#### \*\* PUBLIC DISCLOSURE COPY \*\*

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 black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

Open to Public Inspection

A	or the	a 2008 calendar year, or tax year beginning 00L 1, 2008 and	ل enaing	<u>UN 30, 200</u>	9					
В	Check if applicab	Please use IRS C Name of organization		D Employer ident	ification number					
Г	Addre									
	Name chang	type. Doing Business As		23-7062028						
	Initial return	See Number and street (or P.O. box if mail is not delivered to street address)	Room/suite							
	Termi ation	n- Specific 110 SOUTH MARKET STREET		408-271-6840						
	Amen return	ded tions. City or town, state or country, and ZIP + 4		G Gross receipts \$	5,787,232.					
	Application	I BAN OUSE, CA POLLO-2000		H(a) Is this a group	return					
	pendi	F Name and address of principal officer:SUSAN KRANE		for affiliates? Yes X No						
		SAME AS C ABOVE		H(b) Are all affiliates i	included? Yes No					
	Tax-ex	empt status: X 501(c) ( 3 ) ◀ (insert no.) 4947(a)(1) or 527	·	If "No," attach	a list. (see instructions)					
		te: ► WWW . SJMUSART . ORG		H(c) Group exempt						
		organization: X Corporation Trust Association Other	L Year	of formation: 1969	M State of legal domicile: CA					
P	art I	Summary								
ð	1	Briefly describe the organization's mission or most significant activities: <b>SJMA</b>								
Governance		AWARENESS OF THE CONTRIBUTION OF ART AND								
ern	2	Check this box if the organization discontinued its operations or dispose	sed of more		1					
Š	3				3 29					
<u>م</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)								
Activities &	5	Total number of employees (Part V, line 2a)								
Ξ	6	Total number of volunteers (estimate if necessary)								
Aci		Total gross unrelated business revenue from Part VIII, line 12, column (C)								
	b	Net unrelated business taxable income from Form 990-T, ine 34	·····							
	_	0 10 10 10 10 10 10 10 10 10 10 10 10 10	-	Prior Year	Current Year					
e	8	Contributions and grants (Part VIII, line 1h)	3,042,151							
Revenue	9	Program service revenue (Part VIII, line 2g)		<u>572,488</u>						
Re		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		532,298						
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		631,235						
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,778,172	4,074,000.					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)								
	14	Benefits paid to or for members (Part IX, column (A), line 4)	2,667,469	2 522 502						
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,007,409	2,522,503.					
)en	16a	Professional fundraising fees (Part IX, column (A), line 11e)								
X		Total fundraising expenses (Part IX, column (D), line 25) 553,85  Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		2,654,907	. 1,483,720.					
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,322,376						
	19	Revenue less expenses. Subtract line 18 from line 12		-544,204						
7.5	ß	rievende leas expenses, cubitast into 10 nom into 12		Beginning of Year	End of Year					
ets (	20	Total assets (Part X, line 16)		9,103,445						
Net Assets or	21	Total liabilities (Part X, line 26)		1,097,609						
Net	22	Net assets or fund balances. Subtract line 21 from line 20		8,005,836						
P	art II	Signature Block								
٠		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules an and complete. Declaration of preparer (other than officer) is based on all information of which preparer has a	d statements,	and to the best of my knowl	edge and belief, it is true, correct,					
		and complete. Declaration of preparer (other than officer) is based on all information of which preparer has a	any knowleage.							
Sig	n ·									
He		Signature of officer		Date						
		SUSAN KRANE, EXECUTIVE DIRECTOR								
		Type or print name and title								
De	i d	Preparer's Date	Ch sel		parer's identifying number instructions)					
Pai		signature LAWRENCE S. KUECHLER 02/03		,						
	eparer's e Only	yours if BERGER/LEWIS ACCOUNTANCY CORP.		EIN ►						
US	UIIIY	self-employed), address and 55 ALMADEN BLVD., STE 600								
		ZIP+4 SAN JOSE, CA 95113		Phone no.	(408) 494-1200					
Ma	y the	IRS discuss this return with the preparer shown above? (see instructions)			X Yes No					

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

(Expenses \$ including grants of \$

) (Revenue \$

4e Total program service expenses ▶ \$ 2,770,498. (Must equal Part IX, Line 25, column (B).)

Form 990 (2008)

		<b></b>	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	_X_	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	_X_	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> X</u>	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	X	
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 questions 24b-24d and complete Schedule K.	0.5		٦,
	If "No", go to question 25	24a		_X_
b		24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
4	any tax-exempt bonds?	24c		
		24d		
ZUd	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a	zoa		
D	prior year? If "Yes," complete Schedule L, Part I	OEF		v
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	25b		<u>X</u>
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	X	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial	20	Δ	
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		х
			000	

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		_X_
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part Vision 1997	37		Х

Form **990** (2008)

Form 990 (2008) SAN JOSE MUSEUM OF ART ASSOCIATION

Part V Statements Regarding Other IRS Filings and Tax Compliance

					Yes	No				
1a	Enter the number reported in Box 3 of Form 1096, Arnual Summary and Transmittal of				1.55					
	U.S. Information Returns. Enter -0- if not applicable	1a	74							
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0							
	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ble gaming							
	(gambling) winnings to prize winners?			1c						
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	104							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	rns?		2b	X					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	instru	ctions)							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by t	his return?	За	X					
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	X					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	author	ity over, a							
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		X				
b	b If "Yes," enter the name of the foreign country: ►									
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Peport of Foreign Bank and									
	Financial Accounts.									
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		<u> </u>				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			5b	ļ	X				
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	_	-							
	Tax Shelter Transaction?	•••••		5c		X				
	a Did the organization solicit any contributions that were not tax deductible?									
b	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts									
_	were not tax deductible?									
7										
	a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?									
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X					
	to file Form 8282?			7-		₩				
d			***************************************	7c		<u> X</u>				
	If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a property of the property of the pay premium of the property of the property of the pay premium of the pay premium of the property of the pay premium of the		al							
Ŭ	benefit contract?	3010011	CA1	7e		Х				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri	ract?	***************************************	7f		X				
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g						
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0			7 <u>9</u> 7h						
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec			•••						
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring or		` '' '							
	excess business holdings at any time during the year?			8						
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.									
а	Did the organization make any taxable distributions under section 4966?			9a						
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b						
10										
а	Initiation fees and capital contributions included on Part VIII, line 12	10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b								
11	Section 501(c)(12) organizations. Enter: N/A									
а	Gross income from members or shareholders	11a								
b	Gross income from other sources (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)	11b								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b								

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management						
			Yes	No			
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,						
	processes, or changes in Schedule O. See instructions.						
1a	Enter the number of voting members of the governing body	Ė					
b	Enter the number of voting members that are independent 1b 29						
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		X			
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		X			
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X			
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X			
6	Does the organization have members or stockholders?	6		X			
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	-					
1 a		7a		x			
h	governing body?  Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X			
_	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	70					
8							
	by the following:	0-	х				
	The governing body?	8a	X				
. b	Each committee with authority to act on behalf of the governing body?	8b	Δ	37			
9a	Does the organization have local chapters, branches, or affiliates?	9a		<u>X</u>			
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,		1				
	and branches to ensure their operations are consistent with those of the organization?	9b					
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	10	х				
	describe in Schedule O the process, if any, the organization uses to review the Form 990						
11							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		<u>X</u>			
Sec	tion B. Policies		r				
		r	Yes	<u>No</u>			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X				
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise						
	to conflicts?	12b	X				
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe						
	in Schedule O how this is done	12c	X				
13	Does the organization have a written whistleblower policy?	13	X				
14	Does the organization have a written document retention and destruction policy?	14	X				
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:						
а	The organization's CEO, Executive Director, or top management official?	15a	X				
b	Other officers or key employees of the organization?	15b	X				
	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?	16a		X			
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation						
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's						
	exempt status with respect to such arrangements?	16b					
Sec	tion 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 Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for					
	public inspection. Indicate how you make these available. Check all that apply.						
	X Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, as	nd fina	ncial				
	statements available to the public.						
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organizar	tion: 🖿	•				
	BRIAN SPANG - (408)271-6873						
	110 SOUTH MARKET STREET, SAN JOSE, CA 95113-2383						
82200							

832006 12-18-08 Form **990** (2008)

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

Check this box if the organization did not compensate any officer, director, trustee, or key employee

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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, and 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 the organization did not co	ompensate an	y of	ficer	, dir	ecto	or, tri	uste	ee, or key employee.		
(A) (B)				(0	C)			(D)	(E)	(F)
Name and Title	Average			Posi				Reportable	Reportable	Estimated
	hours	(c	hecl	k all	that	app	ly)	compensation	compensation	amount of
	per week	흥						from the	from related organizations	other compensation
	Week	ig i				ted		organization	(W-2/1099-MISC)	from the
		stee	truste		۵.	bensa		(W-2/1099-MISC)	(** =: / 500 /50)	organization
		lal tru	onal	l	ploye	t com	.			and related
		ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	ormer			organizations
DIETO I IDVIII		F	=	-	_	= 5	E			
PETER LIPMAN PRESIDENT	5.00	v		x				0.	0.	0.
STEVE SPENO	3.00	^	+-	<u>^</u>		<del> </del>	$\vdash$			<u> </u>
VICE PRESIDENT	2.50	<u>v</u>		x				0.	0.	0.
WILLIAM FAULKNER	2.50			122		<del>                                     </del>			<u></u>	<u> </u>
SECRETARY	2.50	x		x				0.	0.	0.
ANNEKE DURY			1			<u> </u>	T			
CHIEF FINANCIAL OFFICER	2.50	x		X				0.	0.	0.
DORIS BURGESS	, .	1				ļ.				
TRUSTEE	0.50	X						0.	0.	0.
MICHAEL COLE						Π	Γ			
TRUSTEE	0.50	X	L	L.	<u> </u>			0.	0.	0.
PETER CROSS										
TRUSTEE	0.50	X	<u> </u>		<u> </u>		ļ	0.	0.	0.
RUSSELL DAULTON	·			İ						•
TRUSTEE	0.50	X	ļ				<u> </u>	0.	0.	0.
S.K. GUPTA				-						_
TRUSTEE	0.50	X	┼		<del> </del>		-	0.	0.	0.
MARIE OH HUBER										
TRUSTEE	0.50	X	┼	<del> </del>	<del> </del>	├	╂	0.	0.	0.
MARILYN KATZ	0.50									
TRUSTEE	0.50	X	┼	┼	-	-	├-	0.	0.	0.
WENDY KIRST	0.50		İ							
TRUSTEE	0.50	<u>^</u>	ļ	ļ	-	-	-	0.	0.	0.
MICHELE KLEIN	0.50	7.						0.		
TRUSTEE	0.50	┼≏	<del> </del> ·	┼	<del> </del>	┼	╁	V.	0.	0.
KAREN LANTZ	0.50							0.	0.	_
TRUSTEE HEATHER STALLINGS LITTLE	0.50	1	+	┼─		╂	+-	<b>U.</b>	U •	0.
TRUSTEE	0.50	\ v						0.	0.	0.
MARY MOCAS	0.30	┼^	+-	+	<del> </del>	$\vdash$	$\vdash$	<u> </u>	0.	<u> </u>
TRUSTEE	0.50	x						0.	0.	0.
EVELYN NEELY	0.50	<u></u>	T	T		1	T			<u> </u>
TRUSTEE	0.50	x						0.	0.	0.
22007 40 49 09				-4						Form <b>990</b> (2008)

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Form **990** (2008)

Part VII   Section A. Officers, Directors, Tr									<u> </u>	UZ8 Page 6
(A)	(B)		(C)					(D)	(E)	(F)
Name and title	Average hours per week	ndividual trustee or director		Posi all	tion that	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related
		Indivi	Instit	Officer	Key e	Highe	Form			organizations
T. MICHAEL NEVENS TRUSTEE	0.50	x						0.	0.	0.
BARBARA OSHMAN TRUSTEE	0.50	x						0.	0.	0.
CHARLES PARCHMENT TRUSTEE	0.50	х						0.	0.	0.
CAROL PARKER TRUSTEE	0.50	x				ļ .		0.	0.	0.
DEBORAH RAPPAPORT TRUSTEE	0.50	x						0.	0.	0.
MARTIN ROBINSON TRUSTEE	0.50	x						0.	0.	0.
SARAH RATCHYE TRUSTEE	2.50	x					-	0.	0.	0.
BYRON RYONO TRUSTEE	0.50	x						0.	0.	0.
HILDY SHANDELL TRUSTEE	0.50	x						0.	0.	0.
JOAN SHARROCK TRUSTEE	0.50							0.	0.	0.
1b Total			L			<b>&gt;</b>		459,615.	0.	55,361.
2 Total number of individuals (including thos compensation from the organization	e in 1a) who re	ceiv	ed n	nore 	tha	n \$1	00,	000 in reportable	<b>&gt;</b>	2
3 Did the organization list any former officer	, director or tru	ıstee	, ke	y em	plo	yee,	or l	nighest compensated er	nployee on	Yes No

	compensation from the organization	>		2
			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		X
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	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to	-		
	the organization? If "Yes," complete Schedule J for such person	5		X
~	" Bill A A A A A A A A A A A A A A A A A A			

#### Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from

the organization.		•
(A) Name and business address	(B) Description of services	(C) Compensation
US SECURITY ASSOCIATES PO BOX 931703, ATLANTA, GA 31193	SECURITY SERVICES	188,373
2 Total number of independent contractors (including those in 1) who received mo	ore than \$100,000 in compensation	

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Form **990** (2008)

from the organization

36,467.

31,071

67,538

**▶** 4,074,000.

**Business Code** 

722210

713990

832009 02-02-09

11 a <u>CAFE INCOME</u> b MISC REVENUE

Miscellaneous Revenue

d All other revenue

e Total. Add lines 11a-11d

Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e

31,071

462,211

36,467.

26,512.

Form 990 (2008)

8,994.

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	not include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				ы. — I
2	Grants and other assistance to individuals in			·	
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	388,904.	143,920.	132,737.	112,247
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,746,139.	1,321,341.	235,032.	189,766
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	81,728.	60,782.	13,610.	7,336
9	Other employee benefits	187,718.	136,170.	25,638.	25,910
10	Payroll taxes	118,014.	81,582.	19,977.	16,455
11	Fees for services (non-employees):				
а	Management				
b	Legal	7,206.	95.	7,111.	
C	Accounting	49,213.		49,213.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				*
· g	Other	195,212.	84,407.	48,460.	62,345
12	Advertising and promotion	82,664.	75,099.	1,082.	6,483
13	Office expenses	189,663.	41,804.	69,053.	78,806
14	Information technology	10,000.	6,000.	2,000.	2,000
15	Royalties				
16	Occupancy	6,413.	3,271.	1,667.	1,475
17	Travel	40,251.	9,608.	26,353.	4,290
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	19,751.	1,615.	1,359.	16,777
20	Interest	6,415.		6,415.	
21	Payments to affiliates				· · · · · · · · · · · · · · · · · · ·
22	Depreciation, depletion, and amortization	56,229.	50,607.	2,811.	2,811
23	Insurance	35,708.	20,503.	15,205.	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	SECURITY	322,993.	317,912.		5,081
b	SHIPPING AND STORAGE	159,416.	154,447.	4,908.	61.
c	PURCHASED ART COLLECTIO	94,000.	94,000.		<u> </u>
d	EXHIBITION COST	71,209.	71,209.		
e	MATERIALS	68,462.	59,137.	9,325.	
f	All other expenses	68,915.	36,989.	9,879.	22,047
25	Total functional expenses. Add lines 1 through 24f	4,006,223.	2,770,498.	681,835.	553,890
26	Joint Costs. Check here ▶ ☐ if following				222,030
<del>-</del>	SOP 98-2. Complete this line only if the organization				,
	reported in column (B) joint costs from a combined				
	Tedol (ed ii) Column (b) ionii costs ironi a cominnen - i				

832010 12-18-08

Form **990** (2008)

L			<b>(A)</b> Beginning of year		(B) End of year				
	1	Cash - non-interest-bearing	7,400.	1	48,891.				
	, 2	Savings and temporary cash investments	485,478.	2	2,318,261.				
	3	Pledges and grants receivable, net	919,000.	3	1,248,508.				
	4	Accounts receivable, net	840.	4	15,612.				
	5	Receivables from current and former officers, directors, trustees, key	040.	4	15,014.				
	3	employees, or other related parties. Complete Part II of Schedule L	21,603.	5	18,490.				
	6	Receivables from other disqualified persons (as defined under section	21,000.	5	10,430.				
	"	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete							
<b>/</b> 0	7	Part II of Schedule L		6					
Assets	7	Notes and loans receivable, net	136,223.	7	120,240.				
As	8	Inventories for sale or use Prepaid expenses and deferred charges	130,443.	8	38,849.				
	9			9	30,049.				
	10a								
	b	Part VI of Schedule D	228,240.	40-	224 070				
			33,060.		234,078. 3,454,507.				
	11	Investments - publicly traded securities Investments - other securities. See Part IV, line 11	142,398.	11	3,434,307.				
	12	Investments - other securities. See Part IV, line 11	144,390.	12					
	13			13					
	14	Intangible assets	7,129,203.	14	930,117.				
	15	Other assets. See Part IV, line 11	9,103,445.	15					
	16	Total assets. Add lines 1 through 15 (must equal line 34)	462,064.	16	8,427,553. 370,138.				
	17	Accounts payable and accrued expenses	404,004.	17	3/0,138.				
	18	Grants payable	1/1 (05	18	אר דר <u>י</u>				
Liabilities	19	Deferred revenue	141,695.	19	35,562.				
	20	Tax-exempt bond liabilities		20					
	21	Escrow account liability. Complete Part IV of Schedule D		21					
	22	Payables to current and former officers, directors, trustees, key employees,							
Ľ.		highest compensated employees, and disqualified persons. Complete Part II							
		of Schedule L	402.050	22	201 200				
	23	Secured mortgages and notes payable to unrelated third parties	493,850.	23	381,322.				
	24	Unsecured notes and loans payable		24	100,000.				
	25	Other liabilities. Complete Part X of Schedule D	1 007 600	25	007 000				
	26	Total liabilities. Add lines 17 through 25	1,097,609.	26	887,022.				
		Organizations that follow SFAS 117, check here							
ces		lines 27 through 29, and lines 33 and 34.	E0C 011		444 011				
a	27	Unrestricted net assets	506,911.	1	<u>-444,911.</u>				
Ва	28	Temporarily restricted net assets	180,399.	28	666,916.				
pur	29	Permanently restricted net assets	7,318,526.	29	7,318,526.				
ᆫ		Organizations that do not follow SFAS 117, check here and							
Net Assets or Fund Balanc	00	complete lines 30 through 34.							
set	30	Capital stock or trust principal, or current funds		30	T-15-10-11-11-11-11-11-11-11-11-11-11-11-11-				
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	***************************************				
Net	32	Retained earnings, endowment, accumulated income, or other funds	0 005 036	32	7 F40 F24				
	33	Total net assets or fund balances	8,005,836.	33	7,540,531.				
Da	<u>34</u>  rt XI	Total liabilities and net assets/fund balances	9,103,445.	34	8,427,553.				
Га	ILAI	Financial Statements and Reporting	***************************************		Yes No				
_			٦		165 140				
1		ounting method used to prepare the Form 990: L Cash X Accrual L	Other						
2a		e the organization's financial statements compiled or reviewed by an independent							
b		e the organization's financial statements audited by an independent accountant?							
С	c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,								
_		ew, or compilation of its financial statements and selection of an independent account							
За		result of a federal award, was the organization required to undergo an audit or aud							
_		and OMB Circular A-133?							
		es," did the organization undergo the required audit or audits?							
83201	11 12-18	B-08			Form <b>990</b> (2008)				

#### **SCHEDULE A**

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

## **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No. 1545-0047

2008

Open to Public Inspection

Employer identification number

			E MUSEUM OF							-7062	028	
Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st complet	te this par	t.) (see ins	tructions)				
1	anization is not a private foundation because it is: (Please check only <b>one</b> organization.)  A church, convention of churches, or association of churches described in <b>section 170(b)(1)(A)(i)</b> .  A school described in <b>section 170(b)(1)(A)(ii)</b> . (Attach Schedule E.)  A hospital or a cooperative hospital service organization described in <b>section 170(b)(1)(A)(iii)</b> . (Attach Schedule H.)  A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii)</b> . 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.)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
f g	If the organiz supporting o Since Augus	cation received a writ rganization, check th t 17, 2006, has the c	ten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III owing per	sons?		Yes	No
h	the gove (ii) A family (iii) A 35% o	erning body of the so member of a persor controlled entity of a	upported organization? In described in (i) above? In person described in (i) above in (i) above in (i) above in (i) about the organizations	or (ii) above	e?			••••••		11g(ii)		
	of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col. (i) lis governing	sted in your document?	organizat	(i) of your support?		s the on in col. zed in the i.?		(vii) Amount of support	
			(ooo moduuma))					Yes	1.10			
	hida-sid	THE STREET STREET										
	***************************************											
Total											•	

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2008

Schedule A (Form 990 or 990-EZ) 2008 SAN JOSE MUSEUM OF ART ASSOCIATION 23-7062028 Page 2

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Sec	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	4565332.	4226621.	4279392.	3299778.	<u>3576283.</u>	19947406.
2	Tax revenues levied for the organ-						-
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	1404000.		2574000.			9313201.
4	Total. Add lines 1 - 3	5969332.	5864621.	6853392.	5358978.	<u>5214284.</u>	29260607.
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,	*		4 at			
	column (f)						2450793.
	Public Support. Subtract line 5 from line 4.						26809814.
	ction B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Amounts from line 4	5969332.	5864621.	6853392.	5358978.	5214284.	29260607.
1.8	Gross income from interest,	·		4, 4, 21, 37, 41, 2, 31			
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	397,436.	509,837.	635,702.	578,577.	363,197.	2484749.
9.	Net income from unrelated business	,				,	
	activities, whether or not the				·		
	business is regularly carried on	-1,740.	-1,716.	-467.	5,711.	8,994.	10,782.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)	9,361.	53,393.	92,898.	133,849.		325,968.
11	<b>Total support.</b> Add lines 7 through 10						32082106.
	Gross receipts from related activities,	•					<u>,949,572.</u>
13	First five years. If the Form 990 is for	-			•	, , , ,	
	organization, check this box and stor	here					<u></u> ▶∟⊥
	ction C. Computation of Publ					I	
	Public support percentage for 2008 (					14	83.57 %
	Public support percentage from 2007					15	82.21 %
16a	a 33 1/3% support test - 2008. If the c	-				-	
	stop here. The organization qualifies						
t	o 33 1/3% support test - 2007. If the c						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac					_	
	meets the "facts-and-circumstances"						
k	10% -facts-and-circumstances tes					•	
	more, and if the organization meets the		·				e
	organization meets the "facts-and-circ						
<u>18</u>	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 160, 17a, or 17b			
					Sche	equie A (Form 990	or 990-EZ) 2008

Part III   Support Schedule for C	<u>)rganizations</u>	Described in S	Section 509(a	a)(2) (Complete only	if you checked the b	ox on line 9 of Part I.)
Section A. Public Support				<del></del>	·	1
Calendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(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 per- formed, or facilities furnished in						/
any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that						,
are not an unrelated trade or bus-						,
iness under section 513		,				
4 Tax revenues levied for the organ-						
ization's benefit and either paid to	•					
or expended on its behalf	<u></u>					
5 The value of services or facilities						
furnished by a governmental unit to the organization without charge		,				
6 Total. Add lines 1 - 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons  b Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of 1% of the total of lines 9,						
10c, 11, and 12 for the year or \$5,000						
•						
8 Public support (Subtract line 7c from line 6.) Section B. Total Support		1	<del> </del>	<u> </u>	1	
Calendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	(a) 2004	(b) 2000	(0) 2000	(u) 2001	(e) 2000	(I) Total
10a Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b, whether or not the business is						
regularly carried on						
12 Other income. Do not include gain						
or loss from the sale of capital assets (Explain in Part IV.)	<u>.</u>					
13 Total support (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for	the organization'	's first, second, third	d, fourth, or fifth t	tax year as a secti	on 501(c)(3) organi	zation,
check this box and stop here						<b>&gt;</b>
Section C. Computation of Publi	ic Support Pe	ercentage				
15 Public support percentage for 2008 (	ine 8, column (f) c	divided by line 13, c	olumn (f))		15	%
16 Public support percentage from 2007	Schedule A, Parl	t IV-A, line 27g		***************************************	16	%
Section D. Computation of Inves	stment Incom	ne Percentage				
17 Investment income percentage for 20	<b>08</b> (line 10c, colu	mn (f) divided by lin	e 13, column (f))		17	%
18 Investment income percentage from 2					18	%
19a 33 1/3% support tests - 2008. If the	organization did ı	not check the box o	on line 14, and lin	e 15 is more than	33 1/3%, and line	17 is not
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2007. If the	organization did ı	not check a box on	line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, che	ck this box and s	top here. The orga	nization qualifies	as a publicly supp	oorted organization	▶□
20 Private foundation. If the organizatio	n did not check a	a box on line 14, 19a	a, or 19b, check t	this box and see in	structions	<b>&gt;</b>
				90	hedule A /Form 90	20 or 990-F7) 2008

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

**Schedule of Contributors** 

➤ Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

2008

**Employer identification number** 

SZ	AN JOSE MUSEUM OF ART ASSOCIATION	23-7062028
Organization type (check of	one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundate	ition
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	is covered by the <b>General Rule</b> or a <b>Special Rule</b> . ( <b>Note.</b> Only a section 501(and a Special Rule. See instructions.)	c)(7), (8), or (10) organization can check boxes
General Rule		
For organizations contributor. Comp	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or molete Parts I and II.	ore (in money or property) from any one
Special Rules		·
509(a)(1)/170(b)(1)	(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% supplic(A)(vi), and received from any one contributor, during the year, a contribution 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, ine 1. Complete P	of the greater of (1) \$5,000 or (2) 2% of the
aggregate contrib	(c)(7), (8), or (10) organization filing Form 990, or Form 990 EZ, that received froutions or bequests of more than \$1,000 for use exclusively for religious, charibrevention of cruelty to children or animals. Complete Parts I, II, and III.	
some contribution \$1,000. (If this box etc., purpose. Do	(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from the exclusively for religious, charitable, etc., purposes, but these contributions that were received during the young not complete any of the parts unless the <b>General Rule</b> applies to this organizate, etc., contributions of \$5,000 or more during the year.)	utions did not aggregate to more than rear for an exclusively religious, charitable, ation because it received nonexclusively
they must answer "No" on	at are not covered by the General Rule and/or the Special Rules do not file Sc Part IV, line 2 of their Form 990, or check the box in the heading of their Form at the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	
LHA For Privacy Act and	Paperwork Reduction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

for Form 990. These instructions will be issued separately.

Employer identification number

#### SAN JOSE MUSEUM OF ART ASSOCIATION

23-7062028

(b) Name, address, and ZIP + 4	(c)	(d)
Name, address, and ZIF + 4		
	\$ 90,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	\$ 864,785.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
·	\$ 250,000.	Person X Payroll
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
·	\$ 367,499.	Person X Payroll  Noncash  (Complete Part II if there is a noncash contribution.)
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	\$ 155,000.	Person X Payroll
	(b) Name, address, and ZIP + 4  (b) Name, address, and ZIP + 4  (b) Name, address, and ZIP + 4  (b) Name, address, and ZIP + 4	\$ 90,000.    Same, address, and ZIP + 4   Aggregate contributions

vi vergen s

Employer identification number

#### SAN JOSE MUSEUM OF ART ASSOCIATION

23-7062028

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>.</u> 7		\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8		\$150,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)

#### Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

Employer identification number

D-	SAN JOSE MUSEUM OF		23-7062028
Par			or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate 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 advise	ed funds
	are the organization's property, subject to the organization's	<del>-</del>	
6	Did the organization inform all grantees, donors, and donor a		
·	for charitable purposes and not for the benefit of the donor of		
Pai			
1	Purpose(s) of conservation easements held by the organizati		ativ, mer.
•	Preservation of land for public use (e.g., recreation or p		torically important land area
	Protection of natural habitat	·	torically important land area
		Preservation of certifie	ed historic structure
	Preservation of open space	and the second s	
2	Complete lines 2a-2d if the organization held a qualified cons	ervation contribution in the form of a cons	ervation easement on the last day
	of the tax year.		
	Tatal annual and a second second		Held at the End of the Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified historic str		
d	Number of conservation easements included in (c) acquired a		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	organization during the taxable
_	year -		
4	Number of states where property subject to conservation ear		
5	Does the organization have a written policy regarding the per		
_	enforcement of the conservation easements it holds?		
6	Staff or volunteer hours devoted to monitoring, inspecting, at		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	· · · · · · · · · · · · · · · · · · ·	
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organizat	tion's financial statements that describes t	ne organization's accounting for
Pai	conservation easements. t III   Organizations Maintaining Collections or	f Art Historical Treasures or Of	hor Similar Assata
	Complete if the organization answered "Yes" to Form	•	niei Onimai Assets.
	Complete it the organization anomored 100 to 1011	300,1 4111, 1110 0.	
15	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and ha	lange about works of out historical
Iu	treasures, or other similar assets held for public exhibition, ed		
	the footnote to its financial statements that describes these i		inc service, provide, in Part XIV, the text of
b	If the organization elected, as permitted under SFAS 116, to		an about works of out bistorical tons and
D			
	or other similar assets held for public exhibition, education, othese items:	r research in furtherance of public service,	provide the following amounts relating to
			<b>.</b>
	(i) Revenues included in Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical tree		gain, provide
_	the following amounts required to be reported under SFAS 1		F 604
a	Revenues included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		🕨 💲

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2008

Schedule D (Form 990) 2008

67,488.

78,884.

87,706.

234,078.

545,822

666,884.

263,512.

e Other

c Leasehold improvements

d Equipment

Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)

613,310.

745,768.

351,218.

832053 12-23-08

	dule D (Form 990) 2008 SAN JOSE MUSEUM OF ART ASSO	CIA'	<u> </u>		<u>23-</u>	<u>7062028</u>	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to F			ements	}		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1		4,074	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		4,006	,223.
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3		67	,777.
4	Net unrealized gains (losses) on investments			4		-533	,082.
5	Donated services and use of facilities			5			
6	Investment expenses			6		****	
7	Prior period adjustments			7			
8	Other (Describe in Part XIV)			8			
9	Total adjustments (net). Add lines 4-8			9		-533	082.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10		-465	305.
	t XII Reconciliation of Revenue per Audited Financial Statemen				Retur		, 303.
1	Total revenue, gains, and other support per audited financial statements	·				6,317	634
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				··  '-	0,311	, 034.
-	· · · · · · · · · · · · · · · · · · ·	0-					
a	Net unrealized gains on investments	2a	1 01	2,154	1		
b	Donated services and use of facilities	2b	1,71	<u>4,134</u>	<u>* •  </u>		
C	Recoveries of prior year grants	2c	4 4	0 225	_		
d	Other (Describe in Part XIV)	2d		2,335		0 004	400
е						2,024	
3	Subtract line 2e from line 1				3	4,293	,145.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b		***************************************				
b	Other (Describe in Part XIV)	4b	-21	<u>9,145</u>	5.		
С	Add lines 4a and 4b					-219	
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)				5	4,074	000.
Pa	t XIII Reconciliation of Expenses per Audited Financial Statemer	nts W	/ith Expe	nses p	er Retu	rn	
1	Total expenses and losses per audited financial statements				. 1	6,782	939.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:						
а	Donated services and use of facilities	2a	1,91	2,154	1.		
b	Prior year adjustments	2b					
c	Losses reported on Form 990, Part IX, line 25	2c					
d		2d	86	4,562	2.		
e	Add lines 2a through 2d					2,776	716
3	Subtract line 2e from line 1					4,006	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		• • • • • • • • • • • • • • • • • • • •		3	=,000	, 223.
-	Investment expenses not included on Form 990, Part VIII, line 7b	4-					
a	i de la companya de la companya de la companya de la companya de la companya de la companya de la companya de	4a 4b			i		
D	Other (Describe in Part XIV)			· · · · · · · · · · · · · · · · · · ·	_		^
_	Add lines 4a and 4b		•••••	•••••	4c	4 000	0.
	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	•••••			5	4,006	. 443.
	rt XIV Supplemental Information						
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,	lines 1	a and 4; Pa	rt IV, lines	s 1b and	2b; Part V, line	4; Part
	art XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.						
PAI	RT III, LINE 1A: PERMANENT ART COLLECTION -	THI	в СОГГ	ECTIC	ON CO	<u>NSISTS (</u>	)F
TW.	INTIETH AND TWENTY-FIRST CENTURY ARTWORK, II	NCL	JDING :	PAINT	<u> </u>		
SCI	JLPTURES, INSTALLATIONS, NEW MEDIA, PHOTOGRA	APH:	Y, DRA	WINGS	S AND	PRINTS	
AC	QUIRED THROUGH PURCHASE OR CONTRIBUTION. TH	E C	OLLECT	ION I	IS NO	T	
-							
RE	COGNIZED AS AN ASSET IN THE STATEMENT OF FI	NAN	CIAL P	OSITI	ON.	EACH WOF	RK
OF	ART IS INVENTORIED AND CARED FOR, AND ACTIV	יידע	TES VE	RTFYT	יות אור	ян	
מחז	LLECTION'S INTEGRITY ARE PERFORMED CONTINUO	7.T2T	יסדוס .	СНУСЕ	로	בסג ייקג	7.
<u> </u>	THE CITOR O THIRDILLI AND LEWICHED CONTINUOU	UUL.	· · FOW	CITUDE	JU OF	TILL TILL	4
ישק	CORDED AS NON-OPERATING DECREASES IN THE UNI	Bhai	րք T Հաբ.	חיבונא כו	י אפפ	рте ти п	ינוני
<u>1717/</u>	ON THE ORGANIZED THE THE UNITED TO THE THE UNITED TO HOM OF THE OWN	. כינונו	<u> </u>	ר דואד רי		***************************************	
83205	4				эспес	lule D (Form 9	au) 2008

YEAR IN WHICH ITEMS ARE ACQUIRED. CONTRIBUTED COLLECTION ITEMS ARE NOT

REFLECTED IN THE FINANCIAL STATEMENTS. PROCEEDS FROM ANY DEACCESSIONS OR

INSURANCE RECOVERIES ARE REQUIRED TO BE USED TO ACQUIRE OTHER WORKS OF

ART.

PART III, LINE 4: THE MUSEUM'S PERMANENT COLLECTION IS A VALUABLE RESOURCE AND LEGACY FOR THE COMMUNITY. THE COLLECTION OF ABOUT 2000 WORKS INCLUDES PRIMARILY AMERICAN ART OF THE POST-WORLD WAR II PERIOD, WITH AN EMPHASIS ON CONTEMPORARY ART AND WEST COAST ART. RECENT EFFORTS FOCUS ON INCREASING HOLDINGS OF NEW MEDIA, CERAMIC SCULPTURES, ARTISTS FROM PACIFIC RIM CULTURES, AND INCREASING CULTURAL AND GENDER DIVERSITY. CURRENT TRENGTHS OF THE COLLECTION ARE SECOND-GENERATION MINIMALISM, PHOTOGRAPHY, TRADITIONALIST REPRESENTIONAL PAINTING; AND EMERGING CALIFORNIA ARTISTS. IN ADDITION, AS PART OF A COMMITMENT TO FOSTERING AWARENESS OF ARTISTS' BROAD CONTRIBUTIONS TO SOCIETY, THE MUSEUM COLLECTS ARTWORKS THAT IT DEEMS HISTORICALLY IMPORTANT. SPECIFICALLY, THE MUSEUM HAS BUILT A COLLECTION THAT DOCUMENTS TRENDS IN CALIFORNIA ART THAT ARE NOT TO BE FOUND IN OTHER INSTITUTIONS, HELPING TO KEEP THE HISTORY ALIVE THROUGH PRESERVING THE ART OF OUR TIME. THE MUSEUM ALSO COMMISSIONS NEW WORKS BY LIVING ARTISTS THAT SERVE TO CONNECT OUR VISITORS WITH THE VITALITY OF THE CREATIVE PROCESS. STELLAR WORKS FROM THE PERMANENT COLLECTION ARE REGULARLY SHOWCASED IN THE GALLERIES IN TIMELY, THEMATIC CONTEXTS THAT ADDRESS PIVOTAL APSECTS OF ART HISTORY, CULTURAL CONCERNS, AND PUBLIC INTERESTS. THE COLLECTION IS DISCUSSED FURTHER IN SCHEDULE O.

PART V, LINE 4: GENERAL OPERATING FUNDS IN SUPPORT OF THE MUSEUM'S MISSION AS DIRECTED BY THE DONORS.

Schedule D (Form 990) 2008

IN ACCORDANCE WITH THIS PROVISION, THE MUSEUM ELECTED TO DEFER THE

APPLICATION OF FIN 48. BASED ON MANAGEMENT'S ANALYSIS OF THE MUSEUM'S TAX

POSITIONS, THE ACCOUNTING FOR ANY UNCERTAINTY IN ITS TAX

Schedule D (Form 990) 2008

Schedule D (Form 9 Part XIV Supp	990) 2	008 ontal l	SAN J	OSE	MUSE	<u>JM</u>	OF ART .	ASSOCIAT	ION		23-7062028	Page 5
Ture XIV Supp	JICIII	entai i	mormation (co	onunu	ea)							
POSITIONS	IS	NOT	EXPECTED	TO	HAVE	A	MATERIA	L IMPACT	ON	THE	FINANCIAL	
STATEMENTS	2		,									
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#### Schedule F (Form 990)

### **Statement of Activities Outside the United States**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, line 15, or line 16.

Inspection

Name of the organization					Employer identifi	ication number
SAN JOSE MUSEUM	OF ART	ASSOCIAT	ION		23-706202	·  8
Part I General Info	rmation on A		tside the United States. Comp	lete if the orgar	nization answered "	Yes"
to Form 990, Pa						
			ds to substantiate the amount of the g			[]
grantees' eligibility for ti	ne grants or assi	stance, and the	selection criteria used to award the gr	ants or assistai	nce?	Yes L No
2 For grantmakers. Desc	cribe in Part IV th	e organization's	procedures for monitoring the use of	arant funds out	side the United Sta	tos
E 1 of grantmakers, book	71.50 III	o organization o	procedures for monitoring the dec of	grant rando ou	Side the officer of	
3 Activities per Region. (L	Jse Schedule F-1	(Form 990) if ad	lditional space is needed.)	•		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	is a pro describe	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures in region
				THERE WAS A	LOAN OF ART	
				WORK TO A M		
EUROPE (INCLUDING		,		DENMARK FOR		
ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	\$18,000. A	FTER A \$20	0.
						-
***************************************	·					
·						
MARKATAR PARA PARA PARA PARA PARA PARA PARA						
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			٠.			
Totals				:		
			<del> </del>			L.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

SEE PART IV FOR COLUMN (E) DESCRIPTIONS

832071 12-18-08

Schedule F (Form 990) 2008

		-	Outside the United States. Co o one recipient received more					_ 1 1
1	1 (Form 990) if additi	onal space is needed.	(d) Purpose of	(e) Amount	(f) Manner of	(g) Amount of	(h) Description	(i) Method of
(a) Name of organization	and EIN (if applicable)	(c) Region	grant		cash disbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
							A. 31/A. (1997)	
						·		
			·					
								-
section 501(c)(3) equi	ivalency letter		s by the foreign country or for	· · · · · · · · · · · · · · · · · · ·		<b>&gt;</b> _		
3 Enter total number of	other organizations	or entities				<b>&gt;</b>	Cabad	ulo E (Earm 000) 2009

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
·							
·							
				,			
							·
·							
							·
						Sahadi	le F (Form 990) 2008

Part IV Supplemental Information  Complete this part to provide the information required by Part I, line 2, and any other additional information.
PART I, LINE 3, COLUMN (E):
REGION: EUROPE (INCLUDING ICELAND & GREENLAND)
(E) SPECIFIC TYPES OF SERVICES IN REGION: THERE WAS A LOAN OF ART WORK
TO A MUSEUM IN DENMARK FOR A FEE OF \$18,000. AFTER A \$20 BANK FEE, SJMA
RECEIVED \$17,980 ON OCT 14, 2008.
THERE WERE NO EXPENDITURES. THE BORROWING INSTITUTION COVERED ALL
EXPENSES ASSOCIATED WITH THE LOAN.
·
·

#### **SCHEDULE G**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

# **Supplemental Information Regarding Fundraising or Gaming Activities**

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

2008

Open To Public Inspection

	E MUSEUM OF ART AS				23-7062	028
	Complete if the organization answer					
<ul> <li>1 Indicate whether the organization rais a Mail solicitations</li> <li>b Email solicitations</li> <li>c Phone solicitations</li> <li>d In-person solicitations</li> <li>2 a Did the organization have a written of key employees listed in Form 990, P</li> <li>b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the</li> </ul>	e Solicitat f Solicitat g Special or oral agreement with any individual eart VII) or entity in connection with p viduals or entities (fundraisers) purs	ion of ion of fundra (includation) rofess uant to	non-g gover aising ding o ional f agree	overnment grants nment grants events fficers, directors, tru fundraising services? ements under which	stees or Yes the fundraiser is to	
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or con contrib	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
	•					
			***************************************			
Total	<b>&gt;</b>					
3 List all states in which the organizatio	n is registered or licensed to solicit f	unds	or has	been notified it is ex	empt from registrati	on or licensing.
<u> </u>						

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule G (Form 990 or 990-EZ) 2008

23-7062028 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other Events (d) Total Events MUSEUM STORE NONE (Add col. (a) through GUILD 2009 col. (c)) (total number) (event type) (event type) Revenue 23,112. 23,112. 1 Gross receipts 395 395. 2 Less: Charitable contributions 22,717. 22,717. Gross revenue (line 1 minus line 2) ...... 4 Cash prizes Non-cash prizes Expenses 6 Rent/facility costs Direct 19,591 19,591. 7 Other direct expenses Direct expense summary. Add lines 4 through 7 in column (d) 19,591.) Net income summary. Combine lines 3 and 8 in column (d) 3,126. Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, ine 6a. (b) Pull tabs/Instant (d) Total gaming (Add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Non-cash prizes Rent/facility costs Other direct expenses Yes Yes Yes Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine lines 1 and 7 in column (d) Yes No 9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? b If "No," Explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," Explain: 11 Does the organization operate gaming activities with nonmembers? 11 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to

administer charitable gaming?

Schedule G (Form 990 or 990-EZ) 2008 SAN JOSE MUSEUM OF ART ASSOCIATION 23	-706	202	8 Pa	age 3
			Yes	No
13 Indicate the percentage of gaming activity operated in:				
a The organization's facility	%			
b An outside facility13b	%			
14 Provide the name and address of the person who prepares the organization's gaming/special events books and records	s:			
Name				
		-		
Address				
			-	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		15a		
b If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount				
of gaming revenue retained by the third party ▶\$				
c If "Yes," enter name and address:				
Name				
Address				
16 Gaming manager information:				
Name &				
Name				
Gaming manager compensation > \$			:	
Garning manager compensation    5				
Description of services provided	ļ			
Description of services provided -				
	<del></del>			
Director/officer Employee Independent contractor				
bilector/officer Employee independent contractor				
17 Mandatory distributions:				
a Is the organization required under state law to make charitable distributions from the gaming proceeds to				
retain the state gaming license?		17a		
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the			***************************************	
organization's own exempt activities during the tax year > \$				

#### SCHEDULE J (Form 990)

#### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury

Part I

Name of the organization

➤ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

**Employer identification number** SAN JOSE MUSEUM OF ART ASSOCIATION 23-7062028

**Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. X Housing allowance or residence for personal use First-class or charter travel Payments for business use of personal residence Travel for companions Health or social club dues or initiation fees Tax indemnification and gross-up payments Personal services (e.g., maid, chauffeur, chef) Discretionary spending account b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain X 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, X trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. X Written employment contract Compensation committee X Compensation survey or study Independent compensation consultant X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a: a Receive a severance payment or change of control payment? 4a b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8. 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: X a The organization? 5a **b** Any related organization? If "Yes," to line 5a or 5b, describe in Part III. 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a a The organization? b Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III. 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments 7 X not described in lines 5 and 6? If "Yes," describe in Part III 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2008

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(i) Base (ii) Bonus & incentive compensation		(iii) Other compensation	compensation .	benefits	(B)(i)-(D)	reported in prior Form 990 or Form 990-EZ
	(i)	165,973.	0.	0.	0.	26,257.	192,230.	0.
PATRICIA MCLEOD	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	140,469.	0.	0.	0.	15,690.	156,159.	0.
DEB NORBERG	(ii)	0.	0.	0.	0.	0.	0.	0.
•	(i)	~~~						
	(ii)		***************************************					
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Schedule J (Form 990) 2008

#### SCHEDULE J-2 (Form 990)

### **Continuation Sheet for Form 990**

2008
Open to Public Inspection

Department of the Treasury Internal Revenue Service Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

lover Identification number

Name of the Organization SAN JOSE	г 2	AS.	300	CIATION	Employer Identii					
Part I Continuation of Officers, Di									t Compensated	Employees
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average			Posi				Reportable .	Reportable	Estimated
	hours	(check all that apply)						compensation	compensation	amount of
	per							from	from related	other
	week					ploye		the organization	organizations (W-2/1099-MISC)	compensation from the
		direct				d em		(W-2/1099-MISC)	(***2/1033*****100)	organization
		10 99	stee			usate		(,		and related
		trus	nal tro		oyee	ошо				organizations
		Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			
		呈	E .	8	Ke.	물	Ē			
SHEILA TRIPP										
TRUSTEE	0.50	X	<u> </u>	ļ		<u> </u>		0.	0.	0.
ELIZABETH YOUNT										
TRUSTEE	2.50	X						0.	0.	0.
SUSAN KRANE										
EXEC. DIR. FROM SEP 08	40.00	<u> </u>	<u> </u>	X	ļ			57,692.	0.	169.
MARK FAZELI		l								
FINANCE DIRECTOR	40.00		ļ	X			ļ	53,200.	0.	3,856.
LYNN SCHULER-KING							ŀ			
FINANCE HEAD TILL JUL 08	40.00	ļ	<u> </u>	X		-		42,281.	0.	9,389.
PATRICIA MCLEOD										
DEPUTY DIRECTOR DVLP	40.00	ـــــ	<u> </u>		X	<u> </u>		165,973.	0.	26,257.
DEB NORBERG										
DEPUTY DIRECTOR OPERATIO	40.00	-		ļ	ļ	X		140,469.	0.	15,690.
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2008

#### SCHEDULE L

(Form 990 or 990-EZ)

Transactions with Interested Persons

Attach to Form 990 or Form 990-EZ.

▶ To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, lines 38a or 40b.

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Employer identification number

Name of the organization SAN JOSE MUSEUM OF ART ASSOCIATION 23-7062028 Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only) Part I To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. 1 (c) Corrected? (b) Description of transaction (a) Name of disqualified person Yes No Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Part II To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a. (f) Approved (a) Name of interested (b) Loan to or from (g) Written (c) Original principal (d) Balance due (e) in by board or person and purpose the organization? amount default? agreement? committee? Yes From No Yes Yes No DEB NORBERG - SEE 44,000. 18,490 X X X X 18,490 Total **Grants or Assistance Benefiting Interested Persons.** Part III To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (c) Amount of grant or type (b) Relationship between interested person and the organization of assistance **Business Transactions Involving Interested Persons.** To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 28a, 28b, or 28c (e) Sharing of (a) Name of interested person (b) Relationship between interested (d) Description of (c) Amount of organization's person and the organization transaction transaction revenues? Yes No

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule L (Form 990 or 990-EZ) 2008

### SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

### **NonCash Contributions**

► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No. 1545-0047

2008

Open to Public

**Employer identification number** Name of the organization SAN JOSE MUSEUM OF ART ASSOCIATION 23-7062028 Part I Types of Property (d) (b) (c) (a) Check if Number of Revenues reported on Method of determining contributions Form 990, Part VIII, line 1g revenues applicable 48 X Art - Works of art Art - Historical treasures 2 0. X Art - Fractional interests 3 Books and publications ..... 4 Clothing and household goods 5 Cars and other vehicles 6 Boats and planes \_\_\_\_\_ 7 Intellectual property ..... 8 35,952.TRADING PRICE X Securities - Publicly traded ..... 9 10 Securities - Closely held stock Securities - Partnership, LLC, or 11 trust interests Securities - Miscellaneous 12 Qualified conservation contribution 13 (historic structures) Qualified conservation contribution (other) 14 Real estate - Residential 15 16 Real estate - Commercial Real estate - Other 17 Collectibles ..... 18 19 Food inventory Drugs and medical supplies \_\_\_\_\_ 20 Taxidermy 21 Historical artifacts 22 Scientific specimens ..... 23 Archeological artifacts 24 45,730.FMV 16 (EVENTS GOODS,) X 25 340 19,240.SALES PRICE (AUCTION ITEMS) X Other > 26 27 Other Other > 28 Number of Forms 8283 received by the organization during the tax year for contributions 9 for which the organization completed Form 8283, Part IV, Donee Acknowledgment Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 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 X 30a the entire holding period? **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? Х 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X 32a contributions?

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

Schedule M (Form 990) 2008

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b If "Yes," describe in Part II.

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Information to Form 990**

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008
Open to Public Inspection

Name of the organization

SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number 23-7062028

FORM	99	0,	PART	III	, LIN	VE 1,	DES	CR.	[PTI	ON OF	ORG	ANIZI	MOITA	MISS	SION:		
MUSEU	JМ	FO	STERS	AWA	RENES	SS OF	' AR'	rist	rs' :	BROAD	CON	rribu	JTIONS	ТО	SOCIETY:	IT	
						,											
ENGAG	ES	A	UDIEN	CES	WITH	THE	ART	OF	OUR	TIME	AND	THE	VITAL	ITY	OF THE		
CREAT	ľIV	E	PROCE	ss.													

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS

ONE-PERSON AND THEMATIC GROUP EXHIBITIONS THAT RANGE FROM TRADITIONAL

PAINTING TO EXPLORATORY NEW-MEDIA INSTALLATIONS. THE CURATORIAL STAFF

ORGANIZES ABOUT HALF OF THE EXHIBITIONS IN A GIVEN SEASON. IN-HOUSE

EXHIBITIONS ARE FREQUENTLY ACCOMPANIED BY SCHOLARLY PUBLICATIONS, E.G.

THE ART OF ENGAGEMENT: VISUAL POLITICS IN CALIFORNIA AND BEYOND (2006),

JENNIFER STEINKAMP (2006), AND TODD SCHORR (2009). SJMA FREQUENTLY

TRAVELS ITS EXHIBITIONS NATIONALLY, TO VENUES SUCH AS THE AMERICAN

UNIVERSITY MUSEUM AT THE KATZEN ART CENTER (WASHINGTON. D.C); THE

ALBRIGHT-KNOX ART GALLERY (BUFFALO, NY); KEMPER MUSEUM OF CONTEMPORARY

ART (KANSAS CITY, MO); AND BOISE ART MUSEUM (BOISE, ID), AMONG MANY

OTHERS.

GIVEN ITS LOCATION IN THE HEART OF THE HIGH-TECHNOLOGY CULTURE OF

SILICON VALLEY, THE MUSEUM HAS A SUBSTANTIAL COMMITMENT TO NEW WORK IN

NEW MEDIA. SUCH PROJECTS INCLUDE CROSS SECTIONS: CATHERINE WAGNER

(2001), BRIDES OF FRANKENSTEIN (2005), AND ROBOTS: THE EVOLUTION OF A

CULTURAL ICON (2008). IN 2006, SJMA INAUGURATED A SERIES OF PROJECTS

THAT EXPLORE THE INTERSECTION OF ART AND TECHNOLOGY, IN CONJUNCTION

WITH THE CITY-WIDE BIENNIAL FESTIVAL ZEROONE, INCLUDING EDGE CONDITIONS

(2006), SUPERLIGHT (2008), AND BUILD YOUR OWN WORLD (2010).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number 23-7062028

ADDITION, SJMA ORGANIZES PIVOTAL CONCURRENT EXHIBITIONS: JENNIFER								
STEINKAMP (2006) AND LEO VILLAREAL (2010). SJMA ALSO INITIATES SPECIAL								
ARTISTIC COMMISSIONS THAT REFLECT THE CULTURAL DIVERSITY AND CHARACTER								
OF ITS REGION, SUCH AS THOSE WITH TAM VAN TRAN AND BARI KUMAR IN 2009								
AND A PROJECT IN PROCESS WITH HIROSHI WATANABE TO DOCUMENT SAN JOSE'S								
JAPANTOWN (2009-2010).								
UNI ANTOWN (2005 2010).								
THE MUSEUM'S PERMANENT COLLECTION INCLUDES CA. 2000 WORKS OF ART, MORE								
THAN 35% OF WHICH HAVE BEEN ACQUIRED SINCE 2000. THE MUSEUM DOES NOT								
THAN 35% OF WHICH HAVE BEEN ACQUIRED SINCE 2000. THE MUSEUM DOES NOT								
HAVE AN ENDOWMENT FUND FOR ACQUISITIONS, AS DO MOST MUSEUMS: 90% OF								
ACQUISITIONS ARE DONATIONS, MANY SPECIFICALLY SOLICITED FROM COLLECTORS								
ACQUISITIONS ARE DONATIONS, MANT SPECIFICABLE SOLICITED FROM COLLECTORS								
AND ARTISTS.								
AND ARTISTS.								
AND ARTISTS.  THE COLLECTIONS COMMITTEE, (THE MEMBERS OF WHICH EACH CONTRIBUTE A								
AND ARTISTS.  THE COLLECTIONS COMMITTEE, (THE MEMBERS OF WHICH EACH CONTRIBUTE A  MINIMUM OF \$5,000 ANNUALLY), HAS ENABLED THE PURCHASE OF 91 WORKS OF								
AND ARTISTS.  THE COLLECTIONS COMMITTEE, (THE MEMBERS OF WHICH EACH CONTRIBUTE A  MINIMUM OF \$5,000 ANNUALLY), HAS ENABLED THE PURCHASE OF 91 WORKS OF  ART SINCE ITS ESTABLISHMENT IN 1991, THE MAJORITY BY CALIFORNIA								
AND ARTISTS.  THE COLLECTIONS COMMITTEE, (THE MEMBERS OF WHICH EACH CONTRIBUTE A  MINIMUM OF \$5,000 ANNUALLY), HAS ENABLED THE PURCHASE OF 91 WORKS OF								
AND ARTISTS.  THE COLLECTIONS COMMITTEE, (THE MEMBERS OF WHICH EACH CONTRIBUTE A  MINIMUM OF \$5,000 ANNUALLY), HAS ENABLED THE PURCHASE OF 91 WORKS OF  ART SINCE ITS ESTABLISHMENT IN 1991, THE MAJORITY BY CALIFORNIA								
THE COLLECTIONS COMMITTEE, (THE MEMBERS OF WHICH EACH CONTRIBUTE A  MINIMUM OF \$5,000 ANNUALLY), HAS ENABLED THE PURCHASE OF 91 WORKS OF  ART SINCE ITS ESTABLISHMENT IN 1991, THE MAJORITY BY CALIFORNIA  ARTISTS. THE COLLECTIONS COMMITTEE APPROVES ALL PURCHASES, DONATIONS,								
THE COLLECTIONS COMMITTEE, (THE MEMBERS OF WHICH EACH CONTRIBUTE A  MINIMUM OF \$5,000 ANNUALLY), HAS ENABLED THE PURCHASE OF 91 WORKS OF  ART SINCE ITS ESTABLISHMENT IN 1991, THE MAJORITY BY CALIFORNIA  ARTISTS. THE COLLECTIONS COMMITTEE APPROVES ALL PURCHASES, DONATIONS,								

DEDICATES 10% OF ITS ANNUAL MEMBERSHIP DUES TO THE PURCHASE OF WORKS OF ART. SINCE ITS INCEPTION (CA. 1995), THE COUNCIL HAS FUNDED THE ACQUISITION OF TWENTY WORKS.

SJMA'S COLLECTION INCLUDES PRIMARILY AMERICAN ART OF THE POST-WORLD WAR

II PERIOD, WITH AN EMPHASIS ON CONTEMPORARY ART AND WEST COAST ART.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

#### **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number 23-7062028

	AMONG THE STRENGTHS OF THE COLLECTION ARE HISTORICAL BAY AREA ART;										
SECOND-GENERATION MINIMALISM; PHOTOGRAPHY; TRADITIONALIST											
	REPRESENTATIONAL PAINTING; AND EMERGING CALIFORNIA ARTISTS. RECENTLY,										
	EFFORTS HAVE FOCUSED ON INCREASING THE MUSEUM'S HOLDINGS OF NEW MEDIA,										
	CERAMIC SCULPTURE, ARTISTS FROM PACIFIC RIM CULTURES, AND INCREASING										
	CULTURAL AND GENDER DIVERSITY.										
	HIGHLIGHTS OF THE COLLECTION INCLUDE WORKS BY: ROBERT ARNESON, RUTH										
	ASAWA, JUDY BACA, RAY BELDNER, RUTH BERNHARD, ELMER BISCHOFF,										
	CHRISTOPHER BROWN, EDWARD BURTYNSKY, JIM CAMPBELL, ALEXANDER CALDER,										
CARLEGE P	ENRIQUE CHAGOYA, BINH DANH, JAY DEFEO, STEPHEN DE STAEBLER, VIOLA FREY,										
	ANDY GOLDSWORTHY, GEORGE HERMS, LYNN HERSHMAN, MILDRED HOWARD, IL LEE,										
	AN TE LIU, HUNG LIU, FRANK LOBDELL, MICHAEL LIGHT, RICHARD MISRACH, VIK										
	MUNIZ, DAVID NASH, LONG NGUYEN, MANUEL OCAMPO, NATHAN OLIVEIRA, GORDON										
	ONSLOW-FORD, TONY OURSLER, ALAN RATH, BEN RUBIN AND MARK HANSEN,										
	RICHARD SHAW, KATHERINE SHERWOOD, JENNIFER STEINKAMP, MASAMI TERAOKA,										
	BILL VIOLA, CATHERINE WAGNER, GAIL WIGHT, WILLIAM WILEY, AND BETTY										
	WOODMAN.										
	AROUND 63,580 PEOPLE WERE SERVED DURING THE YEAR.										
	FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS										
	"MUSE" AWARDS FROM THE AMERICAN ASSOCIATION OF MUSEUMS FOR ITS USE OF										
	NEW INTERACTIVE, TECH-BASED ACTIVITIES IN THE GALLERIES AND ON THE WEB,										
	E.G. YOUTUBE, FLICKR, FACEBOOK, PODCASTS, DIGITAL TIMELINES, AND IPOD										
	TOUCH TOURS. THE MUSEUM IS PROUD TO OFFER A SPECTRUM OF EDUCATIONAL										

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

832211 12-18-08

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Information to Form 990**

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Name of the organization

SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number 23-7062028

PROGRAMMING THAT PROVIDES CRITICAL EARLY EXPOSURE TO THE VISUAL ARTS FOR TENS OF THOUSANDS OF STUDENTS IN GRADES KINDERGARTEN THROUGH -TOURS, WORKSHOPS, IN-CLASS PRESENTATIONS, CURRICULUM GUIDES. TWELVE-THE MUSEUM SERVES OVER 37,000 YOUNG PEOPLE WHO PARTICIPATE IN OVER 50,000 HANDS-ON EXPERIENCES. THE MUSEUM PROVIDES LECTURES, SYMPOSIA EDUCATOR-LED TOURS IN THE GALLERIES (OFTEN PAIRED WITH HANDS-ON ART ACTIVITIES); AN IN-SCHOOL ART DOCENT PROGRAM THAT TEACHES VISUAL THINKING SKILLS; SEQUENTIAL IN-SCHOOL ART-MAKING WORKSHOPS (OFTEN COMBINED WITH GALLERY TOURS); PROFESSIONAL DEVELOPMENT OPPORTUNITIES FOR TEACHERS; FREE FAMILY-ORIENTED COMMUNITY DAYS WITH HANDS-ON ACTIVITIES AND A VARIETY OF PERFORMANCES; KIDS SUMMER ART CAMP WEEK-LONG ADVENTURES INTO ART-MAKING THAT ARE LINKED TO CURRENT EXHIBITIONS; AND PROGRAMS WITH ARTISTS THAT GIVE THE PUBLIC CLOSE IN ADDITION, THE EMPLOYEES OF ACCESS TO THE CREATIVE PROCESS. CORPORATE PARTNERS ARE INVITED TO A BIANNUAL EVENT CALLED TECH CONNECT WHICH IS AN IMMERSIVE NIGHT OF ART, DOCENT TOURS, HANDS-ON ART-MAKING AND INTERACTIVE INTERPRETATION ACTIVITIES IN THE GALLERIES. THE MUSEUM IS MIDSTREAM IN THE PROCESS OF REVAMPING ITS WEBSITE, THE FIRST SUCH INITIATIVE IN TEN YEARS, TO BE COMPLETED IN JANUARY 2010. THE NEW WEBSITE WILL ENABLE SMOOTHER INFORMATION DELIVERY, WEB-BASED ACCESS TO THE COLLECTION, A MORE DYNAMIC GRAPHIC INTERFACE, AND ADDITIONAL PARTICIPATORY EDUCATIONAL AND CURATORIAL ONLINE PROJECTS. SJMA'S WEB SITE IS INTENDED TO HARNESS NEW WEB CAPABILITIES TO FURTHER SJMA'S REACH AND ABILITY TO ENGAGE VISITORS; FORGE NEW CONNECTIONS TO ITS COMMUNITIES; AND ENCOURAGE REPEAT VISITATION. THE ART OF OUR TIME LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008 832211 12-18-08

#### **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Information to Form 990**

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008
Open to Public Inspection

Name of the organization

SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number 23-7062028

IS COMPLEX, CHALLENGING, AND AS EMOTIONALLY POWERFUL AS ANY EVER

CREATED. SJMA'S MISSION IS TO CONNECT ITS AUDIENCES -BOTH LIVE AND

VIRTUAL - WITH TODAY'S ART AND ARTISTS. THE GOAL OF THIS NEW WEBSITE

IS TO CREATE A CONTEMPORARY ART EXPERIENCE VIA THE WEB THAT WILL

CULTIVATE VISITORS' INVESTMENT IN SJMA AS WELL AS FURTHER

UNDERSTANDING, ENTHUSIASM, RELEVANCY, AND APPRECIATION.

SJMA WILL USE ITS WEBSITE TO ENGAGE VISITORS VIA VISUAL LEARNING THAT

SPANS A LIFETIME. EARLY EDUCATION IS ESPECIALLY IMPORTANT: SJMA IS A

COMMUNITY LEADER IN CREATING PROGRAMS THAT CONNECT YOUNG PEOPLE TO ART.

SJMA AIMS TO ADVANCE ONLINE AND E-LEARNING CAPABILITIES THAT OPEN

21ST-CENTURY DOORWAYS TO ART. THE NEW SITE WILL INTEGRATE DYNAMIC

FEATURES THAT OFFER VISITORS A MORE PERSONALIZED ONLINE EXPERIENCE,

ENHANCED NAVIGATION, AND ACCESS TO SJMA'S COLLECTION, EXHIBITIONS, AND

EDUCATIONAL RESOURCES THROUGH A FLUID NEW INTERFACE THAT BRINGS THE

VOICES AND PERSPECTIVES OF SJMA'S AUDIENCES TO THE FOREFRONT.

THE SAN JOSE MUSEUM OF ART'S PERMANENT COLLECTION INCLUDES PAINTINGS,

SCULPTURE, INSTALLATIONS, NEW-MEDIA WORKS, PHOTOGRAPHY, DRAWINGS,

PRINTS, AND ARTIST'S BOOKS. OBJECTS FROM THE PERMANENT COLLECTION ARE

INCREASINGLY THE FOCUS OF THEMATIC EXHIBITIONS IN THE GALLERIES. FOR

ITS NEW WEBSITE, THE MUSEUM WILL USE THE EMBARK WEB KIOSK TO TURN ITS

COLLECTION DATA FILES INTO A VIRTUAL GALLERY THAT CAN BE SEARCHED AND

CONFIGURED. THE WEB KIOSK OFFERS THREE OPTIONS FOR VISITORS TO EXPLORE

SJMA'S COLLECTION. THE COLLECTION CAN BE SEARCHED BY USING KEYWORDS OR

DATA FIELDS; BY PRE-SELECTING GROUPS OF RELATED RECORDS FROM THE INDEX

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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(Form 990)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008
Open to Public Inspection

Name of the organization

SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number 23-7062028

(E.G. ALL LANDSCAPE IMAGERY); OR BY USING THE INDEX TREE AS A VIRTUAL

TOUR GUIDE TO THE ENTIRE COLLECTION. THE WEB KIOSK WILL CREATE MUCH

GREATER AND BROADER AWARENESS OF THE COLLECTION AND ACCESS TO BACKUP

REFERENCE MATERIALS, SUCH AS THE PREPARATORY STUDIES FOR A PAINTING AND

SHORT VIDEO INTERVIEWS WITH THE ARTISTS. IT WILL ALSO ALLOW VISITORS TO

SELF-CURATE AN ON-LINE 'GALLERY.' IN ADDITION, THE NEW WEB SITE WILL

MAKE INFORMATION MORE EASILY ACCESSIBLE FOR STAFF.

FORM 990, PART VI, SECTION A, LINE 10: THE PROCESS THE SAN JOSE MUSEUM OF ART USES TO REVIEW THE FORM 990 IS SET FORTH IN ITS RISK MANAGEMENT AND FISCAL OPERATING POLICIES. PRIOR TO FILING WITH THE I.R.S., THE ANNUAL TAX RETURN FORM 990 IS REVIEWED BY THE FINANCE AND EXECUTIVE COMMITTEES AND PROVIDED TO THE BOARD OF TRUSTEES.

COMMUNITY MEMBERS OF BOARD COMMITTEES MUST FILL OUT AND SIGN AN ANNUAL

CONFLICT OF INTEREST DISCLOSURE STATEMENT. THIS DISCLOSURE STATEMENT ASKS

IF THE RESPONDENTS ARE AWARE OF ANY AFFILIATIONS, EMPLOYMENT OR OTHER

MATTERS INVOLVING THE INDIVIDUAL OR ANY OF IMMEDIATE FAMILY THAT MIGHT BE

PERCEIVED TO COMPROMISE THEIR OBLIGATIONS TO THE MUSEUM AND SHOULD

THEREFORE BE REPORTED IN LIGHT OF THE CODES OF ETHICS POLICIES.

SPECIFICALLY, THE DISCLOSURE STATEMENT ASKS IF SJMA HAS A BUSINESS

RELATIONSHIP WITH ANY ENTITY FROM WHICH THE INDIVIDUAL OR HIS/HER IMMEDIATE

FAMILY MEMBERS HAVE RECEIVED ANY COMPENSATION, INCOME, LOANS OR GIFTS OR OF

WHICH THE INDIVIDUAL OR HIS/HER IMMEDIATE FAMILY MEMBERS ARE A TRUSTEE,

44

OFFICE, DIRECTOR OR EMPLOYEE. IN ADDITION, DISCLOSURE IS REQUIRED IF THE

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2008

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### **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Information to Form 990**

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008
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Name of the organization

SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number 23-7062028

INDIVIDUAL OR IMMEDIATE FAMILY MEMBERS HOLD AN OWNERSHIP INTEREST IN A

CLOSELY HELD COMPANY OR A 5% OWNERSHIP INTEREST IN A PUBLIC COMPANY WITH

WHICH THE MUSEUM HAS A BUSINESS RELATIONSHIP. ALL RESPONDENTS ARE ASKED TO

SUPPLEMENT THE INFORMATION IN THE EVENT OF ANY CHANGES BEFORE THE NEXT

ANNUAL DISCLOSURE. ALL STAFF RESPONSES ARE REVIEWED BY THE EXECUTIVE

DIRECTOR. ALL OTHER RESPONSES ARE REVIEWED BY THE SECRETARY OF THE BOARD OF

TRUSTEES. IF A RESPONSE ON A DISCLOSURE IDENTIFIES A CONFLICT, THE

INTERESTED TRUSTEE, STAFF MEMBER OR VOLUNTEER (A COMMUNITY MEMBER OF A

BOARD COMMITTEE) SHALL REFRAIN FROM PARTICIPATING IN OR ATTEMPTING TO

INFLUENCE ANY DECISION OF THE BOARD, BOARD COMMITTEE, OR STAFF ON ANY

MATTER WHICH MAY INVOLVE A POTENTIAL OR ACTUAL CONFLICT OF INTEREST AND

SHALL ABSTAIN FROM VOTING ON ANY SUCH MATTER.

FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF TRUSTEES OF SJMA HAS
ESTABLISHED A COMPENSATION PHILOSOPHY THAT BALANCES TWO OBJECTIVES:

APPROPRIATE STEWARDSHIP OF ITS FINANCIAL RESOURCES; AND MAINTAINING THE

VITALITY OF THE INSTITUTION AND EXCELLENCE OF ITS PROGRAMMING. THE

RESULTING COMPENSATION DESIGN IS TO PAY IN THE TOP 50% OF COMPARABLE

SALARIES FOR NEXT-STAGE PEER INSTITUTIONS. IN SJMA'S EXPERIENCE, THESE ARE

THE MOST RELEVANT FACTORS IN COMPETITION FOR TALENT. INDIVIDUAL

COMPENSATION IS THEN ESTABLISHED COMMENSURATE WITH EXPERIENCE, RELEVANT

ACADEMIC CREDENTIALS AND PROFESSIONAL TRAINING. THE BOARD OF TRUSTEES HAS

APPROVED THAT PHILOSOPHY IN LIGHT OF THE HIGH COST OF LIVING IN THE SAN

FRANCISCO BAY AREA, IN AN EFFORT TO ATTRACT, RETAIN AND MOTIVATE THE TALENT

NEEDED TO MAINTAIN THE REQUISITE STANDARDS OF QUALITY AND REPUTATION OF THE

MUSEUM AS A LEADER IN THE FIELD.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Information to Form 990**

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number 23-7062028

IN ADDITION TO SALARY, SJMA ENDEAVORS TO PROVIDE HEALTH AND RETIREMENT

BENEFITS COMMENSURATE WITH THE ABOVE PHILOSOPHY. HOWEVER, DURING THE

CURRENT RECESSION, THE BOARD OF TRUSTEES HAS SUSPENDED CONTRIBUTIONS TO

RETIREMENT BENEFITS AND INCREASED THE EMPLOYEE CONTRIBUTIONS TO HEALTH

INSURANCE PREMIUMS AND CO-PAYMENTS. THE BOARD INTENDS TO RE-ESTABLISH A

PENSION CONTRIBUTION AS SOON AS ECONOMIC CIRCUMSTANCES ALLOW.

THE SALARIES OF THE EXECUTIVE DIRECTOR; DEPUTY DIRECTOR, DEVELOPMENT; THE DEPUTY DIRECTOR, OPERATIONS; AND THE DIRECTOR OF FINANCE WERE ESTABLISHED AND APPROVED BY THE BOARD OF TRUSTEES IN ACCORDANCE WITH THIS COMPENSATION PHILOSOPHY, BASED ON THE ANNUAL SALARY SURVEY OF THE ASSOCIATION OF ART MUSEUM DIRECTORS, WHICH IS THE STANDARD RESOURCE IN THE FIELD AND THE MOST COMPREHENSIVE, PUBLIC INDUSTRY DATA AVAILABLE. PERFORMANCE EVALUATIONS OF THESE STAFF MEMBERS ARE REVIEWED ANNUALLY BY THE BOARD OF TRUSTEES. THE SALARY AND BENEFIT PACKAGE OF THE EXECUTIVE DIRECTOR WAS ESTABLISHED AFTER A REVIEW OF COMPARABLE EXECUTIVE COMPENSATION FURNISHED BY THE EXECUTIVE SEARCH FIRM ENGAGED BY THE BOARD AND APPROVED BY THE BOARD ON JULY 24, 2008. IN THE COURSE OF BUDGET CUTS DURING FY 08-09, THE EXECUTIVE DIRECTOR VOLUNTARILY DELAYED OR REDUCED ITEMS OF THE BENEFIT PACKAGE.

FORM 990, PART VI, SECTION C, LINE 19: THE SAN JOSE MUSEUM OF ART POSTS

ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL

STATEMENTS ON ITS WEBSITE.

FORM 990 PART XI LINE 2C

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
832211
12-18-08

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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### SAN JOSE MUSEUM OF ART ASSOCIATION

OVERSIGHT OF AUDIT THE AUDIT COMMITTEE CONSISTS OF A CHAIR PERSON AND 4 MEMBERS, ONE OF WHOM IS A TRUSTEE IN ACCORDANCE WITH BYLAWS. THE CHARTER OF THE AUDIT COMMITTEE IS TO ASSIST THE BOARD OF TRUSTEES IN FULFILLING THE BOARD'S OVERSIGHT RESPONSIBILITIES AS THEY RELATE TO THE ASSOCIATION'S AUDIT. FOR FY 09, REQUESTS FOR PROPOSALS WERE SENT TO 4 LOCAL ACCOUNTING AFTER IN PERSON INTERVIEWS WERE CONDUCTED, BERGER/LEWIS WAS SELECTED BASED ON THEIR EXPERTISE WITH NON-PROFIT ORGANIZATIONS. A TIME LINE FOR THE FY08-09 AUDIT PROCESS WAS ESTABLISHED IN CONJUNCTION WITH STAFF, MANAGEMENT, AND THE AUDIT COMMITTEE CHAIR. AUDIT FIELD WORK SECOMMENCED JULY 13, 2009 AND WAS CONCLUDED BY MID NOVEMBER 2009. DURING THAT TIME BERGER/LEWIS MET WITH THE AUDIT COMMITTEE 4 TIMES AND PRESENTED THE DRAFT AUDIT REPORT TO THE FULL BOARD OF TRUSTEES ON NOVEMBER 19, 2009. SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS: (A) NAME OF PERSON: DEB NORBERG PURPOSE OF LOAN: SEE DESCRIPTION IN SCHEDULE O LOAN TO OR FROM ORGANIZATION? = FROM ORIGINAL PRINCIPAL AMOUNT \$ 44000. (D) BALANCE DUE \$ 18490. LOAN IN DEFAULT? = NO APPROVED BY BOARD OR COMMITTEE? = YES (G) WRITTEN AGREEMENT? = YES

#### SCHEDULE L PART II

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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

(Form 990)

Department of the Treasury Internal Revenue Service

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Employer identification number 23-7062028

LOAN TO INTERESTED PERSONS
THE NOTE RECEIVABLE BALANCE PERTAINS TO A \$44K LOAN TO DEPUTY DIRECTOR
OF OPERATIONS, DEBORAH NORBERG. PRIOR TO ADOPTION OF THE EMPLOYEE
BENEFIT PLAN, THE ASSOCIATION ACCRUED DEFERRED COMPENSATION TO DEBORAH
THE BALANCE OF WHICH WAS HELD IN A SEPARATE ACCOUNT REGISTERED TO THE
MUSEUM. THE ACCRUAL TO THIS ACCOUNT CEASED AFTER THE ADOPTION OF THE
PLAN. IN JAN 2003, DEBORAH BORROWED \$44K FROM SJMA AT 5% INTEREST PER
ANNUM WITH THE BALANCE DUE ON JAN 31, 2013. THE MUSEUM APPLIES THE
PRINCIPAL PORTION OF THE PAYMENTS TOWARD THE OUTSTANDING LOAN BALANCE
AND THE INTEREST PORTION TO DEFERRED COMPENSATION.
* <u>多沙</u> 维
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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	* 990 PAGE 10 TOTAL FURNITURE & FIXTURES	VARIES		.000	16	161,002. 161,002.		0.	·	147,829. 147,829.	0.	4,162. 4,162.
		VARIES		.000		543,919.				429,136.		36,322.
3	NETWORK * 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT	VARIES		• 000	16	201,849. 745,768.		0.		189,209. 618,345.	0.	12,217. 48,539.
	OTHER SOFTWARE	VARIES		.000	16	190,216.			190,216.	81,729.		29,792.
5	LEASEHOLD IMPROVEMENTS LEASEHOLD IMPROVEMENTS	VARIES		.000	16	613,310.			613,310.	-		9,901.
	ADJ * 990 PAGE 10 TOTAL OTHER * GRAND TOTAL 990 PAGE	VARIES		.000	16	803,526.		0.	803,526.	36,165. 653,815.	0.	-36,165. 3,528.
	10 DEPR					1710296.		0.	1710296.	1419989.	0.	56,229.
						·						

<sup>828102</sup> 04-25-08

<sup>(</sup>D) - Asset disposed