

Form **990**

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

# 2009

Department of the Treasury  
Internal Revenue Service

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

Open to Public Inspection

**A** For the 2009 calendar year, or tax year beginning **JUL 1, 2009** and ending **JUN 30, 2010**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. <b>C</b> Name of organization <b>SAN JOSE MUSEUM OF ART ASSOCIATION</b> Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>110 SOUTH MARKET STREET</b> City or town, state or country, and ZIP + 4 <b>SAN JOSE, CA 95113-2383</b>	<b>D</b> Employer identification number <b>23-7062028</b>
	See Specific Instructions. <b>F</b> Name and address of principal officer: <b>SUSAN KRANE</b> <b>SAME AS C ABOVE</b>	<b>E</b> Telephone number <b>408-271-6840</b>
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c) ( <b>3</b> ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527.		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>J</b> Website: ▶ <b>WWW.SJMUSART.ORG</b>		<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶
		<b>L</b> Year of formation: <b>1969</b> <b>M</b> State of legal domicile: <b>CA</b>

Part I Summary			
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <b>SJMA FOSTERS APPRECIATION AND AWARENESS OF THE CONTRIBUTION OF ART AND ARTISTS TO SOCIETY.</b>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	27
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	27
	5 Total number of employees (Part V, line 2a)	5	81
	6 Total number of volunteers (estimate if necessary)	6	200
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	15,502.
b Net unrelated business taxable income from Form 990-T, line 34	7b	-410.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	3,576,283.	3,894,759.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	327,361.	332,637.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-202,697.	425,624.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,074,000.	4,922,402.
Expenses	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)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,522,503.	2,136,625.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>597,298.</b>		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,483,720.	1,446,072.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,006,223.	3,582,697.
19 Revenue less expenses. Subtract line 18 from line 12	67,777.	1,339,705.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	8,427,553.	9,337,670.
	22 Net assets or fund balances. Subtract line 21 from line 20	887,022.	408,744.
		7,540,531.	8,928,926.

<b>Part II Signature Block</b>			
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
Sign Here	▶ Signature of officer	Date	
	▶ <b>SUSAN KRANE, EXECUTIVE DIRECTOR</b> Type or print name and title		
Paid Preparer's Use Only	Preparer's signature ▶ <b>LAWRENCE S. KUECHLER</b>	Date <b>02/11/11</b>	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ <b>BERGER/LEWIS ACCOUNTANCY CORP. 55 ALMADEN BLVD., STE 600 SAN JOSE, CA 95113</b>	EIN ▶	Preparer's identifying number (see instructions)
		Phone no. ▶ <b>(408) 494-1200</b>	

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION THE SAN JOSE MUSEUM OF ART (SJMA) REFLECTS THE DIVERSE CULTURES AND INNOVATIVE SPIRIT OF SILICON VALLEY. THROUGH ITS EXHIBITIONS, EDUCATIONAL PROGRAMS, SCHOLARSHIP, AND COLLECTIONS, SJMA CONNECTS THE PRESENT AND THE PAST, AND THE ART OF THE WEST COAST AND THE WORLD. THE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No [X] No If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code: ) (Expenses \$ 1,730,446. including grants of \$ ) (Revenue \$ 285,764.) EXHIBITIONS

THE SAN JOSE MUSEUM OF ART IS A LEADING SHOWCASE FOR MODERN AND CONTEMPORARY ART IN THE BAY AREA. SJMA'S EXHIBITIONS REFLECT THE BELIEF THAT ART IS A CENTRAL FORM OF HUMAN COMMUNICATION, INSPIRATION, AND CULTURAL EXPRESSION. THE MUSEUM FOSTERS INNOVATIVE COLLABORATIONS AND ENCOURAGES GLOBAL PERSPECTIVES, DIVERSITY, AND MULTIDISCIPLINARY THINKING. THE MUSEUM HAS EARNED A REPUTATION FOR ITS FRESH, DISTINCTIVE EXHIBITION PROGRAMS AND FOR ENGAGING MUSEUM VISITORS OF ALL AGES, INCOME LEVELS, CULTURAL BACKGROUNDS, AND LEVELS OF KNOWLEDGE. SJMA'S EXHIBITIONS EXPLORE MAJOR TRENDS IN THE INTERNATIONAL CONTEMPORARY ART SCENE AND WEST COAST ART, WITH A STRONG COMMITMENT TO EMERGING ARTISTS.

4b (Code: ) (Expenses \$ 399,041. including grants of \$ ) (Revenue \$ 48,830.) EDUCATIONAL PROGRAMS

SJMA'S SIGNATURE, PARTICIPATORY APPROACH TO ENGAGING AUDIENCES STEMS FROM A BELIEF THAT VISITORS ARE LOOKING FOR DEEPER AND MORE MEANINGFUL WAYS TO UNDERSTAND ART, ON THEIR OWN TERMS. MANY OF SJMA'S VISITORS ARE NEW TO CONTEMPORARY ART AND SOMETIMES NEW TO THE MUSEUM EXPERIENCE. ALL SJMA'S INTERPRETATION STRATEGIES (E.G. SCHOOL PROGRAMS; COMMUNITY PROGRAMS; ADULT, FAMILY, AND IN-GALLERY ACTIVITIES) ARE DESIGNED TO ENCOURAGE VISITORS TO SPEND MORE TIME OBSERVING AND CONTEMPLATING WORKS OF ART - TO SLOW DOWN THE TYPICAL VISITOR'S RAPID-FIRE PACE OF VIEWING. PROGRAMS FOR K-12 STUDENTS (BOTH ON-SITE AND IN THE SCHOOLS) EMPHASIZE VISUAL LITERACY AND TEACH CHILDREN TO BOTH EXPRESS AN OPINION AND BACK

4c (Code: ) (Expenses \$ 154,493. including grants of \$ ) (Revenue \$ 111,480.) MUSEUM STORE

THE MUSEUM STORE IS LOCATED OFF THE MAIN LOBBY OF SJMA. THIS ACTIVE GIFT AND BOOK STORE CARRIES MISSION-RELATED PRODUCTS THAT ARE EDUCATIONAL, FOSTER CREATIVITY, AND ENCOURAGE THE APPRECIATION OF ART. THE MUSEUM STORE ALSO FEATURES CUSTOM PRODUCTS BY AREA ARTISTS AND CRAFTSMEN AS WELL AS MERCHANDISE RELEVANT TO EACH CURRENT SEASON OF EXHIBITIONS. THE STORE IS STAFFED BY MUSEUM EMPLOYEES AS WELL AS AN ACTIVE CONTINGENT OF LONGTIME VOLUNTEERS.

4d Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses \$ 2,283,980.

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? .....	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i> .....		X
5	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i> .....	N/A	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> .....		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? <i>If "Yes," complete Schedule D, Part II</i> .....		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....	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? <i>If "Yes," complete Schedule D, Part IV</i> .....		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....	X	
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i> .....	X	
	<ul style="list-style-type: none"> <li>• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i></li> <li>• Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i></li> <li>• Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i></li> <li>• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i></li> <li>• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i></li> <li>• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X.</i></li> </ul>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i> .....	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i> .....	Yes	No
			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
14a	Did the organization maintain an office, employees, or agents outside of the United States? .....		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 United States? <i>If "Yes," complete Schedule F, Part I</i> .....		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? <i>If "Yes," complete Schedule F, Part II</i> .....		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? <i>If "Yes," complete Schedule F, Part III</i> .....		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> .....		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i> .....		X

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> .....		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
25a <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> .....	X	
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> .....		X
28 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		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? <i>If "Yes," complete Schedule R, Part I</i> .....		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> .....		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
36 <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		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? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O. ....	X	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	1a 38		
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2a</b>	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 81		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>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, Report of Foreign Bank and Financial Accounts.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966? N/A		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person? N/A		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders N/A	11a	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

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

**Section A. Governing Body and Management**

		Yes	No
1a	Enter the number of voting members of the governing body		
1a			27
b	Enter the number of voting members that are independent		
1b			27
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?		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?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
8a		X	
b	Each committee with authority to act on behalf of the governing body?	X	
8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X
9			X

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

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		X
10a			X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10b			
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11		X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
12a		X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12b		X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
12c		X	
13	Does the organization have a written whistleblower policy?	X	
13		X	
14	Does the organization have a written document retention and destruction policy?	X	
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?		
a	The organization's CEO, Executive Director, or top management official	X	
15a		X	
b	Other officers or key employees of the organization	X	
15b		X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
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			

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed **CA**
- 18 Section 6104 requires an organization to make its 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.  
 Own website     Another's website     Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial 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 organization: **BRIAN SPANG - (408) 271-6873**  
**110 SOUTH MARKET STREET, SAN JOSE, CA 95113-2383**

**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. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL NEVENS PRESIDENT	3.00	X		X			0.	0.	0.	
BARBARA OSHMAN VICE PRESIDENT	0.50	X		X			0.	0.	0.	
WILLIAM FAULKNER SECRETARY	2.50	X		X			0.	0.	0.	
ANNEKE DURY CHIEF FINANCIAL OFFICER	2.50	X		X			0.	0.	0.	
MIKE BEWLEY TRUSTEE	0.50	X					0.	0.	0.	
DORIS BURGESS TRUSTEE	0.50	X					0.	0.	0.	
PETER CROSS TRUSTEE	0.50	X					0.	0.	0.	
RUSSELL DAULTON TRUSTEE	0.50	X					0.	0.	0.	
EILEEN FERNANDES TRUSTEE	0.50	X					0.	0.	0.	
S.K. GUPTA TRUSTEE	0.50	X					0.	0.	0.	
MARILYN KATZ TRUSTEE	0.50	X					0.	0.	0.	
MICHELE KLEIN TRUSTEE	0.50	X					0.	0.	0.	
PETER LIPMAN TRUSTEE	2.00	X					0.	0.	0.	
CHRIS MENGARELLI TRUSTEE	0.50	X					0.	0.	0.	
EVELYN NEELY TRUSTEE	0.50	X					0.	0.	0.	
CHARLES PARCHMENT TRUSTEE	0.50	X					0.	0.	0.	
CAROL PARKER TRUSTEE	0.50	X					0.	0.	0.	

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MARTIN ROBINSON TRUSTEE	0.50	X						0.	0.	0.
HILDY SHANDELL TRUSTEE	1.00	X						0.	0.	0.
STEVE SPENO TRUSTEE	1.00	X						0.	0.	0.
HORACIO TERAN TRUSTEE	1.50	X						0.	0.	0.
LINDA TOENISKOETTER TRUSTEE	0.50	X						0.	0.	0.
ELIZABETH YOUNT TRUSTEE	2.50	X						0.	0.	0.
KAREN LANTZ TRUSTEE	0.50	X						0.	0.	0.
MARY MOCAS TRUSTEE	2.50	X						0.	0.	0.
DEBORAH RAPPAPORT TRUSTEE	0.50	X						0.	0.	0.
SARAH RATCHYE TRUSTEE	2.50	X						0.	0.	0.
<b>1b Total</b>								<b>601,180.</b>	<b>0.</b>	<b>24,547.</b>

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **3**

	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		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	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		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

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

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

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



**Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns						
	b	Membership dues	221,713.					
	c	Fundraising events	19,377.					
	d	Related organizations						
	e	Government grants (contributions)	806,987.					
	f	All other contributions, gifts, grants, and similar amounts not included above	2,846,682.					
	g	Noncash contributions included in lines 1a-1f: \$	91,528.					
	h	<b>Total.</b> Add lines 1a-1f	3,894,759.					
	Program Service Revenue	2 a	<b>PUBLIC PROGRAMS</b>	713990 268,622.	268,622.			
b		<b>ART CLASS CONTRACTS &amp;</b>	713990 48,830.	48,830.				
c		<b>TRAVELING EXHIBITIONS</b>	713990 15,185.	15,185.				
d								
e								
f		All other program service revenue						
g		<b>Total.</b> Add lines 2a-2f	332,637.					
Other Revenue		3	Investment income (including dividends, interest, and other similar amounts)		182,953.		182,953.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross Rents	(i) Real	118,050.				
			(ii) Personal					
			b	Less: rental expenses				
			c	Rental income or (loss)	118,050.			
	d	Net rental income or (loss)		118,050.		118,050.		
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	4010609.				
			(ii) Other					
			b	Less: cost or other basis and sales expenses	3767938.			
			c	Gain or (loss)	242,671.			
	d	Net gain or (loss)		242,671.		242,671.		
	8 a	Gross income from fundraising events (not including \$ 19,377. of contributions reported on line 1c). See Part IV, line 18	a	138,586.				
			b	Less: direct expenses	138,473.			
c			Net income or (loss) from fundraising events		113.		113.	
9 a	Gross income from gaming activities. See Part IV, line 19	a	620.					
		b	Less: direct expenses					
		c	Net income or (loss) from gaming activities		620.		620.	
10 a	Gross sales of inventory, less returns and allowances	a	262,248.					
		b	Less: cost of goods sold	135,266.				
		c	Net income or (loss) from sales of inventory		126,982.	111,480.	15,502.	
Miscellaneous Revenue		Business Code						
11 a	<b>CAFE INCOME</b>	722210	21,660.			21,660.		
b	<b>MISC REVENUE</b>	713990	1,957.	1,957.				
c								
d	All other revenue							
e	<b>Total.</b> Add lines 11a-11d		23,617.					
12	<b>Total revenue.</b> See instructions.		4,922,402.	446,074.	15,502.	566,067.		

**Part IX Statement of Functional Expenses**

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 .....				
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 .....	315,090.	105,534.	127,474.	82,082.
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 .....	1,584,082.	1,116,429.	236,327.	231,326.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) .....				
9 Other employee benefits .....	107,191.	69,279.	20,580.	17,332.
10 Payroll taxes .....	130,262.	82,811.	26,153.	21,298.
11 Fees for services (non-employees):				
a Management .....				
b Legal .....	2,002.	1,007.	995.	
c Accounting .....	51,075.		51,075.	
d Lobbying .....				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees .....	35,910.		35,910.	
g Other .....	452,422.	266,549.	82,267.	103,606.
12 Advertising and promotion .....	54,702.	52,559.	1,804.	339.
13 Office expenses .....	177,179.	41,749.	72,995.	62,435.
14 Information technology .....	28,447.	14,144.	8,522.	5,781.
15 Royalties .....				
16 Occupancy .....				
17 Travel .....	52,656.	14,936.	12,372.	25,348.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings .....	370.	64.	103.	203.
20 Interest .....	6,855.		6,735.	120.
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....	77,408.	69,667.	3,871.	3,870.
23 Insurance .....	60,550.	58,405.	1,072.	1,073.
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.) .....				
a <b>EXHIBITION COST</b> .....	174,449.	174,449.		
b <b>PURCHASED ART COLLECTIO</b> .....	97,143.	97,143.		
c <b>SHIPPING AND STORAGE</b> .....	81,572.	76,034.	5,440.	98.
d <b>IN-KIND SUPPORT</b> .....	44,272.	3,994.		40,278.
e <b>MATERIALS</b> .....	36,404.	29,829.	5,805.	770.
f All other expenses .....	12,656.	9,398.	1,919.	1,339.
25 <b>Total functional expenses.</b> Add lines 1 through 24f	3,582,697.	2,283,980.	701,419.	597,298.
26 <b>Joint costs.</b> Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing .....	48,891.	1	266,528.
	2	Savings and temporary cash investments .....	2,318,261.	2	753,658.
	3	Pledges and grants receivable, net .....	1,248,508.	3	1,137,268.
	4	Accounts receivable, net .....	15,612.	4	16,188.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....	18,490.	5	250,000.
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L .....		6	
	7	Notes and loans receivable, net .....		7	
	8	Inventories for sale or use .....	120,240.	8	90,024.
	9	Prepaid expenses and deferred charges .....	38,849.	9	20,219.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	10a 1,710,296.		
	b	Less: accumulated depreciation .....	10b 1,553,626.		
	11	Investments - publicly traded securities .....	234,078.	10c 156,670.	
	12	Investments - other securities. See Part IV, line 11 .....	3,454,507.	11 5,716,998.	
	13	Investments - program-related. See Part IV, line 11 .....		12	
	14	Intangible assets .....		13	
	15	Other assets. See Part IV, line 11 .....	930,117.	14	
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	8,427,553.	15 930,117.	16 9,337,670.	
Liabilities	17	Accounts payable and accrued expenses .....	370,138.	17 325,888.	
	18	Grants payable .....		18	
	19	Deferred revenue .....	35,562.	19 64,063.	
	20	Tax-exempt bond liabilities .....		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .....		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22	
	23	Secured mortgages and notes payable to unrelated third parties .....	381,322.	23 18,793.	
	24	Unsecured notes and loans payable to unrelated third parties .....	100,000.	24	
	25	Other liabilities. Complete Part X of Schedule D .....		25	
	26	<b>Total liabilities.</b> Add lines 17 through 25 .....	887,022.	26 408,744.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets .....	-444,911.	27 412,058.	
	28	Temporarily restricted net assets .....	666,916.	28 958,461.	
	29	Permanently restricted net assets .....	7,318,526.	29 7,558,407.	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds .....		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund .....		31	
	32	Retained earnings, endowment, accumulated income, or other funds .....		32	
33	<b>Total net assets or fund balances</b> .....	7,540,531.	33 8,928,926.		
34	<b>Total liabilities and net assets/fund balances</b> .....	8,427,553.	34 9,337,670.		

**Part XI Financial Statements and Reporting**

- 1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant? .....
- b Were the organization's financial statements audited by an independent accountant? .....
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....  
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. ....

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2009)



**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4226621.	4279392.	3299778.	3576283.	3894759.	19276833.
2 Tax revenues levied for the organization'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	1638000.	2574000.	2059200.	1638001.	1404000.	9313201.
4 Total. Add lines 1 through 3	5864621.	6853392.	5358978.	5214284.	5298759.	28590034.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1829355.
6 Public support. Subtract line 5 from line 4.						26760679.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	5864621.	6853392.	5358978.	5214284.	5298759.	28590034.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	509,837.	635,702.	578,577.	363,197.	301,003.	2388316.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	-1,716.	-467.	5,711.	8,994.	15,502.	28,024.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	53,393.	92,898.	133,849.	36,467.	21,660.	338,267.
11 Total support. Add lines 7 through 10						31344641.

12 Gross receipts from related activities, etc. (see instructions) 12 2,500,566.

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

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	85.38 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	83.57 %

16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

**Part III Support Schedule for Organizations Described in Section 509(a)(2)** (Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>13 Total support</b> (Add lines 9, 10c, 11, and 12.)						

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

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2008 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2008 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests - 2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

**2009**

Name of the organization

Employer identification number

**SAN JOSE MUSEUM OF ART ASSOCIATION**

**23-7062028**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

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

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet 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 for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)



Name of organization

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>1</u>		\$ <u>125,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>2</u>		\$ <u>756,987.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>3</u>		\$ <u>107,400.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>4</u>		\$ <u>230,270.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>5</u>		\$ <u>80,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>6</u>		\$ <u>150,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

**SAN JOSE MUSEUM OF ART ASSOCIATION**

**23-7062028**

**Part II Noncash Property** (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Name of organization

Employer identification number

**SAN JOSE MUSEUM OF ART ASSOCIATION**

**23-7062028**

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<hr/> <hr/> <hr/>		<hr/> <hr/> <hr/>	
	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<hr/> <hr/> <hr/>		<hr/> <hr/> <hr/>	
	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<hr/> <hr/> <hr/>		<hr/> <hr/> <hr/>	
	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<hr/> <hr/> <hr/>		<hr/> <hr/> <hr/>	

**Schedule D**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2009**  
Open to Public Inspection

Name of the organization

**SAN JOSE MUSEUM OF ART ASSOCIATION**

Employer identification number  
**23-7062028**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 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 advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
- Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
 

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06 .....	2d
- Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_
- Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_
- Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....
- Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_
- Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....
- In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
 

(i) Revenues included in Form 990, Part VIII, line 1 .....	▶ \$ _____
(ii) Assets included in Form 990, Part X .....	▶ \$ _____
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
 

a Revenues included in Form 990, Part VIII, line 1 .....	▶ \$ <u>5,500.</u>
b Assets included in Form 990, Part X .....	▶ \$ _____

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

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

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

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	7,318,526.	7,318,526.			
b Contributions	239,881.				
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	7,558,407.	7,318,526.			

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment  %
- b Permanent endowment  100.00 %
- c Term endowment  %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	X
(ii) related organizations	3a(ii)	X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Investments - Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		613,310.	555,723.	57,587.
d Equipment		745,768.	703,325.	42,443.
e Other		351,218.	294,578.	56,640.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				156,670.



<b>Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements</b>		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	4,922,402.
2	Total expenses (Form 990, Part IX, column (A), line 25)	3,582,697.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	1,339,705.
4	Net unrealized gains (losses) on investments	48,690.
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV.)	
9	Total adjustments (net). Add lines 4 through 8	48,690.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	1,388,395.

<b>Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return</b>		
1	Total revenue, gains, and other support per audited financial statements	6,774,460.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a	Net unrealized gains on investments	48,690.
b	Donated services and use of facilities	1,704,012.
c	Recoveries of prior year grants	
d	Other (Describe in Part XIV.)	135,266.
e	Add lines 2a through 2d	1,887,968.
3	Subtract line 2e from line 1	4,886,492.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b	
b	Other (Describe in Part XIV.)	35,910.
c	Add lines 4a and 4b	35,910.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	4,922,402.

<b>Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return</b>		
1	Total expenses and losses per audited financial statements	5,386,065.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a	Donated services and use of facilities	1,704,012.
b	Prior year adjustments	
c	Other losses	
d	Other (Describe in Part XIV.)	135,266.
e	Add lines 2a through 2d	1,839,278.
3	Subtract line 2e from line 1	3,546,787.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b	
b	Other (Describe in Part XIV.)	35,910.
c	Add lines 4a and 4b	35,910.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	3,582,697.

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART III, LINE 1A: PERMANENT ART COLLECTION - THE COLLECTION CONSISTS OF**

**TWENTIETH AND TWENTY-FIRST CENTURY ARTWORK, INCLUDING PAINTINGS,**

**SCULPTURES, INSTALLATIONS, NEW MEDIA, PHOTOGRAPHY, DRAWINGS AND PRINTS,**

**ACQUIRED THROUGH PURCHASE OR CONTRIBUTION. THE COLLECTION IS NOT**

**RECOGNIZED AS AN ASSET IN THE STATEMENT OF FINANCIAL POSITION. EACH WORK**

**OF ART IS INVENTORIED AND CARED FOR, AND ACTIVITIES VERIFYING THE**

**COLLECTION'S INTEGRITY ARE PERFORMED CONTINUOUSLY. PURCHASES OF ART ARE**

**RECORDED AS NON-OPERATING DECREASES IN THE UNRESTRICTED NET ASSETS IN THE**

**Part XIV** Supplemental Information (continued)

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 BURGEONING PERMANENT COLLECTION INCLUDES OVER 2,000 MODERN AND CONTEMPORARY WORKS OF ART: PAINTINGS, SCULPTURE, INSTALLATION, NEW MEDIA, PHOTOGRAPHY, DRAWINGS, PRINTS, AND ARTISTS' BOOKS. SJMA IS THE ONLY COLLECTING ART INSTITUTION IN THE CITY AND THE ONLY MUSEUM IN THE SOUTH BAY AND PENINSULA DEDICATED EXCLUSIVELY TO ACQUIRING THE ART OF OUR TIMES. IN THE CONTEXT OF THE GREATER SAN FRANCISCO BAY AREA, THE MUSEUM IS ONE OF THREE INSTITUTIONS (ALONG WITH THE OAKLAND MUSEUM OF CALIFORNIA, AN HOUR NORTH, AND THE CROCKER ART MUSEUM, SACRAMENTO, TWO-AND-A-HALF HOURS NORTH) WIDELY KNOWN AND DEEPLY RESPECTED FOR SUPPORTING CALIFORNIA ARTISTS. SJMA HAS EARNED A REPUTATION FOR ACQUIRING PIVOTAL ARTISTS EARLY IN THEIR CAREERS AND FOR ITS WILLINGNESS TO LOOK BEYOND THE TRENDS OF THE ART MARKET TO EMBRACE THE WORK OF PRESCIENT, INDEPENDENT THINKERS WHO MAY WORK ON THE MARGINS OF THE MAINSTREAM. ALTHOUGH THE MUSEUM HAS NO ACQUISITIONS ENDOWMENT, IT HAS A HISTORY OF ATTRACTING SIGNIFICANT GIFTS OF ARTWORK FROM GENEROUS COLLECTORS AND ARTISTS WHO RESPECT THE DISTINCTIVENESS OF ITS PROGRAMS, ACCESSIBILITY, AND COLLECTIONS. IN RECOGNITION OF THE GREAT CAPACITY OF THE MUSEUMS IN SAN FRANCISCO (THE CULTURAL EPICENTER FOR THE BAY AREA), SJMA HAS DEFINED ITS COLLECTIONS IN CONTRADISTINCTION TO THOSE OF SUCH LARGER, WEALTHIER, AND MORE ESTABLISHED INSTITUTIONS. LOCATED SEVERAL BLOCKS FROM SAN JOSE STATE UNIVERSITY AND WITHIN 30 MINUTES OF APPROXIMATELY 14 OTHER COLLEGES AND COMMUNITY COLLEGES, SJMA IS A PRIMARY RESOURCE FOR UNIVERSITY STUDENTS AS WELL AS FOR THE AUDIENCES OF THE



**Part XIV** Supplemental Information (continued)

REGION, WHICH HAS THE GREATEST PROJECTED POPULATION GROWTH IN THE BAY AREA. IN JUST A GENERATION, SAN JOSE HAS METAMORPHOSED FROM AN AGRICULTURAL COMMUNITY INTO THE CAPITAL OF SILICON VALLEY, A HUB OF INNOVATION AND GLOBAL THINKING. ACCORDINGLY, SJMA HAS EXPANDED THE FOCUS OF ITS COLLECTION TO REFLECT THE HIGH-TECH INTERESTS, DYNAMIC CULTURAL DIVERSITY, AND INTERNATIONAL SCOPE OF ITS COMMUNITIES. THE MUSEUM SUSTAINS ITS LONGSTANDING COMMITMENT TO THE WORK OF CALIFORNIA ARTISTS, YET NOW ALSO STRIVES TO BRING GREATER NATIONAL AND INTERNATIONAL CONTEXT TO THE COLLECTION FOR THE FUTURE. IN CONCERT WITH THE REVISED 2009 MISSION STATEMENT, ACQUISITIONS WILL FOCUS ON FURTHER REFLECTING THE CREATIVITY, INNOVATION, DIVERSITY, AND GLOBALISM THAT CHARACTERIZE SILICON VALLEY.

THE MUSEUM'S PERMANENT COLLECTION HAS GROWN AT AN UNPRECEDENTED PACE OVER THE LAST DECADE, IN SCALE AND QUALITY. MORE THAN 35% OF THE WORKS IN THE COLLECTION HAVE BEEN ACQUIRED IN THE PAST DECADE AND 20% IN THE PAST FIVE YEARS ALONE. SJMA NOW BOASTS MANY WORKS OF MAJOR SIGNIFICANCE. ITS PERMANENT COLLECTION HAS BECOME A VALUABLE RESOURCE AND LEGACY FOR THE COMMUNITY. THE COLLECTION FEATURES PRIMARILY AMERICAN ART OF THE POST-WORLD WAR II PERIOD, PARTICULARLY BAY-AREA ART, NEW MEDIA, PHOTOGRAPHY, AND CONTEMPORARY REPRESENTATIONAL PAINTING.

SJMA HAS INSTITUTED NEW PLANS TO SHOWCASE THE COLLECTION AND TO INCREASE COMMUNITY AWARENESS OF THIS VALUABLE RESOURCE. THE MUSEUM DOES NOT HAVE DEDICATED PERMANENT-COLLECTION INSTALLATIONS, (DUE TO BOTH THE PARTICULARS OF ITS FACILITIES AND THE LACK OF A COHESIVE CHRONOLOGY IN ITS RELATIVELY YOUNG HOLDINGS). SJMA THUS FOCUSES ON PRESENTING SELECT GROUPINGS OF WORKS FROM THE COLLECTION TO FURTHER ART-HISTORICAL KNOWLEDGE AND EDUCATIONAL COMPARISONS. IN THE PAST TWO YEARS ALONE, SJMA HAS PRESENTED EIGHT

**Part XIV Supplemental Information** (continued)

LONG-TERM EXHIBITIONS DRAWN EXCLUSIVELY FROM THE COLLECTION, INCLUDING MANY WORKS THAT HAD NOT BEEN ON VIEW FOR SOME TIME. SJMA IS IMPLEMENTING TWO IMPORTANT COLLECTION INITIATIVES: (1) THEMATIC PERMANENT COLLECTION INSTALLATIONS, LINKED TO COMMUNITY INTERESTS AND ACCOMPANIED BY CROSS-DISCIPLINARY PUBLIC PROGRAMS AND PARTICIPATORY EDUCATIONAL FEATURES; AND (2) COMMISSIONS OF WORKS OF ART BY ARTISTS OF ASIAN AND LATINO HERITAGE THAT ARE SOCIALLY EMBEDDED AND ENGAGED WITH THE COMMUNITY. THROUGH THE PROGRAMMING OFFERED IN CONJUNCTION WITH THESE PERMANENT-COLLECTION PROJECTS, SJMA SEEKS TO INCREASE ITS AUDIENCES' UNDERSTANDING OF THE ARTISTIC PROCESS AND ENGAGE THE WEALTH OF COMMUNAL INTELLECTUAL CAPACITY.

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

**PART X: UNCERTAINTY IN INCOME TAXES - EFFECTIVE JULY 1, 2009**

THE MUSEUM IMPLEMENTED THE NEW ACCOUNTING REQUIREMENTS ASSOCIATED WITH UNCERTAINTY IN INCOME TAXES. ACCORDINGLY, AN ENTITY SHALL INITIALLY RECOGNIZE THE FINANCIAL STATEMENT EFFECTS OF A TAX POSITION WHEN IT IS MORE-LIKELY-THAN-NOT, BASED ON THE TECHNICAL MERITS, THAT THE POSITION WILL BE SUSTAINED UPON EXAMINATION. IT ALSO PROVIDES GUIDANCE FOR DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, ACCOUNTING IN INTERIM PERIODS, DISCLOSURE AND TRANSITION. THE MUSEUM BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS.

**PART XII, LINE 2D - OTHER ADJUSTMENTS:**

**Part XIV** Supplemental Information (continued)

COST OF GOODS SOLD: 135266.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

INVESTMENT EXPENSE: 35910.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD: 135266.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

INVESTMENT EXPENSE: 35910.



**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 (add col. (a) through col. (c))	
		GALA DINNER (event type)	MUSEUM STORE GUILD (event type)	NONE (total number)		
Revenue	1	Gross receipts	141,170.	16,793.		157,963.
	2	Less: Charitable contributions	18,957.	420.		19,377.
	3	Gross income (line 1 minus line 2)	122,213.	16,373.		138,586.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages	69,172.			69,172.
	8	Entertainment	18,287.			18,287.
	9	Other direct expenses	34,754.	16,260.		51,014.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				( 138,473 )
	11	Net income summary. Combine line 3, column (d), and line 10				113.

**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, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)				( )
8	Net gaming income summary. Combine line 1, column (d), and line 7				

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? \_\_\_\_\_

b If "Yes," explain: \_\_\_\_\_

11 Does the organization operate gaming activities with nonmembers? \_\_\_\_\_

12 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? \_\_\_\_\_

	Yes	No
9a		
10a		
11		
12		

**13** Indicate the percentage of gaming activity operated in:

**a** The organization's facility ..... **13a** %

**b** An outside facility ..... **13b** %

**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

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 of the third party:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

**16** Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

Director/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 to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

	Yes	No
13a		
13b		
14		
15a		
15b		
15c		
16		
17a		
17b		

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2009**

Open to Public Inspection

Name of the organization

**SAN JOSE MUSEUM OF ART ASSOCIATION**

Employer identification number

**23-7062028**

**Part I Questions Regarding Compensation**

**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.

- |  |   |
|--|---|
| <input type="checkbox"/> First-class or charter travel             | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence            |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees              |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)            |

**b** If any of the boxes on line 1a are 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

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

**3** 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.

- |  |   |
|--|---|
| <input type="checkbox"/> Compensation committee              | <input checked="" type="checkbox"/> Written employment contract                     |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- 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 section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.**

**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:

- a** The organization?
- 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:

- a** The organization?
- b** Any related organization?
- 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 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

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
<b>1b</b>	X	
<b>2</b>		X
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2009

**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.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
SUSAN KRANE	(i)	239,481.	0.	0.	2,917.	2,077.	244,475.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
PATRICIA MCLEOD	(i)	145,941.	0.	0.	1,883.	12,564.	160,388.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							



**Part III** Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

**PART I, LINE 1A: PAYMENTS WERE MADE IN ACCORDANCE WITH A WRITTEN EMPLOYMENT AGREEMENT APPROVED BY THE BOARD OF TRUSTEES.**



**SCHEDULE L**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Transactions With Interested Persons**

▶ Complete if the organization answered  
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,  
or Form 990-EZ, Part V, line 38a or 40b.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

**2009**

Open To Public  
Inspection

Name of the organization **SAN JOSE MUSEUM OF ART ASSOCIATION** Employer identification number **23-7062028**

**Part I Excess Benefit Transactions** (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 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 ..... ▶ \$ \_\_\_\_\_

**Part II Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
	SUSAN KRANE - PUR				X	250,000.	250,000.		X	X
<b>Total</b> .....				▶ \$	250,000.					

**Part III Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule L (Form 990 or 990-EZ) 2009

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2009**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

Name of the organization **SAN JOSE MUSEUM OF ART ASSOCIATION** Employer identification number **23-7062028**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1	Art - Works of art .....	X	48		REVENUE NOT REPORTED
2	Art - Historical treasures .....				
3	Art - Fractional interests .....	X	1		REVENUE NOT REPORTED
4	Books and publications .....				
5	Clothing and household goods .....				
6	Cars and other vehicles .....				
7	Boats and planes .....				
8	Intellectual property .....				
9	Securities - Publicly traded .....	X	2	31,976.	SALES PRICE
10	Securities - Closely held stock .....				
11	Securities - Partnership, LLC, or trust interests .....				
12	Securities - Miscellaneous .....				
13	Qualified conservation contribution - Historic structures .....				
14	Qualified conservation contribution - Other .....				
15	Real estate - Residential .....				
16	Real estate - Commercial .....				
17	Real estate - Other .....				
18	Collectibles .....				
19	Food inventory .....				
20	Drugs and medical supplies .....				
21	Taxidermy .....				
22	Historical artifacts .....				
23	Scientific specimens .....				
24	Archeological artifacts .....				
25	Other ▶ ( <u>EVENTS GOODS,</u> )	X	11	44,272.	FMV
26	Other ▶ ( <u>AUCTION ITEMS</u> )	X	340	15,280.	SALES PRICE
27	Other ▶ ( _____ )				
28	Other ▶ ( _____ )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment ..... 29 0

	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 the entire holding period? .....		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? .....		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? .....		X
b If "Yes," describe in Part II.		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2009

**Part II**

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33.  
Also complete this part for any additional information.

SCHEDULE M, LINE 33: EFFECTIVELY JULY 2003, THE ASSOCIATION ELECTED TO CHANGE ITS METHOD OF ACCOUNTING FOR ITS PERMANENT ART COLLECTION FOR FINANCIAL REPORTING PURPOSES. PRIOR TO JULY 1, 2003, SJMA CAPITALIZED ITS ART COLLECTION. ALL PURCHASED ART WAS RECORDED AT COST AND DONATED ART OBJECTS WERE RECORDED AS CONTRIBUTIONS AT THEIR ESTIMATED FAIR VALUE. EFFECTIVE JULY 1, 2003, THE ASSOCIATION EXPENSES ALL PURCHASED ART AND DOES NOT RECORD DONATED ART ITEMS. THE CHANGE REFLECTS THE PREFERRED METHOD OF ACCOUNTING FOR A PERMANENT COLLECTION AMONG MUSEUMS. THERE ARE TOTAL OF 49 WORKS OF ART THAT WERE CONTRIBUTED TO THE MUSEUM DURING THE FISCAL YEAR 2009-2010.

SCHEDULE O  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public  
Inspection

Name of the organization

SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number

23-7062028

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

MUSEUM FOSTERS AWARENESS OF ARTISTS' BROAD CONTRIBUTIONS TO SOCIETY: IT  
ENGAGES AUDIENCES WITH THE ART OF OUR TIME AND THE VITALITY OF THE  
CREATIVE PROCESS.

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

THE MUSEUM SEEKS TO MAKE A CONTRIBUTION TO ART-HISTORICAL SCHOLARSHIP,  
ADDRESS SIGNIFICANT ISSUES OF THE DAY, AND OFFER PROGRAMS REFLECTIVE OF  
A COMMUNITY RICH WITH ETHNIC, RACIAL, AND LINGUISTIC DIVERSITY,  
CONNECTING THE VISITOR WITH THE VISUAL CULTURE OF OUR TIMES. TIMELY,  
THEMATIC CONTEXTS FOR EXHIBITIONS ADDRESS PIVOTAL ASPECTS OF ART  
HISTORY, CULTURAL CONCERNS AND PUBLIC INTERESTS. SJMA BELIEVES THAT  
ARTISTS PLAY A VITAL ROLE IN A CREATIVE SOCIETY AND PROVIDES  
OPPORTUNITIES FOR ARTISTS TO CREATE NEW WORKS, INCUBATE NEW IDEAS, AND  
CONNECT WITH OUR COMMUNITY AND ITS RESOURCES.

THE MUSEUM PRESENTS 9 TO 12 EXHIBITIONS PER YEAR, INCLUDING ONE-PERSON  
AND THEMATIC GROUP SHOWS THAT SPAN A RANGE OF MEDIA, STYLES, CONTENT,  
AND TECHNIQUE. THE MUSEUM'S CURATORIAL STAFF NOW ORGANIZES  
APPROXIMATELY 80% OF THE EXHIBITIONS IN A GIVEN SEASON. IN-HOUSE  
EXHIBITIONS ARE FREQUENTLY ACCOMPANIED BY SCHOLARLY PUBLICATIONS AND  
TRAVEL TO OTHER INSTITUTIONS NATIONALLY. GIVEN ITS LOCATION IN THE  
HEART OF THE HIGH-TECHNOLOGY CULTURE OF SILICON VALLEY, THE MUSEUM HAS  
A SUBSTANTIAL COMMITMENT TO EXHIBITING NEW WORK IN NEW MEDIA.

IN FY 09-10, SJMA HAS HAD ON VIEW ONE LONG-TERM EXHIBITION LET'S LOOK

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

Schedule O (Form 990) 2009

932211  
02-03-10

**SCHEDULE O**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990.

OMB No. 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**SAN JOSE MUSEUM OF ART ASSOCIATION**

Employer identification number

**23-7062028**

AT ART: ANIMALS IN ART IN A FAMILY-FOCUSED GALLERY; NON-TRAVELING

TEMPORARY EXHIBITIONS ORGANIZED IN HOUSE (TODD SCHORR: AMERICAN

SURREAL; ALEXANDER CALDER: COLOR IN MOTION; VARIATIONS ON A THEME;

JUICY PAINT; REAL AND HYPERREAL; NEW STORIES FROM THE EDGE OF ASIA:

PLASTIC LIFE;); AND FOUR TRAVELING EXHIBITIONS DEVELOPED BY OTHER

INSTITUTIONS (WOMEN'S WORK: CONTEMPORARY WOMEN PRINTMAKERS FROM THE

COLLECTIONS OF JORDAN D. SCHNITZER AND HIS FAMILY FOUNDATION; ANSEL

ADAMS: EARLY WORKS; CHUCK CLOSE PRINTS: PROCESS AND COLLABORATION; AND

WAYNE THIEBAUD: SEVENTY YEARS OF PAINTING).

UNDER THE STRATEGIC PLAN, THE MUSEUM IS UNDERTAKING EXHIBITIONS THAT

REACH OUT TO DIVERSE AUDIENCES. INTRODUCED IN FY 09-10, THE NEW SERIES

IN NEW STORIES FROM THE EDGE OF ASIA FEATURES ARTISTS FROM PACIFIC RIM

COUNTRIES AND CULTURES. NEW ACQUISITIONS BY ARTISTS FROM DIVERSE

BACKGROUNDS ARE ALSO SHOWCASED. THE MUSEUM RECENTLY ACQUIRED ITS FIRST

WORK BY A SOUTH ASIAN ARTIST AND IS CURRENTLY PLANNING AN EXHIBITION

DEVOTED TO SOUTH ASIAN ART FROM BAY AREA COLLECTIONS (OVER 200,000

PEOPLE OF INDIAN HERITAGE LIVE IN THE SOUTH BAY). A RECENT INSTALLATION

OF WORK BY ARTISTS WITH TIES TO MEXICO COINCIDED WITH THE CITY'S

CELEBRATION OF THE MEXICAN BICENTENNIAL.

THE SCOPE OF SJMA'S COLLECTION AND THE NATURE OF EXHIBITIONS DRAWN FROM

THE COLLECTION ARE DESCRIBED IN SCHEDULE D PART III, LINE 4.

THROUGH THE REGULARLY CHANGING SCHEDULE OF INNOVATIVE EXHIBITIONS, BOTH

TRAVELING EXHIBITIONS AND THOSE DRAWN FROM THE MUSEUM'S PERMANENT

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

Schedule O (Form 990) 2009

932211  
02-03-10

**SCHEDULE O**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990.

OMB No. 1545-0047

**2009**  
Open to Public  
Inspection

Name of the organization

SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number  
23-7062028

COLLECTION, SJMA SERVED 93,130 PEOPLE.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

IT UP WITH EVIDENCE. HANDS-ON ART MAKING IS A COMPONENT OF VIRTUALLY ALL YOUTH AND FAMILY PROGRAMS: LEARNING-BY-DOING IS A VEHICLE FOR ILLUMINATING THE IDEAS WITHIN A WORK OF ART AND EXPLORING RELATED TECHNIQUES AND MEDIA. SJMA ALSO OFFERS ADULTS HANDS-ON ART EXPERIENCES THROUGH ITS DIY ART SERIES AND PERIODIC WORKSHOPS ON TOPICS SUCH AS DIGITAL PHOTOGRAPHY. SJMA'S CREATIVE MINDS TALKS FOSTER INTELLECTUAL ENGAGEMENT AND CROSS-DISCIPLINARY AND CROSS-CULTURAL PERSPECTIVES. PROGRAMS DESIGNED FOR MULTIGENERATIONAL FAMILY VISITS (COMMON IN SILICON VALLEY, PARTICULARLY AMONG LATINO AND ASIAN AUDIENCES) INCLUDE COMMUNITY DAY CELEBRATIONS, THE KORET FAMILY GALLERY, AND ART PACKS THAT OFFER OPPORTUNITIES FOR FAMILY MEMBERS OF MANY AGES TO CREATE, PLAY, TALK, AND LEARN TOGETHER.

SJMA IS KNOWN FOR INNOVATION AND ACCESSIBILITY. IT WAS AMONG THE FIRST MUSEUMS TO PIONEER CELL-PHONE TECHNOLOGY AND TO USE IPOD TOUCHES AS AN ALTERNATIVE TO TRADITIONAL AUDIO TOURS. TO HELP MAKE CONTEMPORARY ART MORE ACCESSIBLE AND TO GIVE A FACE TO THE PEOPLE BEHIND-THE-SCENES, ARTIST'S INTERVIEWS AND CURATOR'S COMMENTARY ARE OFTEN AVAILABLE ON IPOD TOUCHES ADJACENT TO THE ARTWORKS, A TECHNOLOGICAL EXTENSION OF THE TYPICAL OBJECT LABEL. THIS CONTENT IS ALSO ON SJMA'S WEBSITE AND YOUTUBE. THE MUSEUM STRIVES TO CONNECT IN-GALLERY AUDIENCES WITH ITS ONLINE PRESENCE AND TO SEED VISITATION VIA THE WEB. FOR EXAMPLE, THE GIANT ARTICHOKE VIDEO CREATED FOR THE EXHIBITION ROAD TRIP WAS UPLOADED

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

Schedule O (Form 990) 2009

932211  
02-03-10



SCHEDULE O  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public  
Inspection

Name of the organization

SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number

23-7062028

TO YOUTUBE MONTHS BEFORE THE EXHIBITION OPENED AS A HYBRID  
MARKETING/INTERPRETATION EFFORT THAT INCLUDED A CALL TO ACTION AND TIED  
INTO AN IN-GALLERY ART PROJECT: IT WAS VIEWED OVER 80,000 TIMES. THIS  
MUSE AWARD-WINNING PROJECT TYPIFIES THE FRUGAL YET ENTREPRENEURIAL  
APPROACH TO INTERPRETATION AT SJMA.

ANSWERING THE QUESTIONS THAT VISITORS MAY HAVE WHILE VISITING IS ONE OF  
THE MOST CHALLENGING GOALS OF ANY MUSEUM, GIVEN THE NUMBERS, RANGE OF  
AGES, CULTURAL BACKGROUNDS, AND LEVELS OF EXPERTISE OF OUR AUDIENCE.

SJMA'S SOLUTION IS TO DESIGN INTERPRETATION THAT IS MAXIMALLY  
RESPONSIVE TO THE WAYS THAT PEOPLE LEARN. SJMA'S INTERPRETIVE  
STRATEGIES ENGAGE THE VISITOR AND FACILITATE LEARNING, EMPOWERING  
VISITORS WITH THE OPPORTUNITY TO ANSWER THEIR OWN QUESTIONS. SJMA  
IMPLEMENTS AN ADDITIVE, LAYERED APPROACH TO LEARNING VIA: THE CREATIVE  
USE OF TECHNOLOGY, E.G. ARTIST'S INTERVIEWS AVAILABLE ON IPOD TOUCHES  
STATIONED BY SPECIFIC WORKS OF ART; INTERPRETATION STATIONS THAT OFTEN  
INCLUDE HANDS-ON ARTMAKING; VISITOR RESPONSE VEHICLES SUCH AS MAGNETIC  
TABLES; CROSS-DISCIPLINARY CONTEXTS, SUCH AS SCIENTIFIC PERSPECTIVES;  
AND WELCOMING IN-PERSON CONTACT WITH DOCENTS AND MUSEUM EXPERIENCE  
REPRESENTATIVES.

THE MUSEUM EXPERIENCE AND EDUCATION (MEE) DEPARTMENT FURTHERS SJMA'S  
BELIEF THAT ART ENRICHES AND TRANSFORMS LIVES. EDUCATIONAL ACTIVITIES  
FURTHER THE MUSEUM'S ROLE AS A VITAL COMMUNITY GATHERING PLACE,  
ENCOURAGE DIALOGUE, AND PROMOTE CROSS-CULTURAL UNDERSTANDING. AT SJMA,  
ART IS A CONDUIT FOR SOCIAL AND COMMUNITY INTERACTION. THROUGH ITS

**SCHEDULE O**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990.

OMB No. 1545-0047

**2009**  
Open to Public  
Inspection

Name of the organization

**SAN JOSE MUSEUM OF ART ASSOCIATION**

Employer identification number  
**23-7062028**

MULTIGENERATIONAL PROGRAMS, SJMA STRIVES TO BE INTELLECTUALLY RIGOROUS,  
BOLDLY OPEN-MINDED, ACCESSIBLE TO THE DIVERSE CONSTITUENTS OF THE BAY  
AREA, AND A CHAMPION OF THE ARTISTIC PROCESS. SJMA VALUES THE  
CONTRIBUTIONS THAT ARTISTS MAKE TO SOCIETY AND PROVIDES OPPORTUNITIES  
FOR ITS VISITORS TO CONNECT WITH THE ARTISTS WHOSE WORK IS ON VIEW OR  
IN THE PERMANENT COLLECTION. THE MEE DEPARTMENT AIMS TO MAKE THE MUSEUM  
A RESOURCE FOR LIFELONG LEARNING FOR THE CREATIVE THINKERS OF SILICON  
VALLEY.

SJMA'S EDUCATIONAL PROGRAMS REACHED MORE THAN 41,700 PEOPLE DURING THE  
YEAR.

FORM 990, PART VI, SECTION B, LINE 11: 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.

FORM 990, PART VI, SECTION B, LINE 12C: ALL TRUSTEES, STAFF MEMBERS AND  
COMMUNITY MEMBERS OF BOARD COMMITTEES MUST FILL OUT 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 CODE OF ETHICS. SPECIFICALLY, THE DISCLOSURE  
STATEMENT ASKS IF SJMA HAS A BUSINESS RELATIONSHIP WITH ANY ENTITY FROM

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

Schedule O (Form 990) 2009

932211  
02-03-10

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990.

OMB No. 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**SAN JOSE MUSEUM OF ART ASSOCIATION**

Employer identification number

**23-7062028**

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, OFFICER, DIRECTOR OR EMPLOYEE. IN ADDITION, DISCLOSURE IS REQUIRED IF THE INDIVIDUAL OR IMMEDIATE FAMILY MEMBERS HOLD AN OWNERSHIP INTEREST IN A CLOSELY HELD COMPANY OR A 5% OWNERSHIP INTEREST IN A PUBLIC COMPANY WITH 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 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

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

Schedule O (Form 990) 2009

932211  
02-03-10

**SCHEDULE O**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990.

OMB No. 1545-0047

**2009**  
Open to Public  
Inspection

Name of the organization

**SAN JOSE MUSEUM OF ART ASSOCIATION**

Employer identification number  
**23-7062028**

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.

IN ADDITION TO SALARY, SJMA ENDEAVORS TO PROVIDE HEALTH AND RETIREMENT  
BENEFITS COMMENSURATE WITH THE ABOVE PHILOSOPHY. HOWEVER, DUE TO THE  
CURRENT RECESSION, THE BOARD OF TRUSTEES SUSPENDED CONTRIBUTIONS TO  
RETIREMENT BENEFITS FOR FY 09-10. CONTRIBUTIONS WILL BE REINSTATED FOR FY  
10-11.

THE SALARY LEVELS 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. 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. SALARY LEVELS FOR THESE POSITIONS WERE NOT INCREASED IN FY 09-10.

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.

**SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS:**

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

Schedule O (Form 990) 2009

932211  
02-03-10

**SCHEDULE O**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990.

OMB No. 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**SAN JOSE MUSEUM OF ART ASSOCIATION**

Employer identification number

**23-7062028**

(A) NAME OF PERSON: **SUSAN KRANE**

(A) PURPOSE OF LOAN:

**PURCHASE A PRIMARY RESIDENCE WITHIN SAN JOSE, CALIFORNIA METROPOLITAN AREA.**

(B) LOAN TO OR FROM ORGANIZATION? = **FROM**

(C) ORIGINAL PRINCIPAL AMOUNT \$ **250000.** (D) BALANCE DUE \$ **250000.**

(E) LOAN IN DEFAULT? = **NO**

(F) APPROVED BY BOARD OR COMMITTEE? = **YES**

(G) WRITTEN AGREEMENT? = **YES**

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
	FURNITURE & FIXTURES											
1	FURNITURES AND FIXTURES	VARIES		.000	16	161,002.			161,002.	151,991.		3,712.
	* 990 PAGE 10 TOTAL					161,002.		0.	161,002.	151,991.	0.	3,712.
	FURNITURE & FIXTURES											
2	MACHINERY & EQUIPMENT	VARIES		.000	16	543,919.			543,919.	465,458.		36,229.
	MACHINERY & EQUIPMENT											
3	NETWORK	VARIES		.000	16	201,849.			201,849.	201,426.		212.
	* 990 PAGE 10 TOTAL					745,768.		0.	745,768.	666,884.	0.	36,441.
	MACHINERY & EQUIPMENT											
	OTHER											
4	SOFTWARE	VARIES		.000	16	190,216.			190,216.	111,521.		27,354.
	LEASEHOLD											
5	IMPROVEMENTS	VARIES		.000	16	613,310.			613,310.	545,822.		9,901.
	* 990 PAGE 10 TOTAL					803,526.		0.	803,526.	657,343.	0.	37,255.
	OTHER											
	* GRAND TOTAL 990 PAGE 10 DEPR					1710296.		0.	1710296.	1476218.	0.	77,408.