go to ftb.ca.gov/pay for more information.

839035 12-12-18

--- DETACH HERE --- IF NO PAYMENT IS DUE, DO NOT MAIL THIS VOUCHER --- DETACH HERE ---

CAUTION: You may be required to pay electronically, see instructions.

TAXABLE YEAR 2018 Payment Voucher for Corporations and Exempt Organizations e-filed Returns

CALIFORNIA FORM 3586 (e-file)

0000000 STUD 94-2830732 1105403 18 FORM 3
TYB 07-01-2018 TYE 06-30-2019
STUDENT UNION OF SAN JOSE STATE UNIVERSITY

ONE WASHINGTON SQUARE
SAN JOSE CA 95192-0201

(408) 942-6320

Amount of Payment 10.

TAXABLE YEAR
2018

California Exempt Organization Annual Information Return

828941 12-12-18
FORM
199

Calendar Year 2018 or fiscal year beginning (mm/dd/yyyy) **07/01/2018**, and ending (mm/dd/yyyy) **06/30/2019**

Corporation/Organization name
**STUDENT UNION OF SAN JOSE
STATE UNIVERSITY**

California corporation number
1105403

Additional information. See instructions.
FEIN
94-2830732

Street address (suite or room)
ONE WASHINGTON SQUARE

PMB no.

City
SAN JOSE

State
CA

ZIP code
95192-0201

Foreign country name

Foreign province/state/county

Foreign postal code

- A First Return Yes No
- B Amended Return Yes No
- C IRC Section 4947(a)(1) trust Yes No
- D Final Information Return?
 - Dissolved Surrendered (Withdrawn) Merged/Reorganized
 - Enter date: (mm/dd/yyyy)
- E Check accounting method: (1) Cash (2) Accrual (3) Other
- F Federal return filed? (1) 990T (2) 990PF (3) Sch H (990) (4) Other 990 series
- G Is this a group filing? See instructions Yes No
- H Is this organization in a group exemption
If "Yes," what is the parent's name? Yes No
- I Did the organization have any changes to its guidelines
not reported to the FTB? See instructions Yes No
- J If exempt under R&TC Section 23701d, has the organization
engaged in political activities? See instructions. Yes No
- K Is the organization exempt under R&TC Section 23701g? Yes No
If "Yes," enter the gross receipts from nonmember sources \$ _____
- L If organization is a public charity exempt under R&TC
Section 23701d and meets the filing fee exception, check
box. No filing fee is required
- M Is the organization a Limited Liability Company? Yes No
- N Did the organization file Form 100 or Form 109 to
report taxable income? Yes No
- O Is the organization under audit by the IRS or has the
IRS audited in a prior year? Yes No
- P Is federal Form 1028/1024 pending? Yes No
Date filed with IRS _____

Part I Complete Part I unless not required to file this form. See General Information B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	28,805,107	00
	2	Gross dues and assessments from members and affiliates	2		00
	3	Gross contributions, gifts, grants, and similar amounts received	3		00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3 This line must be completed. If the result is less than \$50,000, see General Information B	4	28,805,107	00
	5	Cost of goods sold	5		00
	6	Cost or other basis, and sales expenses of assets sold	6	13,587,866	00
	7	Total costs. Add line 5 and line 6	7	13,587,866	00
	8	Total gross income. Subtract line 7 from line 4	8	15,217,241	00
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	13,800,327	00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	1,416,914	00
Filing Fee	11	Total payments	11		00
	12	Use tax. See General Information K	12		00
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11	13		00
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14		00
	15	Filing fee \$10 or \$25. See General Information F	15		10
	16	Penalties and Interest. See General Information J	16		00
	17	Balance due. Add line 12, line 15, and line 16. Then subtract line 11 from the result	17		10

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here
Signature of officer **AD ACCOUNTING** Title
Date
Telephone (408) 924-6315

Preparer's signature **Christy Engelmann** Digitally signed by Christy Engelmann Date: 2020.05.12 07:49:59 -07'00'
Check if self-employed PTIN P00745224

Paid Preparer's Use Only
Firm's name (or yours, if self-employed) and address **RSM US LLP**
1145 BROADWAY PLAZA, SUITE 900
TACOMA, WA 98402-3529
Telephone 42-0714325

Telephone 253-572-7111

May the FTB discuss this return with the preparer shown above? See instructions Yes No

STUDENT UNION OF SAN JOSE
STATE UNIVERSITY

94-2830732

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.

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	•	1		00
	2	Interest	•	2	424,360	00
	3	Dividends	•	3		00
	4	Gross rents	•	4	2,921,423	00
	5	Gross royalties	•	5		00
	6	Gross amount received from sale of assets (See Instructions) STATEMENT 1	•	6	13,634,797	00
	7	Other income SEE STATEMENT 2	•	7	11,824,527	00
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	•	8	28,805,107	00
	9	Contributions, gifts, grants, and similar amounts paid	•	9		00
Expenses and Disbursements	10	Disbursements to or for members	•	10		00
	11	Compensation of officers, directors, and trustees SEE STATEMENT 3	•	11	217,192	00
	12	Other salaries and wages	•	12	5,259,685	00
	13	Interest	•	13		00
	14	Taxes	•	14	435,019	00
	15	Rents	•	15	2,179,791	00
	16	Depreciation and depletion (See instructions)	•	16	705,072	00
	17	Other Expenses and Disbursements SEE STATEMENT 4	•	17	5,003,568	00
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	•	18	13,800,327	00

Schedule L Balance Sheet		Beginning of taxable year		End of taxable year	
		(a)	(b)	(c)	(d)
Assets					
1	Cash		2,406,315		• 3,582,355
2	Net accounts receivable		290,028		• 391,283
3	Net notes receivable				•
4	Inventories				•
5	Federal and state government obligations				•
6	Investments in other bonds				•
7	Investments in stock STMT 5		6,886,315		• 7,220,271
8	Mortgage loans				•
9	Other investments				•
10	a Depreciable assets	10,152,295		10,184,695	
	b Less accumulated depreciation	(6,509,151)	3,643,144	(7,150,919)	3,033,776
11	Land				•
12	Other assets STMT 6		950,544		• 1,100,989
13	Total assets		14,176,346		15,328,674
Liabilities and net worth					
14	Accounts payable		2,578,120		• 2,171,620
15	Contributions, gifts, or grants payable				•
16	Bonds and notes payable				•
17	Mortgages payable				•
18	Other liabilities STMT 7		1,289,706		• 1,420,530
19	Capital stock or principal fund				•
20	Paid-in or capital surplus Attach reconciliation				•
21	Retained earnings or income fund		10,308,520		• 11,736,524
22	Total liabilities and net worth		14,176,346		15,328,674

Schedule M-1 Reconciliation of income per books with income per return
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.

1	Net income per books	• 1,428,004	7	Income recorded on books this year not included in this return STMT 8	• 11,090
2	Federal income tax	•	8	Deductions in this return not charged against book income this year	•
3	Excess of capital losses over capital gains	•	9	Total. Add line 7 and line 8	11,090
4	Income not recorded on books this year	•	10	Net income per return.	
5	Expenses recorded on books this year not deducted in this return	•		Subtract line 9 from line 6	1,416,914
6	Total. Add line 1 through line 5	1,428,004			

CA 199 GROSS AMOUNT FROM SALE OF ASSETS STATEMENT 1

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
PUBLICLY TRADED SECURITIES			PURCHASED	
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
	13,587,866.	0.	0.	13,634,797.
TOTAL TO FORM 199, PAGE 2, LN 6	13,587,866.	0.	0.	13,634,797.

CA 199 OTHER INCOME STATEMENT 2

DESCRIPTION	AMOUNT
OTHER INCOME	59,462.
STUDENT FEES	461,827.
COMMISSIONS	208,383.
REIMBURSED WAGES & BENEFITS	510,168.
SERVICE FEES	9,376,313.
REIMBURSED EVENT COSTS	1,208,374.
TOTAL TO FORM 199, PART II, LINE 7	11,824,527.

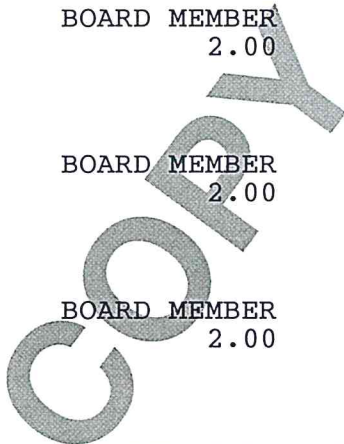
CA 199 COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES STATEMENT 3

NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
ZACHARY BIRRER ONE WASHINGTON SQUARE SAN JOSE, CA 95192-0201	BOARD MEMBER 2.00	0.
SONJA DANIELS ONE WASHINGTON SQUARE SAN JOSE, CA 95192-0201	VP STUDENT AFFAIRS 2.00	0.
CHARLIE FAAS ONE WASHINGTON SQUARE SAN JOSE, CA 95192-0201	VP ADMINISTRATION & FINANC 2.00	0.

STUDENT UNION OF SAN JOSE STATE UNIVERSI

94-2830732

KATRINA FESTEJO ONE WASHINGTON SQUARE SAN JOSE, CA 95192-0201	BOARD MEMBER 2.00	0.
ROSE LEE ONE WASHINGTON SQUARE SAN JOSE, CA 95192-0201	BOARD MEMBER 2.00	0.
ARIADNA MANZO ONE WASHINGTON SQUARE SAN JOSE, CA 95192-0201	AS STUDENT/PRESIDENT 2.00	0.
ELLEN MIDDAUGH ONE WASHINGTON SQUARE SAN JOSE, CA 95192-0201	BOARD MEMBER 2.00	0.
JOSEPH SANDOVAL-RIOS ONE WASHINGTON SQUARE SAN JOSE, CA 95192-0201	BOARD MEMBER 2.00	0.
EMILY WUGHALTER ONE WASHINGTON SQUARE SAN JOSE, CA 95192-0201	BOARD MEMBER 2.00	0.
JEANNE TRANG ONE WASHINGTON SQUARE SAN JOSE, CA 95192-0201	BOARD MEMBER 2.00	0.
CATHY BUSALACCHI ONE WASHINGTON SQUARE SAN JOSE, CA 95192-0201	EXECUTIVE DIRECTOR 40.00	217,192.
TERRENCE L. GREGORY ONE WASHINGTON SQUARE SAN JOSE, CA 95192-0201	STUDENT UNION OPERATIONS A 40.00	0.
JOSEPH SCOTT BOKKER ONE WASHINGTON SQUARE SAN JOSE, CA 95192-0201	AD, RECREATION AND EVENT C 40.00	0.
CEDRIC J. WOOLFORK ONE WASHINGTON SQUARE SAN JOSE, CA 95192-0201	AD, ACCOUNTING AND FINANCE 40.00	0.



TOTAL TO FORM 199, PART II, LINE 11

217,192.

CA 199	OTHER EXPENSES	STATEMENT 4
DESCRIPTION		AMOUNT
EVENT COSTS		1,475,405.
REPAIRS & MAINTENANCE		786,461.
COMMUNICATIONS		199,845.
PROJECT EXPENDITURES		156,245.
PENSION PLAN CONTRIBUTIONS		201,237.
OTHER EMPLOYEE BENEFITS		1,310,133.
LEGAL FEES		7,410.
ACCOUNTING FEES		63,105.
INVESTMENT MANAGEMENT FEES		61,072.
OFFICE EXPENSES		397,712.
TRAVEL		22,420.
INSURANCE		191,634.
ALL OTHER EXPENSES		130,889.
TOTAL TO FORM 199, PART II, LINE 17		5,003,568.

CA 199	INVESTMENTS IN STOCK	STATEMENT 5
DESCRIPTION	BEG. OF YEAR	END OF YEAR
PUBLICLY TRADED SECURITIES	6,886,315.	7,220,271.
TOTAL TO FORM 199, SCHEDULE L, LINE 7	6,886,315.	7,220,271.

CA 199	OTHER ASSETS	STATEMENT 6
DESCRIPTION	BEG. OF YEAR	END OF YEAR
PREPAID EXPENSES AND DEFERRED CHARGES	89,782.	131,294.
FUNDS HELD IN TRUST	119,670.	66,186.
LETTER OF CREDIT	25,000.	25,000.
CONSTRUCTION IN PROGRESS	472,296.	634,713.
DEFERRED INFLOWS OF RESOURCES	243,796.	243,796.
TOTAL TO FORM 199, SCHEDULE L, LINE 12	950,544.	1,100,989.

CA 199	OTHER LIABILITIES	STATEMENT 7	
DESCRIPTION		BEG. OF YEAR	END OF YEAR
DEPOSITORY ACCOUNTS		119,670.	66,186.
OPEB LIABILITY		661,652.	876,658.
DEFERRED INFLOW OF RESOURCES		508,384.	477,686.
TOTAL TO FORM 199, SCHEDULE L, LINE 18		1,289,706.	1,420,530.

CA 199	INCOME RECORDED ON BOOKS THIS YEAR NOT INCLUDED IN THIS RETURN	STATEMENT 8
DESCRIPTION		AMOUNT
UNREALIZED GAIN		11,090.
TOTAL TO FORM 199, SCHEDULE M-1, LINE 7		11,090.

CA 199	FUND BALANCES	STATEMENT 9	
DESCRIPTION		BEG. OF YEAR	END OF YEAR
UNRESTRICTED ASSETS		10,308,520.	11,736,524.
TOTAL TO FORM 199, SCHEDULE L, LINE 21		10,308,520.	11,736,524.