DLN: 93493094014130 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019 D Employer identification number B Check if applicable SAN JOSE MUSEUM OF ART ASSOCIATION □ Address change 23-7062028 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 110 SOUTH MARKET STREET ☐ Amended return ☐ Application pending (408) 271-6840 City or town, state or province, country, and ZIP or foreign postal code SAN JOSE, CA  $\,$  951132383  $\,$ G Gross receipts \$ 7,872,316 Name and address of principal officer H(a) Is this a group return for SUSAN SAYRE BATTON ☐Yes **☑**No subordinates? 110 SOUTH MARKET STREET H(b) Are all subordinates SAN JOSE, CA <u>9</u>51132<u></u>383 ☐Yes ☐No ıncluded? 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW SJMUSART ORG L Year of formation 1969 **M** State of legal domicile K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities SAN JOSE MUSEUM OF ART (SJMA) FOSTERS APPRECIATION AND AWARENESS OF THE CONTRIBUTION OF ART AND ARTISTS TO SOCIET Activities & Governance 2 Check this box ► ☐ 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) . 21 4 21 4 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) . . . 6 203 Total unrelated business revenue from Part VIII, column (C), line 12 58,656 **b** Net unrelated business taxable income from Form 990-T, line 34 -25,677 Prior Year **Current Year** 8 Contributions and grants (Part VIII, line 1h) . 3,768,114 5,568,281 Ravenua 607,919 411,798 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 577,231 584,742 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 171,054 212,556 5,124,318 6,777,377 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 7,000 0 **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) 2,818,853 2,983,330 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶447,041 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 2,508,116 2,134,464 <u>---</u> 5,333,969 5,117,794 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . -209,651 1,659,583 Net Assets or Fund Balances Beginning of Current Year End of Year 15,150,029 16,818,887 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 565,899 517,741 14,584,130 16,301,146 Net assets or fund balances Subtract line 21 from line 20 . Signature Block 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 2020-04-01 Signature of officer Sign Here SUSAN SAYRE BATTON EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2020-04-01 P00233621 Paid self-employed Firm's name ARMANINO LLP Firm's EIN ▶ 94-6214841 Preparer Use Only Firm's address ► 50 W SAN FERNANDO ST STE 500 Phone no (408) 200-6400 SAN JOSE, CA 95113 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2018)					Page <b>2</b>							
Pa	rt III Statemen	t of Program Servi	ce Accomplis	hments									
	Check if Sch	edule O contains a resp	onse or note to	any line in this Part III		🗹							
1	Briefly describe the	organization's mission											
SEE :	SCHEDULE O												
_	5.1.1												
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							
	,	nese new services on Sc											
3	Did the organization cease conducting, or make significant changes in how it conducts, any program												
	services?					🗌 Yes 🗹 No							
	If "Yes," describe th	ese changes on Schedu	le O										
4	Section 501(c)(3) a		ons are required	to report the amount	largest program services, as measu of grants and allocations to others, t								
4a	(Code	) (Expenses \$	2,907,227	ıncludıng grants of \$	) (Revenue \$	393,708 )							
	See Additional Data												
4b	(Code	) (Expenses \$	917,391	ıncludıng grants of \$	) (Revenue \$	18,720 )							
	See Additional Data												
4c	(Code	) (Expenses \$	144,179	ıncludıng grants of \$	) (Revenue \$	38,926 )							
	See Additional Data												
4d	Other program serv	rices (Describe in Sched	ule O )			_							
	(Expenses \$	ınc	luding grants of	\$	) (Revenue \$	)							
4e	Total program sei	rvice expenses 🟲	3,968,7	97									
						Form <b>990</b> (2018)							

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Pai	tIV 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)? If "Yes," complete Schedule A 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 2	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or $X$ as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
	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? If "Yes," complete Schedule D, Part VII 📆	11b		No
	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? If "Yes," complete Schedule D, Part VIII 2	11c		No
	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? If "Yes," complete Schedule D, Part IX 2	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e		No
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII 2	12a	Yes	
Ь	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section $170(b)(1)(A)(II)$ ? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and $IV$	16		No
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? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	ا مما		

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .

21

Nο

Nο

19

20a

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Par	Checklist of Required Schedules (continued)			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23	<b>Yes</b> Yes	No
24a	Schedule J	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?  If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?  If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
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)			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L,</i> Part IV			
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,	28a		No
	Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🛸	29	Yes	
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>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
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>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			Ш

 ${f c}$  Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 

Nο d If "Yes," indicate the number of Forms 8282 filed during the year . . . . 7d

Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e No 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . No If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 7h

Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during 8 9a Did the sponsoring organization make any taxable distributions under section 4966? . . . 9a **b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . 9h Section 501(c)(7) organizations. Enter

a Initiation fees and capital contributions included on Part VIII, line 12 . . . 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b

11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders . 11a **b** Gross income from other sources (Do not net amounts due or paid to other sources 11b

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers.

a Is the organization licensed to issue qualified health plans in more than one state?

Note. See the instructions for additional information the organization must report on Schedule O 13a Enter the amount of reserves the organization is required to maintain by the states in

13b which the organization is licensed to issue qualified health plans . . . . c Enter the amount of reserves on hand . . . . . . . . . . . . . . . 13c

14a

14b

15

No

No

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14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . .

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . . .

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

i dit vi	dovernance, Planagement, and Disclosure For each Fes Fesponse to lines 2			a ivo	) IES	PULISE	= 10 1	IIIES
	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched Check if Schedule O contains a response or note to any line in this Part VI							<b>✓</b>
Section	n A. Governing Body and Management							
						Y	es	No
<b>1a</b> Ente	r the number of voting members of the governing body at the end of the tax year	1a		21				
If the	ere are material differences in voting rights among members of the governing							

						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		21			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O						
Ь	Enter the number of voting members included in line 1a, above, who are independent	<b>1</b> b		21			
2	Did any officer, director, trustee, or key employee have a family relationship or a busine officer, director, trustee, or key employee?				2		No
3	Did the organization delegate control over management duties customarily performed by of officers, directors or trustees, or key employees to a management company or other p			ct supervision	3		No
4	Did the organization make any significant changes to its governing documents since the	prior F	Form 990 wa	as filed? .	4	Yes	_

14	the number of voting members of the governing body at the end of the tax year	1a	21			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
Ь	Enter the number of voting members included in line 1a, above, who are independent	1b	21			
2	Did any officer, director, trustee, or key employee have a family relationship or a busine officer, director, trustee, or key employee?			2		No
3	3 Did the organization delegate control over management duties customarily performed by or under the direct supervisio of officers, directors or trustees, or key employees to a management company or other person? .					
4	4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .					
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets? .					
6	Did the organization have members or stockholders?			6		No
7a	Did the organization have members, stockholders, or other persons who had the power to members of the governing body?			7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by)	meml	oers, stockholders, or	<b>7</b> b		No

	<b>1b</b>   21			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)	_
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	

5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7</b> b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	<b>8</b> b	Yes	
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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	2.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10ь		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	1
ь	Other officers or key employees of the organization	15b	Yes	
		-		

members of the governing body?	/a		INO
<b>b</b> Are any governance decisions of the organization reserved to (or persons other than the governing body?			No
Did the organization contemporaneously document the meetings the following	held or written actions undertaken during the year by		
a The governing body?	8a	Yes	
<b>b</b> Each committee with authority to act on behalf of the governing b	oody? 8b	Yes	
Is there any officer, director, trustee, or key employee listed in P organization's mailing address? If "Yes," provide the names and a			No
Section B. Policies (This Section B requests information ab	out policies not required by the Internal Revenue Co	de.)	
		Yes	No
a Did the organization have local chapters, branches, or affiliates?	10a		No
b If "Yes," did the organization have written policies and procedure and branches to ensure their operations are consistent with the o			
a Has the organization provided a complete copy of this Form 990 t form?	to all members of its governing body before filing the	Yes	
Describe in Schedule O the process, if any, used by the organizat	ion to review this Form 990		
a Did the organization have a written conflict of interest policy? If "	No," go to line 13	Yes	
<ul> <li>Were officers, directors, or trustees, and key employees required conflicts?</li> </ul>	to disclose annually interests that could give rise to	Yes	
Did the organization regularly and consistently monitor and enfor Schedule O how this was done	ce compliance with the policy? If "Yes," describe in	Yes	
Did the organization have a written whistleblower policy?		Yes	
Did the organization have a written document retention and desti	ruction policy?	Yes	
Did the process for determining compensation of the following pe persons, comparability data, and contemporaneous substantiation			
The organization's CEO, Executive Director, or top management of	official	Yes	
Other officers or key employees of the organization		Yes	
If "Yes" to line 15a or 15b, describe the process in Schedule O (se	ee instructions)		
Did the organization invest in, contribute assets to, or participate taxable entity during the year?			No
If "Yes," did the organization follow a written policy or procedure in joint venture arrangements under applicable federal tax law, a status with respect to such arrangements?	nd take steps to safeguard the organization's exempt		

List the States with which a copy of this Form 990 is required to be filed▶

16a 17 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply lacksquare Own website  $\ \square$  Another's website  $\ \square$  Upon request  $\ \square$  Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year 20

Part VII

(14) HUNG LIU

TRUSTEE

TRUSTEE

TRUSTEE

(15) LISA LUBINER

(17) EVELYN NEELY

(16) SUSAN MCGOWAN

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

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

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

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

- year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount
- of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid • List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the
- organization and any related organizations • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest
- compensated employees, and former such persons Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(E) (A) (F) (B) (C) (D) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W- 2/1099-(W-2/1099organization and Individual to or director Highest employ MISC) MISC) organizations Ē related Institutional 호 below dotted nest organizations employ 3 line) con trustee P pensat Ē 12.00 (1) TAD FREESE Х CO-PRESIDENT 21 00 (2) CHERYL KIDDOO Χ 0 0 CO-PRESIDENT 4 00 (3) WILLIAM FAULKNER TREASURER Х Х n 8 00 (4) CORNELIA PENDLETON Х SECRETARY 2 00 (5) PETER CROSS 0 TRUSTEE 2 00 (6) ANNEKE DURY TRUSTEE 0 0 1.00 (7) EILEEN FERNANDES TRUSTEE 2 00 (8) JERRY HIURA 0 Х 0 TRUSTEE 5 00 (9) LYS HOUSE 0 0 TRUSTEE 1.00 (10) JEANNINE JACOBSEN TRUSTEE 1 00 (11) RICHARD KARP 0 Х TRUSTEE 7 00 (12) ROBERT LINDO 0 TRUSTEE 4 00 (13) PETER LIPMAN TRUSTEE

1 00

2 00

1 00

2 00

Х

Х

0

Name and Title

compensation from the organization ▶ 3

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) Estimated

Page 8

	Name and Thie	hours per week (list any hours for related	than o	one b	ox, in of tor/t	unle fice trust		son	compensation from the organization (W 2/1099-MISC)		s	amount of compen from organizat	of other sation the
		organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	MISC)		relat organiz	ed
	AH NORTH	1 00	Х							0	0		0
(10) 1EA	NNTE DEDROZA										-		
TRUSTEE		1 00	×							0	0		0
(20) HILL	DV CHANDELL	5.00											
TRUSTEE	UI SHANDELL		×							0	이		0
(21) MAF	RSHA WITKIN	1 00								0			0
TRUSTEE	E	•••	×							٥			
(22) SUS	SAN SAYRE BATTON	40 00			×				230,0	20	ا		16,597
EXECUIT	VE DIRECTOR		••••						250,5				
	AN SPANG	40 00			×				110,0	00	0		6,044
FINANCE	DIRECTOR STIN BERTRAND					-							
		40 00					×		130,4	51	0		6,550
DIRECTO	OR OF DEVELPMENT										$\dashv$		
	o-Total						<u> </u>						
	al from continuation sheets to Part V al (add lines 1b and 1c)	•					<b>`</b>  -		470,451	0			29,191
2 T	otal number of individuals (including but f reportable compensation from the orga	not limited to						ceiv	,	00,000	<u> </u>		
												Yes	No
	old the organization list any <b>former</b> offic ne 1a? <i>If "Yes," complete Schedule J for</i>												
	, ,									-	3		No
0	or any individual listed on line 1a, is the rganization and related organizations gr	eater than \$150	. 9000,	If "Ye	s," (	com	plete S	che	dule J for such				
ir	ndividual		•		•	•	•	•		[	4	Yes	
	nd any person listed on line 1a receive o ervices rendered to the organization? <i>If</i> "								ganızatıon or ındı • • • •	vidual for	5		No
Sect	ion B. Independent Contractors									L			
	omplete this table for your five highest of		depend	lent c	ontr	acto	rs tha	t red	ceived more than	\$100,000 of com	pen	sation	
fr	om the organization Report compensat		ndar ye	ar en	dıng	wit	h or w	ıthır	the organization	<u>`</u>	- 1		
	Name and b	(A) usiness address							Descr	(B) aption of services		<b>(C</b> Compen	
CATERED	) TOO								CATERING S MUSEUM	ERVICES FOR THE			181,698
	ETER STREET								11032011				
	LO ALTO, CA 94303 E SECURITY COMPANY INC								SECURITY S	ERVICE FOR THE			121,529
150 S AL	JTUMN SUITE B								MUSEUM				
SAN JOS	E, CA 95110								601/6==	TON FOR EVALUATION	NC		102.00:
	CONSTRUCTION								AND REMOD	ION FOR EXHIBITION EL	NS		102,001
	LITTLE ORCHARD STREET E, CA 95125												

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

(C)

Position (do not check more

(D)

Reportable

(E)

Reportable

(B)

Average

Part		Statement of	Revenue								rage <b>3</b>
		Check if Schedul	e O contains	respo	onse or note to any	y line in t	hıs Part VII			<u> </u>	🗆
							( <b>A)</b> revenue	e fu	(B) lated or xempt inction	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections
	1:	a Federated campaig	ns	1a				re	evenue		512 - 514
Contributions, Gifts, Grants and Other Similar Amounts		<b>b</b> Membership dues		1b	169,315						
ora nou		c Fundraising events		1c	92,300						
Š, ( An		d Related organizatio		1d	<u>'</u> 						
Gifts, Grants illar Amounts		e Government grants (co		1e	1,015,002						
ıs,		f All other contributions,		10	1,010,002						
tior sr.S		and similar amounts no above		1f	4,291,664						
퓰		g Noncash contribution	ons included								
Contributions, and Other Sim				39	7,826						
<u>ه</u>		<b>h Total.</b> Add lines 1a	-1f	•	•		5,568,281				
4					Busines	s Code					
nue	<b>2</b> a	PUBLIC PROGRAMS				713990	:	384,202		.202	
Service Revenue	b	ART CLASS CONTRACTS	S/TU			713990		18,720		,720	
JC e	c	LOANED ART				713990		8,876	8	.876	
Ser	d	1		_							
E a	e	, ———		_							
Program	f	All other program se	rvice revenue								
₫.	g	Total. Add lines 2a-2	f		<b>&gt;</b>	411,798					
		Investment income (ii			interest, and other		451,74	2			451,743
		similar amounts). Income from investme			and proceeds 1	<u> </u>	431,7-	1			431,743
			(ı) Rea		(II) Personal						
	6a	Gross rents		02.205							
	Ŀ	Less rental expenses	1	02,285 0		-					
	•	Rental income or (loss)	1	02,285							
	c	Net rental income o	r (loss)	•		┪	102,28	5			102,285
			(ı) Securit	ies	(II) Other						
	7 a	Gross amount from sales of	$\epsilon$	42,631							
		assets other than inventory									
	Ŀ	Less cost or				$\dashv$					
		other basis and sales expenses	5	09,632							
		Gain or (loss)		32,999		_					
		I Net gain or (loss) . Gross income from fi			<b>•</b>	_	132,99	9			132,999
<u>a</u>	Ua	(not including \$	92,300	of							
eun		contributions reporte See Part IV, line 18		а	481,969	9					
ev.	Ŀ	Less direct expense		ь	481,969	_					
er	c	Net income or (loss)	from fundrais	ing ev	rents •	_		0			
Other Revenue	9a	Gross income from g See Part IV, line 19	amıng actıvıtı	es							
		See Fait IV, lille 19		a	12,059	9					
	Ŀ	Less direct expense:	s	Ь	(	0					
	•	Net income or (loss)	from gaming	activit	ies		12,05	9			12,059
	10	Gross sales of invent returns and allowand									
				а	200,920	0					
	Ł	Less cost of goods s	sold	b	103,33	8					
	(	Net income or (loss)		ınvent			97,58	2	38,926	58,656	
	11	Miscellaneous	Revenue		Business Code	20	63	0	630		
	11	lamisc income			/139		0.	.0	030		
	Ŀ	<u> </u>									
	•										
	(										
	(	All other revenue .									
	•	Total. Add lines 11a	-11d		· . •		63				
	12	<b>2 Total revenue.</b> See	Instructions						45. 55.	== 2= -	
							6,777,37	/	451,354	58,656	699,086 Form <b>990</b> (2018)

Forr	n 990 (2018)				Page <b>10</b>
	art IX Statement of Functional Expenses tion 501(c)(3) and 501(c)(4) organizations must complete all col	-	,	, ,	
	Check if Schedule O contains a response or note to any	line in this Part IX .			🗸
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	363,168	160,604	140,793	61,771
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	2,180,945	1,754,411	241,516	185,018
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	80,683	61,370	9,325	9,988
9	Other employee benefits	163,811	132,006	8,390	23,415
10	Payroll taxes	194,723	147,225	27,933	19,565
11	Fees for services (non-employees)				
a	a Management				
ŀ	o Legal				
C	c Accounting	48,145		48,145	
C	d Lobbying				
e	e Professional fundraising services See Part IV, line 17		_	<del></del>	
	Investment management fees	43,899		43,899	
	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	642,062	507,884	83,178	51,000
12	Advertising and promotion	213,515	205,035	3,166	<u> </u>
	Office expenses	529,731	412,243	62,414	<u> </u>
14	Information technology	55,404	27,628	9,656	18,120
	Royalties				<b></b>
	Occupancy				<b></b>
	Travel	149,662	134,694	13,073	1,895
	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
	Conferences, conventions, and meetings	3,596	2,633	544	419
	Interest			!	<b></b>
	Payments to affiliates				<del></del>
	Depreciation, depletion, and amortization	1,877	1,690	94	
	Insurance	44,419	41,315	1,936	1,168
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O )				
	a PURCH ART COLLECTION I	167,497	167,497		
	b MATERIALS	106,620	98,659	6,567	1,394
	c EXHIBITION COST	73,807	73,807		
	d MISC	54,230	40,096	1,327	12,807

5,117,794

3,968,797

701,956

447,041

Form **990** (2018)

e All other expenses

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

		Check if Schedule O contains a response or not	te to an	y line in this Part IX			
					<b>(A)</b> Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			1,925,602	1	1,231,460
	2	Savings and temporary cash investments .		[		2	718,496
	3	Pledges and grants receivable, net	1,292,552	3	2,714,992		
	4	Accounts receivable, net		[	63,100	4	47,301
	5	Loans and other receivables from current and for trustees, key employees, and highest compensations of the school		5			
s	6	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L		6			
Assets	7	Notes and loans receivable, net		7			
Š	8	Inventories for sale or use		•	68,948	8	66,745
~	9	Prepaid expenses and deferred charges			120,907	9	130,896
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,710,296			
	b	Less accumulated depreciation	<b>10</b> b	1,705,690	6,483	10c	4,606
	11	Investments—publicly traded securities .			10,742,320	11	10,974,274
	12	Investments—other securities See Part IV, line		12			
	13	Investments—program-related See Part IV, line			13		
	14	Intangible assets		[		14	
	15	Other assets See Part IV, line 11			930,117	15	930,117

16.818.887

345,881

171.860

517.741

1.751.671

5,077,278

15.150.029

436,863

129.036

565.899

1.686.050

4,137,471

16

17

18

19

20

21

22 23

24

25

26

27

28

Form 990 (2018)

23

24

26

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28

16

17

Total assets.Add lines 1 through 15 (must equal line 34) . .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Accounts payable and accrued expenses .

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

complete lines 27 through 29, and lines 33 and 34.

Total liabilities. Add lines 17 through 25 .

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Unrestricted net assets

3a

3b

No

Form 990 (2018)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

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

Audit Act and OMB Circular A-133?

### Additional Data

Software ID:

**Software Version:** 

**EIN:** 23-7062028

Name: SAN JOSE MUSEUM OF ART ASSOCIATION

Form 990 (2018)

#### Form 990, Part III, Line 4a:

EXHIBITIONSSJMA'S UNIQUE ARTISTIC PROGRAM PRESENTS CULTURALLY DIVERSE. THEMATICALLY RESONANT, AND CRITICALLY ENGAGING CONTEMPORARY ART THAT IS BOTH LOCALLY RELEVANT AND NATIONALLY AND INTERNATIONALLY SIGNIFICANT. FIGHT TO TEN ROTATING EXHIBITIONS PER YEAR PRESENT THE WORK OF SIGNIFICANT INTERNATIONALLY ACCLAIMED AND EMERGING ARTISTS WHOSE CREATIVE INTERESTS AND INSIGHTFUL APPROACHES TO CONTEMPORARY LIFE RESONATE WITH DEFINING CHARACTERISTICS OF SAN JOSE AND THE SILICON VALLEY - FROM ITS RICH CULTURAL DIVERSITY TO ITS HALLMARK INNOVATIVE ETHOS (SEE SCHEDULE O FOR CONTINUATION) RECENT INITIATIVES INCLUDE A SUSTAINED COMMITMENT TO CONTEMPORARY VIETNAMESE ART SUPPORTED BY A SIGNIFICANT OUTREACH PROGRAM TO THE LOCAL VIETNAMESE COMMUNITY-ONE OF THE LARGEST DIASPORIC COMMUNITIES IN THE WORLD, AN EXHIBITION SERIES CALLED "NEW STORIES FROM THE EDGE OF ASIA" THAT PRESENTS CUTTING-EDGE WORK BY PACIFIC RIM ARTISTS. AND THOUGHTFUL GROUP EXHIBITIONS DRAWN BOTH FROM THE MUSEUM'S PERMANENT COLLECTION OF MORE THAN 2.600 OBJECTS AND FROM LOANED WORKS OF ART THAT TOUCH ON SOCIALLY RELEVANT TOPICS FROM IMMIGRATION TO ARTIFICIAL INTELLIGENCE. A RECENTLY ANNOUNCED NEW COMMITMENT TO ART AND TECHNOLOGY BUILDS ON STRENGTHS OF THE COLLECTION AND KEY INTERESTS OF THE LOCAL COMMUNITY SIMA PRESENTED AN AMBITIOUS EXHIBITION PROGRAM IN FY19 TO HONOR THE LAUNCH OF ITS 50TH ANNIVERSARY SEASON THREE MAJOR ORIGINAL EXHIBITIONS DINH O LE TRUE JOURNEY IS RETURN - THE LARGEST SOLO EXHIBITION OF THE ACCLAIMED VIETNAMESE ARTIST'S WORK IN THE UNITED STATES IN MORE THAN A DECADE, UNDERSOUL JAY DEFEO, WHICH CONTEXTUALIZED FOUR PERMANENT COLLECTION WORKS BY THE BAY AREA NATIVE WITH PHOTOGRAPHIC WORKS DRAWN FROM THE RICH HOLDINGS OF THE JAY DEFEO FOUNDATION, AND RINA BANERJEE MAKE ME A SUMMARY OF THE WORLD -A MAJOR MID-CAREER RETROSPECTIVE CO-ORGANIZED BY SJMA AND THE PENNSYLVANIA ACADEMY OF FINE ARTS - WERE ACCOMPANIED BY ORIGINAL CATALOGUES THAT INCLUDED SIGNIFICANT NEW CONTRIBUTIONS TO SCHOLARSHIP THAT HEIGHTENED SJMA'S STATURE IN THE LOCAL AND NATIONAL/INTERNATIONAL ART WORLD THE MUSEUM ALSO SHOWCASED ITS LONG-STANDING COMMITMENT TO COMMUNITY RELEVANCE WITH ISSUES-BASED GROUP EXHIBITIONS INCLUDING THE HOUSE IMAGINARY, A PERMANENT COLLECTION EXHIBITION INSPIRED BY THE HOUSING CRISIS IN THE SILICON VALLEY, AND OTHER WALKS, OTHER LINES, AN EXPLORATION OF THE POLITICS AND PLEASURES OF WALKING. WHICH WAS PRESENTED AS PART OF A COMMUNITY-WIDE SERIES OF PROGRAMS ON MOBILITY AND MIGRATION CALLED "NEW TERRAINS MOBILITY AND MIGRATION" THAT WAS SPEARHEADED BY THE MUSEUM IN CONJUNCTION WITH A STEERING COMMITTEE OF LOCAL ARTS ORGANIZATIONS. THE SCOPE OF SIMA'S COLLECTION AND THE NATURE OF EXHIBITIONS DRAWN FROM THE COLLECTION ARE DESCRIBED IN SCHEDULE D PART III. LINE 4 NUMBER OF PEOPLE SERVED 41.083

#### Form 990, Part III, Line 4b:

DELIVER OVER 5.000 INSTRUCTIONAL HOURS AT THE MUSEUM AND IN SANTA CLARA COUNTY SCHOOLS EACH YEAR, MAKING THE MUSEUM THE LARGEST PROVIDER OF IN-SCHOOL ARTS EDUCATION IN SANTA CLARA COUNTY (SEE SCHEDULE O FOR CONTINUATION) CLASSROOM-BASED PROGRAMS RANGE FROM FREE HOUR-LONG DOCENT PRESENTATIONS ON ART HISTORY TO SEMESTER-LONG ARTIST RESIDENCIES ON-SITE PROGRAMS INCLUDE A ROBUST MUSEUM FIELD TRIP PROGRAM, FAMILY PROGRAMMING, INCLUDING THREE FREE COMMUNITY DAYS THAT ATTRACT OVER 5,000 PEOPLE PER YEAR, AND A POPULAR KIDS SUMMER ART CAMP INSPIRED BY EXHIBITIONS ON VIEW THE MUSEUM ALSO OFFERS A RANGE OF LECTURES AND PUBLIC PROGRAMS FOR ADULT AUDIENCES. FROM ARTIST TALKS AND GALLERY TOURS TO ARTMAKING WORKSHOPS 17.490 PEOPLE PARTICIPATED IN THESE PROGRAMS IN FY19 WITH A CENTRAL FOCUS ON EQUITY AND ACCESS, EDUCATION AND PUBLIC

EDUCATION AND PROGRAMSSJMA'S EXTENSIVE EDUCATION PROGRAMS, WHICH SERVE MORE THAN 45,000 SCHOOL CHILDREN PER YEAR, FILL MULTIPLE GAPS IN LOCAL K-12 ARTS EDUCATION THE MUSEUM EMPLOYS FIVE TEACHING ARTISTS, TEN GALLERY TEACHERS, AND MORE THAN 65 VOLUNTEER DOCENTS WHO COLLECTIVELY

PROGRAMS EXPANDED IN BOTH DEPTH AND BREADTH IN FY19 IN FEBRUARY 2019, SJMA LAUNCHED FACEBOOK FIRST FRIDAYS, A TRANSFORMATIONAL NEW PROGRAM SUPPORTED BY THE FACEBOOK ART DEPARTMENT THAT KEEPS THE MUSEUM OPEN FOR FREE ON THE FIRST FRIDAY EVENING OF EACH MONTH, WITH MUSIC, A CASH BAR, AND OPEN GALLERIES THESE POPULAR EVENTS ATTRACT A DIVERSE GROUP OF VISITORS, MANY OF THEM FIRST TIME VISITORS TO THE MUSEUM. IN MARCH 2019. SJMA LAUNCHED A NEW ACCESS PROGRAM THAT MAKES ADMISSION FREE FOR YOUTH THROUGH AGE 17, COLLEGE STUDENTS WITH ID, AND TEACHERS THIS SIGNIFICANT REDUCTION IN ADMISSIONS FEES - INTENDED TO BUILD CLOSER TIES WITH THE COMMUNITY AND TO PROMOTE RETURN VISITATION - INCREASED. ATTENDANCE FROM COLLEGE STUDENTS BY 30% SJMA'S ARTS EDUCATION CURRICULUM ALSO EXPANDED IN FY19 ITS AWARD-WINNING STEAM (SCIENCE

TECHNOLOGY ENGINEERING ARTS AND MATH) CLASSROOM RESIDENCY PROGRAM, SOWING CREATIVITY, EXPANDED TO INCLUDE A FIFTH-GRADE ART-AND-ENGINEERING CURRICULUM ROOTED IN THE PRINCIPLES OF DESIGN THINKING THAT WAS BETA TESTED WITH 2000 STUDENTS IN 72 SCHOOLS SIMA'S GRANT-SUPPORT FREE FIELD

TRIP PROGRAM FOR TITLE I STUDENTS ALSO EXPANDED SIGNIFICANTLY TO BRING OVER 4.000 TITLE I STUDENTS TO THE MUSEUM FOR AN INOUIRY BASED TOUR AND STANDARDS-BASED HANDS-ON ARTMAKING ACTIVITY NUMBER OF PEOPLE SERVED 66,560

MUSEUM STORETHE MUSEUM STORE IS LOCATED OFF THE MAIN LOBBY OF SJMA THIS ACTIVE GIFT AND BOOKSTORE 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

Form 990, Part III, Line 4c:

CONTINGENT OF LONGTIME VOLUNTEERS

SCHEDU Form 990 990EZ)	Complete if the organization is a section 302(c)(5) organization of a section							2018
Department of th			► Go to	www.irs.gov/Forms	9 <u>90</u> for the late	est information		Open to Public Inspection
lame of the	organizat						Employer identifi	cation number
Part I	Bosson f	or Dublic (	harity Stat	<b>us</b> (All organization	c must comple	to this part \ C	23-7062028	
				e it is (For lines 1 thro			see instructions.	
<b>1</b> _ /	A church, co	nvention of	churches, or as	ssociation of churches	described in <b>sec</b>	tion 170(b)(1)	(A)(i).	
2 _ /	school de	scribed in <b>se</b>	tion 170(b)(	1)(A)(ii). (Attach Sch	nedule E (Form 9	990 or 990-EZ))		
3 🗌 /	hospital o	r a cooperati	ve hospital ser	vice organization desci	rıbed ın <b>section</b>	170(b)(1)(A)(	iii).	
	A medical rename, city,		nization operat	ed in conjunction with	a hospital descr	ibed in <b>section</b> :	170(b)(1)(A)(iii). I	Enter the hospital's
		tion operated <b>iv).</b> (Comple		t of a college or unive	rsity owned or o	perated by a gov	ernmental unit descr	ibed in <b>section 170</b>
	, , , , , , ,		,	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	۱)(v).	
	ection 17	D(b)(1)(A)(	<b>vi).</b> (Complete			-	ınıt or from the gene	ral public described in
8 🗆 🕹	A communit	y trust descr	ıbed ın <b>sectio</b> ı	n 170(b)(1)(A)(vi)	(Complete Part I	I)		
				escribed in <b>170(b)(1)</b> lee instructions Enter				lege or university or
f	rom activiti nvestment	es related to income and i	ıts exempt fur ınrelated busır	(1) more than 331/3% nctions—subject to cer ness taxable income (le omplete Part III )	taın exceptions,	and (2) no more	than 331/3% of its s	upport from gross
	•			d exclusively to test fo	r public safety S	See section 509	(a)(4).	
r	nore public	ly supported	organizations	d exclusively for the be described in <b>section 5</b> the type of supporting	<b>09(a)(1)</b> or se	ction 509(a)(2	). See section 509(	
a 🗆 1	<b>Type I.</b> A s organization	upporting org	janization opei	rated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
r	nanagemer	t of the supp		pervised or controlled in ation vested in the sar and C.				
				supporting organizatio				ated with, its
d 🗆 1	Type III no unctionally	on-function integrated 1	ally integrate he organizatio	ions) You must com  d. A supporting organi  n generally must satis  rt IV, Sections A and	ization operated fy a distribution	in connection wi requirement and	th its supported orga	
e 🗆 (	Check this b	ox if the org	anızatıon recei	ved a written determir	nation from the I		pe I, Type II, Type I	II functionally
	-		on-functionally organizations	integrated supporting	organization			
9 Provide	the follow	ng informatio	n about the s	upported organization(	s)		_	
	me of supp rganızatıon	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	organization in your governing document? monetary support (see instructions) instruction in your governing document?			(vi) Amount of other support (see instructions)
					Yes	No		
otal								
	rk Reduct	ion Act Not	ce, see the I	nstructions for	Cat No 1128!	5F :	Schedule A (Form 9	990 or 990-EZ) 201

Public support percentage for 2017 Schedule A, Part II, line 14

and stop here. The organization qualifies as a publicly supported organization

box and stop here. The organization qualifies as a publicly supported organization

14

organization

instructions

supported organization

Page 2

85 570 %

▶ ☑

Schedule A (Form 990 or 990-EZ) 2018

	III. If the organization fa	ils to qualify und	der the tests list	ed below, please	e complete Part	III.)	
S	ection A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	2,746,922	3,014,695	3,278,807	3,768,114	5,568,281	18,376,819
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	1,544,400	1,544,501	1,872,000	2,340,000	2,340,000	9,640,901
4	<b>Total.</b> Add lines 1 through 3	4,291,322	4,559,196	5,150,807	6,108,114	7,908,281	28,017,720
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)						1,637,220
5	Public support. Subtract line 5 from line 4						26,380,500
_ 5	ection B. Total Support						
	Calendar year	(a)2014	<b>(b)</b> 2015	(c)2016	(d)2017	(e)2018	(f)Total
7	(or fiscal year beginning in) ► Amounts from line 4	4,291,322	4,559,196	5,150,807	6,108,114	7,908,281	28,017,720
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	444,825	498,400	404,114	448,749	554,028	2,350,116
9	Net income from unrelated business activities, whether or not the business is regularly carried on	35,659	44,194	60,013	62,847	58,656	261,369
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI )	11,489	36,563	305,507	431,265	494,658	1,279,482
11	<b>Total support.</b> Add lines 7 through 10						31,908,687
12	Gross receipts from related activities,	etc (see instruction	ns)			12	3,890,072
13	First five years. If the Form 990 is fo	-	,		•	````	nization,
	check this box and <b>stop here</b>					<u></u>	
	ection C. Computation of Public						
14	Public support percentage for 2018 (lin	ie 6, column (f) div	vided by line 11, co	olumn (f))		14	82 670 %

16a 33 1/3% support test-2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

17a 10%-facts-and-circumstances test-2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

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

h 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization gualifies as a publicly

33 1/3% support test-2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

P	art IIII Support Schedule for						
	(Complete only if you c						ler Part II. If
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	below, please co	omplete Part II.	)	
30	Calendar year		43.50/5		412.554.7		(0) =
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	<b>Public support.</b> (Subtract line 7c						
S	from line 6 ) ection B. Total Support						
	Calendar year			I	T		
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
h	Unrelated business taxable income						
_	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
12							
	loss from the sale of capital assets						
13	(Explain in Part VI ) <b>Total support.</b> (Add lines 9, 10c,						
	11, and 12 )						
14	First five years. If the Form 990 is fo	r the organization	's fırst, second, tl	nird, fourth, or fift	:h tax year as a se	ction 501(c)(3) c	rganızatıon,
	check this box and stop here						▶ 🗆
Se	ection C. Computation of Public						
15	Public support percentage for 2018 (lin	ie 8, column (f) di	ivided by line 13,	column (f))		15	
16	Public support percentage from 2017 S	chedule A, Part II	II, line 15			16	
Se	ection D. Computation of Invest						
17	Investment income percentage for 201	1 <b>8</b> (line 10c, colur	mn (f) divided by	line 13, column (f	())	17	
18	Investment income percentage from 2	<b>017</b> Schedule A, <sup>1</sup>	Part III, line 17			18	
19a	331/3% support tests—2018. If the	organization did r	ot check the box	on line 14, and lir	ne 15 is more than	33 1/3%, and lir	ne 17 is not
	more than 33 1/3%, check this box and s						▶ □
	33 1/3% support tests—2017. If the						
	not more than 33 1/3%, check this box	-			·		▶ □
20	Private foundation. If the organization		-				▶□
		AL GIG HOL CHECK O	. 202 011 11116 14, 1	a, or industrial	Callo DOX allu 366		

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V ) Section A. All Supporting Organizations

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

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

3а Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported

organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a

amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6

7

8

answer line 10b below

the organization had excess business holdings)

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

complete Part I of Schedule L (Form 990 or 990-EZ)

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

9b which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	<b>11</b> c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization	-		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
_	<u> </u>			
	ection D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		103	-140
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations		l	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions)		
	The organization satisfied the Activities Test Complete line 2 below	•		
	b			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test Answer (a) and (b) below.	į	Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement			
,		2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	_		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI.</b>	3a		
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard	3h		

Sche	lule A (Form 990 or 990-EZ) 2018			Page <b>6</b>
Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying tru instructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		

•	income or for management, conservation, or maintenance of property held for production of income (see instructions)			
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
ь	Average monthly cash balances	<b>1</b> b		
- 0	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see			

			(optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	<b>1</b> b	
С	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	

**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

See instructions

6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions

7 Excess distributions carryover to 2019. Add lines 31 and 4c

8 Breakdown of line 7 a Excess from 2014. . . . . .

**b** Excess from 2015. . . . . c Excess from 2016. . . . .

**d** Excess from 2017. e Excess from 2018.

Schedule A (Form 990 or 990-EZ) (2018)

### **Additional Data**

## Software ID:

Software Version: EIN: 23-7062028

Name: SAN JOSE MUSEUM OF ART ASSOCIATION

Schedule A (Form 990 or 990-EZ) 2018

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

instructions)
Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

**Supplemental Financial Statements** 

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for the latest information.

DLN: 93493094014130 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization **Employer identification number** SAN JOSE MUSEUM OF ART ASSOCIATION 23-7062028 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 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 ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, 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) 8 and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), 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

(i) Revenue included on 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 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1

following amounts relating to these items

Assets included in Form 990, Part X

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 52283D Schedule D (Form 990) 2018

Par	t III	Organizations Main	ntaining Coll	ections of Art,	Histori	cal T	reasu	ıres, or	Other	Similar As	ssets (cont	inued)	
3		g the organization's acquisi s (check all that apply)	ition, accession	, and other record	ls, check	any of	the fo	llowing t	hat are a	significant i	use of its col	lection	
а	✓	Public exhibition			d	✓	Loan	or excha	ange prog	ırams			
b	<b>✓</b>	Scholarly research			e		Othe	r					
С	<b>✓</b>	Preservation for future ge	enerations										
4	Provi Part :	de a description of the org XIII	anızatıon's coll	ections and explai	n how the	ey furth	ner the	e organız	ation's ex	kempt purpo	se in		
5		ng the year, did the organize ts to be sold to raise funds								ılar	✓ Yes	□ N	o
Pa	rt IV	Escrow and Custod Complete if the organ X, line 21.			orm 990	, Part	IV, lı	ne 9, or	reporte	ed an amou	ınt on Forn	า 990,	Part
1a		e organization an agent, tr ded on Form 990, Part X?	ustee, custodia	n or other interme	edıary for	contri	bution	s or othe	er assets	not	☐ Yes	□ N	0
b	If "Ye	es," explain the arrangeme	ent in Part XIII	and complete the	following	table				A	mount		_
c		nning balance						•	1c				_
d	_	tions during the year							1d				_
е	Distr	butions during the year						İ	1e				_
f		ng balance						l	1f				_
2a		he organization include an	amount on For	m 990. Part X. lın	e 21. for	escrow	or cu	، stodial a	ccount lia	bility?	☐ Yes		_ n
		es," explain the arrangeme									_		•
	rt V	Endowment Funds.											
				(a)Current year		rior yea		(c)Two ye		(d)Three yea		our yea	rs back
<b>1</b> a	Beginr	ning of year balance		11,606,60		11,040			.0,136,566		541,697		749,328
b	Contril	butions		782,02	3	369	,747		200,000		5,264		181,422
С	Net in	vestment earnings, gains,	and losses	528,00	4	680	,407		1,202,543		92,134		108,512
d	Grants	s or scholarships					$\neg$						
е		expenditures for facilities ograms		506,49	2	483	3,979		498,676		502,529		497,565
f	Admın	istrative expenses											
g	End of	year balance	[	12,410,14	3	11,606	,608	1	1,040,433	10,	136,566	10,	541,697
2	Provi	de the estimated percenta	ge of the curre	nt year end baland	ce (line 1	g, colu	mn (a)	)) held a	s				
а	Board	d designated or quasi-endo	owment 🟲	0 800 %									
b	Perm	nanent endowment 🕨 7	76 500 %										
c	Temp	porarily restricted endowm	ent ▶ 22 7	00 %									
3a	Are t	percentages on lines 2a, 2b here endowment funds not	•		ation that	are h	eld an	d admını	stered fo	r the			
	_	nization by nrelated organizations									2-(:)	Yes Yes	No
	.,	3				•					3a(i) 3a(ii)	res	No
ь		related organizations   . es" on 3a(ii), are the relate		s listed as required	on Sche	dule R	· .				3b		
4		ribe in Part XIII the intend	<del>-</del>	•									
Pa	rt VI	Land, Buildings, an Complete if the organ			orm 990	Part	TV li	ne 11a	See For	-m 990 Pa	rt X line 1	0	
	Descr	ription of property	(a) Cost or other	er basis (b) Co	st or other					lepreciation	· ·	ook valu	e
1a	Land												
b	Buildir	ngs											
		hold improvements				6:	13,310			608,704			4,606
		ment				74	<b>1</b> 5,768			745,768			0

4,606

351,218

351,218

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

Part VII Investments—Other Securities. Complete if the organ	nization answ	ered "Yes" on Form	Page <b>3</b> 990, Part IV, line 11b.
See Form 990, Part X, line 12.  (a) Description of security or category (including name of security)	(b) Book value	(c) Me Cost or end	thod of valuation -of-year market value
(1) Financial derivatives	. Value		
(3)Other	-		
(A)			
(B)			
(C)			
(D)			
(E)			
(F) (G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 )	<b>•</b>		
Part VIII Investments—Program Related.	-	o 11c Soo Form 00	O Part V June 12
Complete if the organization answered 'Yes' on Form 99  (a) Description of investment	b) Book value	(c) Me	thod of valuation
(1)		Cost or end	-of-year market value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )			
Part IX Other Assets. Complete if the organization answered 'Yes' on (a) Description	Form 990, Par	t IV, line 11d See Fori	(b) Book value
(1) BENEFICIAL INTEREST IN PERPETUAL TRUST (2)			930,117
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
			▶ 930,117
See Form 990, Part X, line 25.	_		THE OF THE
1. (a) Description of liability (1) Federal income taxes	( <b>B</b> ) Bo	ok value	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	<b>&gt;</b>		
2. Liability for uncertain tax positions. In Part XIII, provide the text of the foor organization's liability for uncertain tax positions under FIN 48 (ASC 740). Che			

Part XI

2

5

1

2

d

3

5

Part XIII

See Additional Data Table

Part XII

Schedule D (Form 990) 2018

Page 4

2,924,917 6,733,478

43,899

6,777,377

7,941,379

2,867,484

5,073,895

43,899

5.117.794

Schedule D (Form 990) 2018

Add lines 4a and 4b .

Add lines 2a through 2d .

Return Reference

b	Donated services and use of facilities
С	Recoveries of prior year grants
d	Other (Describe in Part XIII )
е	Add lines 2a through 2d
3	Subtract line <b>2e</b> from line <b>1</b>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1
а	Investment expenses not included on Form 990, Part VIII, line 7b .

Donated services and use of facilities . . .

Other (Describe in Part XIII ) . . . . .

Supplemental Information

Subtract line 2e from line 1 . . . .

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Net unrealized gains (losses) on investments . . .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Add lines **4a** and **4b** . . . . . . . . . . . . . . .

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . .

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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . .

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Total expenses and losses per audited financial statements . . . . . . . .

2a

2b

2c 2d

4a

4b

2a

2b

2c

2d

4a

4b

Explanation

103,338		
•	2e	
	3	
43,899		
	4c	

57.433

2.764.146

2,764,146

103,338

43.899

2e

3

4c

5

Schedule D (Form 990) 2018	Page <b>5</b>
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

## **Additional Data**

Software ID: Software Version:

**EIN:** 23-7062028

Name: SAN JOSE MUSEUM OF ART ASSOCIATION

Supplemental 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 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

Supplemental Information	n						
Return Reference	Explanation						
PART III, LINE 4	THE SAN JOSE MUSEUM OF ART SEEKS TO BUILD A COLLECTION OF THE HIGHEST QUALITY AND WITH THE GREATEST POTENTIAL FOR COMMUNITY ENGAGEMENT, THEREBY FULFILLING ITS MISSION TO BE A VALUA BLE RESOURCE FOR THE PUBLIC THE MUSEUM'S PERMANDENT COLLECTION INCLUDES OVER 2, 600 MODERN AND CONTEMPORARY WORKS OF ART IN A VARIETY OF MEDIA, FROM PAINTINGS, SCULPTURE, PHOTOGRAPH Y AND WORKS ON PAPER TO DIGITAL AND TIME-BASED ARTWORK SIMA IS THE ONLY COLLECTING ART IN STITUTION IN THE CITY OF SAN JOSE, THE ONLY CONTEMPORARY ART MUSEUM IN SILICON VALLEY ACCR EDITED BY THE AMERICAN ALLIANCE OF MUSEUMS (AAM) AND A MEMBER OF THE ASSOCIATION OF ART MU SEUM DIRECTORS (AAMD). SIMA PROUDLY HAS EARNED A REPUTATION FOR ACQUIRING ART WORKS BY PIV OTAL ARTISTS WHOSE PRACTICES ADDRESS PRESSING CULTURAL, POLITICAL AND SOCIAL ISSUES, AND H AS A TRADITION OF ACQUIRING LANDMARK ARTWORK IN NEW MEDIA AND EMERGING FIELDS. THE MUSEUM ALSO HAS A SUCCESSFUL TRACK RECORD OF ACQUIRING AND EMERGING FIELDS THE MUSEUM ALSO HAS A SUCCESSFUL TRACK RECORD OF ACQUIRING AND EXHIBITING WORK BY CALIFORNIA ARTISTS OF NATIONAL AND INTERNATIONAL SIGNIFICANCE, AND NOW LOOKS TO ARTISTS WHO EXPLORE NEW REPRE SENTATIONAL STRATEGIES IN THE DIGITAL AGE, BEFITTING A MUSEUM IN THE CAPITAL OF SILICON VA LLEY THE MUSEUM'S NEW COLLECTING PLAN (APPROVED IN 2018) IDENTIFIES THE FOLLOWING GOALS TO REPRESENT. SIGNIFICANT ART HISTORICAL DEVELOPMENTS IN MODERN AND CONTEMPORARY ART FROM THE 1960S TO THE PRESENT, TO PUT THE WORK OF PIVOTAL WEST COAST ARTISTS IN CONTEXT OF WORK BY MAJOR NATIONAL AND INTERNATIONAL ARTISTS, TO EMBRACE CULTURAL DIVERSITY AND SOCIAL ENGA GEMENT, TO REFLECT ARTISTIC EXPERIMENTATION AND INNOVATION, AND TO ADDRESS ISSUES OF IMPOR TANCE TO THE MUSEUM'S COMMUNITIES LOCATED SEVERAL BLOCKS FROM SAN JOSE STATE UNIVERSITY A ND WITHIN 30 MINUTES OF APPROXIMATELY 14 OTHER COLLEGES AND UNIVERSITIES, SIMA IS A PRIMAR Y RESOURCE FOR UNIVERSITY STUDENTS AS WELL AS FOR THE AUDIENCES OF THE REGION, WHICH HAS THE AUSEUM'S FROM COLLECTORS AND ARTISTS TO THE PERMANENT COLLEGES						

Return Reference	Explanation
PART III, LINE 4	ISIONARY WOMEN COLLECTION ARTISTS WERE HIGHLIGHTED IN SIX DEDICATED EXHIBITIONS AND A MAJO R NEW COMMISSIONED ARTWORK FOR THE LOBBY ATRIUM CONTINUING A COMMITMENT TO SCHOLARLY PUBL ICATIONS IN SUPPORT OF EXHIBITIONS AND THE PERMANENT COLLECTION, IN 2020 SJMA WILL PUBLISH AN ONLINE CATALOGUE FOCUSED ON 50 ARTISTS FROM THE PERMANENT COLLECTION CALLED 50X50 DIG ITAL STORIES OF VISIONARY ARTISTS FROM THE COLLECTION, OPTIMIZED FOR PUBLICATION DISCOVERA BILITY AND LONGEVITY SJMA'S ACQUISITIONS REFLECT THE DIVERSITY THAT CHARACTERIZES LOCAL C OMMUNITIES AND THE GLOBAL NATURE OF CONTEMPORARY ART MAJOR EXHIBITION TEXTS ARE TRANSLATE D INTO SPANISH AND VIETNAMESE, JOINING ENGLISH AS THE THREE OFFICIAL LANGUAGES OF

Supplemental Information

SAN JOSE

upplemental Information	
Return Reference	Explanation
PART V, LINE 4	GENERAL OPERATING FUNDS IN SUPPORT OF THE MUSEUM'S MISSION AS DIRECTED BY THE DONORS

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	GENERALLY ACCEPTED ACCOUNTING PRINCIPLES PROVIDE ACCOUNTING AND DISCLOSURE GUIDANCE ABOUT POSITIONS TAKEN BY AN ORGANIZATION IN ITS TAX RETURNS THAT MIGHT BE UNCERTAIN MANAGEMENT HAS CONSIDERED ITS TAX POSITIONS AND BELIEVES THAT ALL OF THE POSITIONS TAKEN BY THE MUSEUM IN ITS FEDERAL AND STATE EXEMPT ORGANIZATION TAX RETURNS ARE MORE LIKELY THAN NOT TO BE SUSTAINED UPON EXAMINATION THE MUSEUM FILES INFORMATION RETURNS IN THE U S FEDERAL JURISDICTION AND STATE OF CALIFORNIA THE MUSEUM'S FEDERAL RETURNS FOR THE YEARS ENDED JUNE 30, 2016, AND BEYOND REMAIN SUBJECT TO POSSIBLE EXAMINATION BY THE INTERNAL REVENUE SERVICE THE MUSEUM'S CALIFORNIA RETURNS OF THE TAX YEARS ENDED JUNE 30, 2015, AND BEYOND REMAIN SUBJECT TO POSSIBLE EXAMINATION BY THE FRANCHISE TAX BOARD

Supplemental Information				
Return Reference	Explanation			
PART XI, LINE 2D - OTHER ADJUSTMENTS	COST OF GOODS SOLD 103,338			

Supplemental Information				
Return Reference	Explanation			
PART XII, LINE 2D - OTHER ADJUSTMENTS	COST OF GOODS SOLD 103,338			

s

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

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

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

2018

DLN: 93493094014130 OMB No 1545-0047

> Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

► Attach to Form 990 or Form 990-EZ. Go to www irs gov/Form990 for instructions and the latest information

ame of the organization						Employer ide	entification number	
AN JOSE MUSEUM OF ART ASSOCIA	ATION					23-7062028		
Part I Fundraising Activiti Form 990-EZ filers ar					orm 990,	Part IV, line	17.	
Indicate whether the organizati	on raised funds th	nrough an	y of the fo	ollowing activities Check	all that a	pply		
a Mail solicitations	all solicitations e Solicitation of non-government grants							
☐ Internet and email solicitations <b>f</b> ☐ Solicitation of government grants								
c Phone solicitations g S				Special fundraising	Special fundraising events			
<b>d</b> In-person solicitations								
2a Did the organization have a wri							es 🗆 No	
b If "Yes," list the ten highest pai to be compensated at least \$5,			ndraisers)	pursuant to agreement	s under wh	nich the fundrais	ser is	
Name and address of individual or entity (fundraiser)		(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(or re fundrai	ount paid to stained by) ser listed in ol (i)	(vi) Amount paid to (or retained by) organization	
		Yes	No					
otal			<b></b>					
List all states in which the organic licensing	zation is registere	d or licens	sed to soli	cit contributions or has	been notifi	ied it is exempt	from registration or	

che	dule G (Form 990 or 990-EZ) 2018					F	Page <b>3</b>			
.1	Does the organization conduct gaming	activities with nonmember	rs?		☐ Yes	□No				
.2	Is the organization a grantor, beneficia formed to administer charitable gaming		a member of a partnership or other entity		□Yes					
3	Indicate the percentage of gaming activ	vity conducted in								
а	The organization's facility			13a			%			
b	An outside facility			13b			%			
4	Enter the name and address of the pers	son who prepares the orga	inization's gaming/special events books and r	ecords						
	Name ►									
	Address ►									
5a	Does the organization have a contract virevenue?	with a third party from who	om the organization receives gaming		□Yes	□No				
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by		ganization 🕨 \$ and th	ne						
С	If "Yes," enter name and address of the third party									
	Name ▶									
	Address ►									
6	Gaming manager information									
	Name ►									
	Gaming manager compensation ▶ \$									
	Description of services provided ▶									
	☐ Director/officer	☐ Employee	☐ Independent contractor							
7	Mandatory distributions									
а	Is the organization required under state retain the state gaming license?	e law to make charitable d	istributions from the gaming proceeds to		Yes	□No				
b	Enter the amount of distributions requirements in the organization's own exempt activities.		uted to other exempt organizations or spent		53					
Pai	t IV Supplemental Informatio	n. Provide the explana	tions required by Part I, line 2b, column blicable. Also provide any additional info				 S.			
_	Return Reference		Explanation							

Schedule G (Form 990 or 990-EZ) 2018

efil	e GRAPHIC pr	int - DO NOT PROCESS As Filed	Dat	a -	DLN: 934	9309	4014	130
Sch	edule J	Compen	sat	ion Information	MO	IB No	1545-(	0047
(For	n 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest						
		Complete if the organization	pens: ansv	ated Employees /ered "Yes" on Form 990, Part IV, li	ine 23.	2018		
_	▶ Attach to Form 990.							
•	tment of the Treasury al Revenue Service	Go to <u>www.irs.gov/rorm9s</u>	101 <u>00</u>	instructions and the latest informa	ition.		to Pul ectio	
	me of the organiza			E	mployer identificat	ion nu	ımber	
SAIN	DOSE MUSEUM OF A	RT ASSOCIATION		2	3-7062028			
Pa	rt I Questi	ons Regarding Compensation		•				
							Yes	No
1a		piate box(es) if the organization provided ection A, line 1a Complete Part III to prov						
		or charter travel		Housing allowance or residence for pe				
	_	companions	님	Payments for business use of persona				
		ification and gross-up payments	H	Health or social club dues or initiation				
	☐ Discretion	ary spending account	Ш	Personal services (e g , maid, chauffe	ur, cner)			
b		tes in line 1a are checked, did the organiza Il of the expenses described above? If "No			nt or reimbursement	<b>1</b> b		
2		tion require substantiation prior to reimbu es, officers, including the CEO/Executive D			<b>-</b> 2	2		
	unectors, truste	es, officers, including the CEO/Executive D	ii ecto	r, regarding the items checked in line 1	.a·			
3		f any, of the following the filing organization  EO/Executive Director Check all that apply						
		d organization to establish compensation of			Part III			
	Compens:	ition committee	<b>V</b>	Written employment contract				
		ent compensation consultant	<u>√</u>	Compensation survey or study				
		of other organizations	<b>✓</b>	Approval by the board or compensation	on committee			
4		did any person listed on Form 990, Part V	ΊΙ, Se	ction A, line 1a, with respect to the filir	ng organization or a			
	related organiza							
a		ance payment or change-of-control payme		-6		4a		No
b	•	receive payment from, a supplemental no		•		4b 4c		No No
·	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							110
		), 501(c)(4), and 501(c)(29) organiza						
5		d on Form 990, Part VII, Section A, line 1a ontingent on the revenues of	a, did	the organization pay or accrue any				
а	The organization					5a		No
b	Any related orga	inization? 5a or 5b, describe in Part III				5b		No_
6	•	d on Form 990, Part VII, Section A, line 1a	مارط	the eventuation have a secret any				
0	compensation co	ontingent on the net earnings of	a, uiu	the organization pay or accrue any				
a	The organization					6a		No
b	Any related orga	inization? 6a or 6b, describe in Part III				6b		No
7	•	d on Form 990, Part VII, Section A, line 1a	9 414 9	the organization provide any ponfixed				
•		escribed in lines 5 and 6? If "Yes," describe				7		No
8		nts reported on Form 990, Part VII, paid o itial contract exception described in Regula			crıbe	8		No
9	If "Yes" on line 8 53 4958-6(c)?	3, did the organization also follow the rebu	ttable	presumption procedure described in Re	egulations section	9		No_
For I	Danarwark Badu	ction Act Notice, see the Instructions	for E	orm 990 Cat No. 500	053T Schedule 1	/Form	990)	2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported on 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (D) Nontaxable (B) Breakdown of W-2 and/or 1099-MISC compensation (E) Total of columns (C) Retirement and (F) Compensation in column (B) reported other deferred benefits (B)(1)-(D)(i) Base (ii) Bonus & incentive (iii) Other compensation as deferred on prior compensation compensation reportable Form 990 compensation 1 SUSAN SAYRE BATTON 230,000 (i) 0 11,500 5,097 246,597 0 EXECUTIVE DIRECTOR 0 0 0 (ii) 0 0

	-			Schedule	J (Form 990) 2018

Schedule J (Form 990) 2018 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Schedule J (Form 990) 2018

efil	e GRAPHIC pr	int - DO NOT PI	ROCESS	As Filed Data -		DLN	l: 9349309	4014	130
	EDULE M			loncash Contri	hutions		OMB No 1	.545-0	047
(For	m 990)	►Complete if the ► Attach to Form	organizati	20	18				
•	tment of the Treasury al Revenue Service	▶Go to <u>www.irs.</u>	gov/Form9	90 for the latest informat	ion.		Open to Inspe		
Nam	e of the organizat OSE MUSEUM OF AR	ion				Employer ide	ntification n	umbei	-
SAN J	OSE MOSEUM OF AN	A ASSOCIATION				23-7062028			
Pa	rt I Types	of Property			•				
			(a) Check ıf applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) od of determi contribution a		:s
1	Art—Works of art	t	Х	28		ART WORK			
2	Art—Historical tr	easures .							
3	Art—Fractional in								
4	Books and public								
5	Clothing and hou goods	sehold							
6	Cars and other v								
7	Boats and planes								
8	Intellectual prope	erty							
9	Securities—Public	•	X	7	195,100	SALES PRICE			
	Securities—Close	•				-			
11	Securities—Partr or trust interest								
12	Securities—Misce								
13	Qualified conserve contribution—Histructures	storic							
	Qualified conserve contribution—Of	/ation ther							
	Real estate—Res					1			
16 17	Real estate—Cor Real estate—Oth					+			
18	Collectibles .					1			
19	Food inventory		X	2	10.605	WINES AND C	OOKIES		
20	Drugs and medic				,				
21	Taxidermy .								
22	Historical artifact	ts							
	Scientific specim								
	Archeological art	ifacts							
TWO	Other ► ( FULL BAR )		X	1	14,285				
	Other ► ( /EL PACKAGE )		X	1	36	5			
27	Other ▶ (	)							
28	Other ▶ (	)				<del>                                     </del>			
29				ation during the tax year for 3, Part IV, Donee Acknowled		29			1
20	Dumm - H-	al, al alla		, and the book and the second	and the second of the second second			Yes	No
30a	must hold for at	, and the organization : least three years fi e entire holding peri	rom the date	y contribution any property r e of the initial contribution, a	and which is not required to	be used for ex	empt 30a		No
b	If "Yes," describ	e the arrangement	ın Part II				304		110
31	Does the organi	zation have a gift a	cceptance p	olicy that requires the review	of any nonstandard contri	butions?	31	Yes	
32a		zation hire or use th		or related organizations to so	olicit, process, or sell nonca	sh	32a		No
	If "Yes," describ				_				
33	If the organizati describe in Part	•	n amount in	column (c) for a type of pro	perty for which column (a)	ıs checked,			
For D	anamuank Baduati	on Act Notice, see th	e Instruction	s for Form 990	Cat No. 512271	Sch	edule M (Form	0001	(2018)

Schedule M (Form 990) (2018)	Page <b>2</b>
	ion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part imber of contributions, the number of items received, or a combination of both. Also complete
Return Reference	Explanation
PART I, COLUMN (B)	THE NUMBER OF CONTRIBUTIONS LISTED ABOVE PERTAINS TO THE NUMBER OF ITEMS DONATED
	THE ASSOCIATION EXPENSES ALL PURCHASED ART AND DOES NOT RECORD DONATED ART ITEMS OF THE 28 WORKS OF ART DONATED, 13 PIECES WERE CONTRIBUTED FOR PERMANENT COLLECTION DURING THE FISCAL YEAR 2018-2019 THE REST WERE CONTRIBUTED FOR AUCTION
	Schedule M (Form 990) (2018)

efile GRAPH	IIC print	- DO NOT PROCESS   As Filed Data -	DLN:	93493094014130
SCHEDULE O (Form 990 or 990- EZ) Department of the Treasury		Supplemental Information to Form 990 or Complete to provide information for responses to specific ques Form 990 or 990-EZ or to provide any additional informat  Attach to Form 990 or 990-EZ.  Go to <a href="https://www.irs.gov/Form990">www.irs.gov/Form990</a> for the latest information	stions on ion.	2018 Open to Public Inspection
Name Betherofe SAN JOSE MUSEUI	<b>海州之ation</b> M OF ART AS:		23-7062028	fication number
990 Schedul	e O, Sup <sub>l</sub>	plemental Information		
Return Reference		Explanation		
FORM 990, PART III, LINE 1	SILICON ECTS TH AWAREN F OUR TI THE PRE MUNITIE ROVIDES R YOUTH RECOGN LLECTIO RAL BOL EMPORA OR PERS	ITHE SAN JOSE MUSEUM OF ART REFLECTS THE DIVERSE CULTURES. VALLEY THROUGH ITS EXHIBITIONS, PROGRAMS, SCHOLARSHIP, AND HE PRESENT AND THE PAST, THE ART OF THE WEST COAST AND THE WISES OF ARTISTS' BROAD CONTRIBUTIONS TO SOCIETY AND ENGAGES IME AND THE VITALITY OF THE CREATIVE PROCESS VISION THE SAN JEEMINENT MODERN AND CONTEMPORARY ART MUSEUM IN SILICON VAIS THROUGH INVITING, INNOVATIVE PROGRAMS AND CREATIVE, INTER/ SOLYAMIC LEARNING OPPORTUNITIES FOR ADULTS AS WELL AS VITALES AND FAMILIES, TO ENCOURAGE INQUIRY AND VISUAL THINKING AS VIZED FOR HIGH-QUALITY PROGRAMS, COLLABORATIVE ENDEAVORS, AND ADVENTUROUS APPROACHES THE MUSEUM CONNECTS ART A JUNDARIES, AND PROMOTES DEEPER AWARENESS, ENJOYMENT, AND KARY ART AND DESIGN SJMA IS A CULTURAL HUB FOR THE RESIDENTS SONAL REFLECTION, A GATHERING PLACE FOR CREATIVE THINKERS, A ECITY CENTER	COLLECTIONS, S. /ORLD THE MUSEI B AUDIENCES WITH OSE MUSEUM OF / ILLEY SJMA ENRIC ACTIVE EXPERIEN L EDUCATIONAL SE A CONSEQUENCE A DISTINCTIVE PEF AND LIFE, WORKS / NOWLEDGE OF MO OF THE REGION, A	IMA CONN JM FOSTERS I THE ART O ART IS CHES ITS COM CES IT P ERVICES FO , SJMA IS RMANENT CO ACROSS CULTU DDERN AND CONT

Return Explanation
Reference

FORM 990, PART VI, SECTION A, AS TRUSTEES FOR THREE-YEAR TERMS MAY BE MADE FOR ARTIST TRUSTEES FOR PRACTICING ARTISTS ("

LINE 4 ARTIST TRUSTEES"), WITH FULL VOTING PRIVILEGES

Return Explanation

FORM 990,	THE PROCESS THE SAN JOSE MUSEUM OF ART USES TO REVIEW THE FORM 990 IS SET FORTH IN ITS RIS
PART VI,	K MANAGEMENT AND FISCAL OPERATING POLICIES PRIOR TO FILING WITH THE I R S , THE ANNUAL TA
SECTION B,	X RETURN (990) SHALL BE REVIEWED BY THE FINANCE AND POLICY COMMITTEE AND SHALL BE PROVIDED
LINE 11B	TO THE BOARD OF TRUSTEES, TO COMPLY WITH SUGGESTED BEST PRACTICES

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ALL TRUSTEES, STAFF MEMBERS AND COMMUNITY MEMBERS OF BOARD COMMITTEES MUST FILL OUT AN ANN UAL CONFLICT OF INTEREST DISCLOSURE STATEMENT THIS DISCLOSURE STATEMENT ASKS IF THE RESPO NDENTS ARE AWARE OF ANY AFFILIATIONS, EMPLOYMENT OR OTHER MATTERS INVOLVING THE INDIVIDUAL OR ANY OF IMMEDIATE FAMILY THAT MIGHT BE PERCEIVED TO COMPROMISE YOUR 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 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 TRUSTE E, OFFICE, 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% OWNE RSHIP INTEREST IN A PUBLIC COMPANY WITH THE MUSEUM HAS A BUSINESS RELATIONSHIP ALL RESPON DENTS 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 COMMUNIT Y 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

Return Reference	Explanation
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 VITALI TY 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 C OMPENSATION IS THEN ESTABLISHED COMMENSURATE WITH EXPERIENCE, RELEVANT ACADEMIC CREDENTIAL S AND PROFESSIONAL TRAINING THE BOARD OF TRUSTEES HAS APPROVED THAT PHILOSOPHY IN LIGHT O F THE HIGH COST OF LIVING IN THE SAN FRANCISCO BAY AREA, IN AN EFFORT TO ATTRACT, RETAIN A ND MOTIVATE THE TALENT NEEDED TO MAINTAIN THE REQUISITE STANDARDS OF QUALITY AND REPUTATIO N 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 RETIREMENT-PLAN CO NTRIBUTIONS FOR FY19 WERE 5% THE SALARY LEVELS OF THE EXECUTIVE DIRECTOR 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 MUSE UM DIRECTORS, WHICH IS THE STANDARD RESOURCE IN THE FIELD AND THE MOST COMPREHENSIVE, PUBL IC INDUSTRY DATA AVAILABLE AN ADJUSTMENT TO THE SALARY AND BENEFIT PACKAGE OF THE DIRECTO R OF FINANCE WAS APPROVED BY THE BOARD ON MARCH 23, 2017 ADDITIONALLY, A NEW EXECUTIVE DIRE CTOR WAS APPOINTED BY THE BOARD ON MARCH 23, 2017 WITH THE SALARY AND BENEFIT PACKAGE APPR OVED BY THE BOARD ON MARCH 23, 2017 AS WELL

Return Explanation
Reference

FORM 990, PART VI, SECTION C, LINE 19

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Reference	Explanation
FORM 990,	CATERING PROGRAM SERVICE EXPENSES 55,819 MANAGEMENT AND GENERAL EXPENSES 6,080 FUNDRAIS
PART IX,	ING EXPENSES 28,732 TOTAL EXPENSES 90,631 OUTSIDE SERVICES AND SECURITY PROGRAM SERVICE
LINE 11G	EXPENSES 449,628 MANAGEMENT AND GENERAL EXPENSES 63,339 FUNDRAISING EXPENSES 20,945 TO
	TAL EXPENSES 533,912 RECRUITING PROGRAM SERVICE EXPENSES 2,437 MANAGEMENT AND GENERAL E
	XPENSES 13 759 FUNDRAISING EXPENSES 1 323 TOTAL EXPENSES 17 519

Evalanation

Return Explanation
Reference

LINE 2C

FORM 990, PART XII,