

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2019, and ending 06-30-2020

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
SAN JOSE MUSEUM OF ART ASSOCIATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
110 SOUTH MARKET STREET

City or town, state or province, country, and ZIP or foreign postal code
SAN JOSE, CA 951132383

D Employer identification number
23-7062028

E Telephone number
(408) 271-6840

G Gross receipts \$ 6,621,580

F Name and address of principal officer:
SUSAN SAYRE BATTON
110 SOUTH MARKET STREET
SAN JOSE, CA 951132383

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.SJMUSART.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1969

M State of legal domicile: CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
THE MUSEUM FOSTERS APPRECIATION AND AWARENESS OF THE CONTRIBUTION OF ART AND ARTISTS TO SOCIETY.

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)	3	23
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	23
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	104
6 Total number of volunteers (estimate if necessary)	6	166
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	41,126
b Net unrelated business taxable income from Form 990-T, line 39	7b	-36,163

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	5,568,281	4,724,237
9 Program service revenue (Part VIII, line 2g)	411,798	228,330
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	584,742	637,653
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	212,556	-309,327
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,777,377	5,280,893
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	2,983,330	3,079,288
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 381,401		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,134,464	1,967,745
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	5,117,794	5,047,033
19 Revenue less expenses. Subtract line 18 from line 12	1,659,583	233,860
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	15,888,770	16,112,834
21 Total liabilities (Part X, line 26)	517,741	842,648
22 Net assets or fund balances. Subtract line 21 from line 20	15,371,029	15,270,186

Part II 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.

Sign Here
Signature of officer: *****
Date: 2021-04-06
SUSAN SAYRE BATTON EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name: Preparer's signature: Date:
Check if self-employed PTIN: P01008919
Firm's name: ▶ HOOD & STRONG LLP Firm's EIN: ▶ 94-1254756
Firm's address: ▶ 275 BATTERY ST STE 900 SAN FRANCISCO, CA 94111 Phone no. (415) 781-0793

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

SEE SCHEDULE O

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

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 2,673,965 including grants of \$ 0) (Revenue \$ 183,774)
See Additional Data

4b (Code:) (Expenses \$ 1,051,215 including grants of \$ 0) (Revenue \$ 51,920)
See Additional Data

4c (Code:) (Expenses \$ 142,323 including grants of \$ 0) (Revenue \$ 30,420)
See Additional Data

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

4e Total program service expenses ▶ 3,867,503

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, and Yes/No response. Rows include questions 1 through 21, with sub-questions a-f for items 11 and 14. Each row has a corresponding 'Yes' or 'No' in the rightmost column.

Part IV Checklist of Required Schedules (continued)

Table with 3 main columns: Question, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 main columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

<p>2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return</p>	2a	104			
<p>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</p>			2b	Yes	
<p>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</p>			3a	Yes	
<p>b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i></p>			3b	Yes	
<p>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</p>			4a		No
<p>b If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).</p>					
<p>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</p>			5a		No
<p>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>			5b		No
<p>c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?</p>			5c		
<p>6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?</p>			6a		No
<p>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</p>			6b		
7 Organizations that may receive deductible contributions under section 170(c).					
<p>a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?</p>			7a	Yes	
<p>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</p>			7b	Yes	
<p>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</p>			7c		No
<p>d If "Yes," indicate the number of Forms 8282 filed during the year</p>	7d				
<p>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>			7e		No
<p>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</p>			7f		No
<p>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</p>			7g		
<p>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</p>			7h		
<p>8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?</p>			8		
9 Sponsoring organizations maintaining donor advised funds.					
<p>a Did the sponsoring organization make any taxable distributions under section 4966?</p>			9a		
<p>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</p>			9b		
10 Section 501(c)(7) organizations. Enter:					
<p>a Initiation fees and capital contributions included on Part VIII, line 12</p>	10a				
<p>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</p>	10b				
11 Section 501(c)(12) organizations. Enter:					
<p>a Gross income from members or shareholders</p>	11a				
<p>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)</p>	11b				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
<p>b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.</p>	12b				
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
<p>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.</p>			13a		
<p>b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans</p>	13b				
<p>c Enter the amount of reserves on hand</p>	13c				
<p>14a Did the organization receive any payments for indoor tanning services during the tax year?</p>			14a		No
<p>b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i></p>			14b		
<p>15 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.</p>			15		No
<p>16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.</p>			16		No

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



Section A. Governing Body and Management

Table with 5 main rows and 3 sub-columns (1a, 1b, and 2-9). Questions include: 1a Enter the number of voting members of the governing body at the end of the tax year; 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?; 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?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 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?; 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?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 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.

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

Table with 16 rows (10a-16b) and 3 columns (Question, Yes, No). Questions include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b 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; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official; b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 3 rows (17-20) and 2 columns (Question, Answer). 17 List the states with which a copy of this Form 990 is required to be filed; 18 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. [X] Own website [] Another's website [X] Upon request [] 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 State the name, address, and telephone number of the person who possesses the organization's books and records: BRIAN SPANG 110 SOUTH MARKET STREET SAN JOSE, CA 951132383 (408) 271-6840

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							620,000	0	43,445	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ **4**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ALLIED UNIVERSAL 161 WASHINGTON ST SUITE 600 CONSHOHOCKEN, PA 19428	SECURITY SERVICES	329,932

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ **1**

Part VIII Statement of Revenue

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

Table with 5 columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 1a-1g for Federated campaigns, membership dues, fundraising events, etc., and 1h Total.

Table for Program Service Revenue with 5 columns. Rows include 2a-2f for PUBLIC PROGRAMS, ART CLASS CONTRACTS/TU, MEMBERSHIP DUES, etc., and 2g Total.

Table for Other Revenue with 5 columns. Rows include 3-5 for investment income, 6a-6c for gross rents, 7a-7c for sales of assets, 8a-8b for fundraising events, 9a-9b for gaming activities, 10a-10b for sales of inventory, and 11a-11d for miscellaneous revenue, ending with 12 Total revenue.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to 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, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	363,366	161,113	140,287	61,966
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	2,274,541	1,835,532	275,250	163,759
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	108,169	79,635	17,733	10,801
9 Other employee benefits	128,150	99,933	17,553	10,664
10 Payroll taxes	205,062	150,968	33,617	20,477
11 Fees for services (non-employees):				
a Management				
b Legal	2,275		2,275	
c Accounting	49,640		49,640	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	44,336		44,336	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	587,479	513,280	63,540	10,659
12 Advertising and promotion	106,500	102,994	872	2,634
13 Office expenses	389,377	280,368	73,188	35,821
14 Information technology	58,150	24,622	10,283	23,245
15 Royalties				
16 Occupancy	82,700	46,127	23,235	13,338
17 Travel	59,272	45,826	12,688	758
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	14,220	13,344	498	378
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	2,705	2,436	133	136
23 Insurance	41,812	38,615	2,018	1,179
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	252,817	252,817		
b MATERIALS	104,081	96,084	7,997	
c EXHIBITION COSTS	57,158	57,109	49	
d CATERING	44,111	30,688	4,790	8,633
e All other expenses	71,112	36,012	18,147	16,953
25 Total functional expenses. Add lines 1 through 24e	5,047,033	3,867,503	798,129	381,401
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	1,231,460	1	1,612,260
	2 Savings and temporary cash investments	718,496	2	1,412,732
	3 Pledges and grants receivable, net	2,714,992	3	1,947,586
	4 Accounts receivable, net	47,301	4	63,755
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	66,745	8	77,558
	9 Prepaid expenses and deferred charges	130,896	9	229,343
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1,710,296		
	b Less: accumulated depreciation	1,708,395	4,606	10c 1,901
	11 Investments—publicly traded securities	10,974,274	11	10,767,699
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	15,888,770	16	16,112,834	
Liabilities	17 Accounts payable and accrued expenses	345,881	17	305,749
	18 Grants payable		18	
	19 Deferred revenue	171,860	19	70,583
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	0	24	466,316
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	517,741	26	842,648
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	1,751,671	27	1,778,309
	28 Net assets with donor restrictions	13,619,358	28	13,491,877
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	15,371,029	32	15,270,186	
33 Total liabilities and net assets/fund balances	15,888,770	33	16,112,834	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,280,893
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,047,033
3	Revenue less expenses. Subtract line 2 from line 1	3	233,860
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	15,371,029
5	Net unrealized gains (losses) on investments	5	-334,703
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	15,270,186

Part XII Financial Statements and Reporting

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

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

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

Additional Data

Software ID:

Software Version:

EIN: 23-7062028

Name: SAN JOSE MUSEUM OF ART ASSOCIATION

Form 990 (2019)

Form 990, Part III, Line 4a:

EXHIBITIONS:SAN JOSE MUSEUM OF ART'S (SJMA'S) UNIQUE ARTISTIC PROGRAM PRESENTS CULTURALLY DIVERSE, THEMATICALLY RESONANT AND CRITICALLY ENGAGING CONTEMPORARY ART THAT IS BOTH LOCALLY RELEVANT AND NATIONALLY AND INTERNATIONALLY SIGNIFICANT. SIX TO EIGHT ROTATING THEMATIC 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)

Form 990, Part III, Line 4b:

EDUCATION AND PROGRAMS: SLMA'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 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)

Form 990, Part III, Line 4c:

MUSEUM STORE:THE MUSEUM STORE IS LOCATED OFF THE MAIN LOBBY OF SJMA AND ONLINE AT [HTTPS://SJMA-ONLINE-STORE.MYSHOPIFY.COM/](https://sjma-online-store.myshopify.com/). THIS ACTIVE GIFT AND BOOKSTORE CARRIES MISSION-RELATED PRODUCTS THAT ARE EDUCATIONAL, FOSTER CREATIVITY AND ENCOURAGE DEEPER KNOWLEDGE OF ART AND CULTURE. THE MUSEUM STORE ALSO FEATURES CUSTOM PRODUCTS BY AREA ARTISTS AND CRAFTSMEN AS WELL AS MERCHANDISE RELEVANT TO EACH CURRENT SEASON OF EXHIBITIONS. THE STORE IS STAFFED BY MUSEUM EMPLOYEES AS WELL AS AN ACTIVE CONTINGENT OF LONGTIME VOLUNTEERS.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
TAD FREESE CO-PRESIDENT	15.50	X		X				0	0	0
CHERYL KIDDOO CO-PRESIDENT	25.50	X		X				0	0	0
WILLIAM FAULKNER TREASURER	7.50	X		X				0	0	0
CORNELIA PENDLETON SECRETARY	11.75	X		X				0	0	0
LUCIA CHA TRUSTEE	0.00	X						0	0	0
PETER CROSS TRUSTEE	3.00	X						0	0	0
GLENDA DORCHAK TRUSTEE	12.50	X						0	0	0
ANNEKE DURY TRUSTEE	3.50	X						0	0	0
EILEEN FERNANDES TRUSTEE	0.50	X						0	0	0
CHANDRA GNANASAMBANDAM TRUSTEE	0.50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
COLE HARRELL TRUSTEE	0.50	X						0	0	0
JEANNINE JACOBSEN TRUSTEE	0.50	X						0	0	0
RICHARD A KARP TRUSTEE	0.50	X						0	0	0
JENNIE LAMENSORF TRUSTEE	0.50	X						0	0	0
ROBERT LINDO TRUSTEE	7.50	X						0	0	0
KIMBERLY LIN TRUSTEE	0.50	X						0	0	0
PETER W LIPMAN TRUSTEE	7.00	X						0	0	0
HUNG LIU TRUSTEE	0.50	X						0	0	0
LISA LUBLINER TRUSTEE	2.00	X						0	0	0
EVELYN NEELY TRUSTEE	2.00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SARAH NORTH TRUSTEE	1.25	X						0	0	0
HILDY SHANDELL TRUSTEE	8.75	X						0	0	0
MARSHA WITKIN TRUSTEE	1.50	X						0	0	0
JERRY HIURA TRUSTEE (THRU DEC 2019)	2.00	X						0	0	0
SUSAN SAYRE BATTON EXECUTIVE DIRECTOR	37.50			X				230,000	0	17,866
BRIAN SPANG DIRECTOR OF FINANCE	37.50			X				110,000	0	6,077
FRANCES SHEN DEPUTY DIRECTOR	37.50					X		145,000	0	12,381
KRISTIN BERTRAND DIRECTOR OF DEVELOPMENT	37.50					X		135,000	0	7,121

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number
23-7062028

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	3,014,695	3,278,807	3,768,114	5,568,281	4,724,237	20,354,134
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..	1,544,501	1,872,000	2,340,000	2,340,000	2,340,000	10,436,501
4 Total. Add lines 1 through 3	4,559,196	5,150,807	6,108,114	7,908,281	7,064,237	30,790,635
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) . . .						2,020,805
6 Public support. Subtract line 5 from line 4.						28,769,830

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4. . .	4,559,196	5,150,807	6,108,114	7,908,281	7,064,237	30,790,635
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .	498,400	404,114	448,749	554,028	51,850	1,957,141
9 Net income from unrelated business activities, whether or not the business is regularly carried on. . .	0	0	0	0	0	
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .	299,344	299,596	431,229	494,028	148,700	1,672,897
11 Total support. Add lines 7 through 10						34,420,673
12 Gross receipts from related activities, etc. (see instructions)					12	2,864,057

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	83.580 %
15 Public support percentage for 2018 Schedule A, Part II, line 14	15	82.670 %

16a 33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2019. 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 organization

b 10%-facts-and-circumstances test—2018. 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 qualifies as a publicly supported organization

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

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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						
3	Gross receipts from activities that are 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. . .						
5	The value of services or facilities 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.						
c	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6.						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . .						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c	Add lines 10a and 10b.						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

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
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b	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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c	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)? <i>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.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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 amendment to the organizing document).</i>		
b	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?		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7	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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a	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))? <i>If "Yes," provide detail in Part VI.</i>		
b	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? <i>If "Yes," provide detail in Part VI.</i>		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	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?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section 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? <i>If "No," describe in Part VI 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.</i>		
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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section 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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer (a) and (b) below.		
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? <i>If "Yes," then in Part VI identify those supported organizations and explain 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.</i>	Yes	No
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? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
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? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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	
c	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 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	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, 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 2019. 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 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

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).

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME:	GROSS INCOME FROM FUNDRAISING EVENTS - 2015 AMOUNT: \$ 299,344. 2016 AMOUNT: \$ 299,596. 2017 AMOUNT: \$ 431,229. 2018 AMOUNT: \$ 481,969. 2019 AMOUNT: \$ 148,200. GROSS INCOME FROM GAMING ACTIVITIES - 2015 AMOUNT: \$ 0. 2016 AMOUNT: \$ 0. 2017 AMOUNT: \$ 0. 2018 AMOUNT: \$ 12,059. 2019 AMOUNT: \$ 500.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2019

Open to Public Inspection

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 instructions and the latest information.

Department of the Treasury Internal Revenue Service

Name of the organization SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number 23-7062028

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year. Includes questions about donor notification and grant fund usage.

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

Form for Part II Conservation Easements. Includes questions about purpose of easements, monitoring, and expenses. Includes a table for 'Held at the End of the Year' with rows 2a, 2b, 2c, 2d.

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.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting and amounts for art and historical treasures.

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

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

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

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
1c	
1d	
1e	
1f	

- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . **Yes** **No**

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	12,410,143	11,606,608	11,040,433	10,136,566	10,541,697
b Contributions	3,944	782,023	369,747	200,000	5,264
c Net investment earnings, gains, and losses	258,612	528,004	680,407	1,202,543	92,134
d Grants or scholarships					
e Other expenditures for facilities and programs	530,801	506,492	483,979	498,676	502,529
f Administrative expenses					
g End of year balance	12,141,898	12,410,143	11,606,608	11,040,433	10,136,566

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment ▶ 0.780 %
- b** Permanent endowment ▶ 78.280 %
- c** Temporarily restricted endowment ▶ 20.940 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

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

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)	Yes	No
3a(ii)	No	No
3b		

b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		613,310	611,409	1,901
d Equipment		745,768	745,768	0
e Other		351,218	351,218	0
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				1,901

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 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) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments—Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(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 Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

1	Total revenue, gains, and other support per audited financial statements	1	7,456,140
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-334,703
b	Donated services and use of facilities	2b	2,541,363
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	2,206,660
3	Subtract line 2e from line 1	3	5,249,480
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	44,336
b	Other (Describe in Part XIII.)	4b	-12,923
c	Add lines 4a and 4b	4c	31,413
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	5,280,893

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

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

1	Total expenses and losses per audited financial statements	1	7,556,983
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	2,541,363
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	12,923
e	Add lines 2a through 2d	2e	2,554,286
3	Subtract line 2e from line 1	3	5,002,697
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	44,336
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	44,336
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	5,047,033

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Additional Data

Software ID:

Software Version:

EIN: 23-7062028

Name: SAN JOSE MUSEUM OF ART ASSOCIATION

Supplemental Information

Return Reference	Explanation
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 IN THE YEAR ACQUIRED AS NON-OPERATING DECREASES IN NET ASSETS WITHOUT DONOR RESTRICTIONS IN THE YEAR IN WHICH ITEMS ARE ACQUIRED. PROCEEDS FROM ANY DEACCESSIONS OR INSURANCE RECOVERIES MAY BE ALLOCATED FOR PURPOSES THAT CLEARLY BENEFIT THE COLLECTION, SUCH AS AN ACQUISITION FUND TO EXPAND THE COLLECTION OR PRESERVATION/CONSERVATION FUND TO MAINTAIN IT. CERTAIN ITEMS ARE ON LOAN FROM INDIVIDUALS AND CORPORATIONS FOR USE BY THE MUSEUM IN ITS PERMANENT COLLECTION OR SPECIAL EXHIBITION.

Supplemental Information

Return Reference	Explanation
PART III, LINE 4:	<p>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 VALUABLE RESOURCE FOR THE PUBLIC. THE MUSEUM'S PERMANENT COLLECTION INCLUDES OVER 2,600 MODERN AND CONTEMPORARY WORKS OF ART IN A VARIETY OF MEDIA, FROM PAINTINGS, SCULPTURE, PHOTOGRAPHY AND WORKS ON PAPER TO DIGITAL AND TIME-BASED ARTWORK. SJMA IS THE ONLY COLLECTING ART INSTITUTION IN THE CITY OF SAN JOSE, THE ONLY CONTEMPORARY ART MUSEUM IN SILICON VALLEY ACCREDITED BY THE AMERICAN ALLIANCE OF MUSEUMS (AAM) AND A MEMBER OF THE ASSOCIATION OF ART MUSEUM DIRECTORS (AAMD). SJMA PROUDLY HAS EARNED A REPUTATION FOR ACQUIRING ART WORKS BY PIVOTAL ARTISTS WHOSE PRACTICES ADDRESS PRESSING CULTURAL, POLITICAL AND SOCIAL ISSUES, AND HAS A TRADITION OF ACQUIRING LANDMARK ARTWORK IN NEW MEDIA 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 REPRESENTATIONAL STRATEGIES IN THE DIGITAL AGE, BEFITTING A MUSEUM IN THE CAPITAL OF SILICON VALLEY. 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 ENGAGEMENT; TO REFLECT ARTISTIC EXPERIMENTATION AND INNOVATION; AND TO ADDRESS ISSUES OF IMPORTANCE TO THE MUSEUM'S COMMUNITIES. LOCATED SEVERAL BLOCKS FROM SAN JOSE STATE UNIVERSITY AND WITHIN 30 MINUTES OF APPROXIMATELY 14 OTHER COLLEGES AND UNIVERSITIES, SJMA IS A PRIMARY RESOURCE FOR UNIVERSITY STUDENTS AS WELL AS FOR THE AUDIENCES OF THE REGION, WHICH HAS THE GREATEST PROJECTED POPULATION GROWTH IN THE BAY AREA. STARTING IN 2019, SJMA OFFERED FREE ADMISSION TO YOUTH, COLLEGE STUDENTS WITH ID, AND TEACHERS TO DEEPEN SJMA'S RELATIONSHIPS WITH SCHOOLS AND UNIVERSITIES, AND TO BECOME A CRITICAL RESOURCE FOR THEIR CURRICULA. THE MUSEUM CREATED AN ACQUISITIONS ENDOWMENT IN 2012, WHICH AUGMENTS THE GENEROUS DONATIONS FROM COLLECTORS AND ARTISTS TO THE PERMANENT COLLECTION. IN ADDITION, IN 2017, THE MUSEUM BEGAN A CO-ACQUISITION PROGRAM WITH TWO OF THE MOST IMPORTANT CONTEMPORARY ART MUSEUMS IN THE UNITED STATES, TO EXPAND THE MUSEUM'S REACH AND OPPORTUNITY TO CONTRIBUTE TO PUBLIC DISCOURSE. SJMA REMAINS DEPENDENT IN LARGE MEASURE ON CULTIVATING OPPORTUNITIES AND SOLICITING DONATIONS: 90% OF THE WORKS IN THE COLLECTION HAVE BEEN ACQUIRED THROUGH DONATION, SIMILAR TO STATISTICS AT AAMD MEMBER MUSEUMS NATIONALLY. IN THE LAST TEN YEARS, SJMA LAUNCHED AN AMBITIOUS EXHIBITION PROGRAM TO FEATURE WORKS FROM THE PERMANENT COLLECTION IN THEMATIC SPECIAL EXHIBITIONS. FOR THE MUSEUM'S 50TH ANNIVERSARY SEASON (2019-2020) RECENT ACQUISITIONS, INCLUDING THE WORK OF V</p>

Supplemental Information

Return Reference	Explanation
PART III, LINE 4:	<p>VISIONARY WOMEN COLLECTION ARTISTS WERE HIGHLIGHTED IN SIX DEDICATED EXHIBITIONS AND A MAJOR NEW COMMISSIONED ARTWORK FOR THE LOBBY ATRIUM. CONTINUING A COMMITMENT TO SCHOLARLY PUBLICATIONS 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: DIGITAL STORIES OF VISIONARY ARTISTS FROM THE COLLECTION, OPTIMIZED FOR PUBLICATION DISCOVERABILITY AND LONGEVITY. SJMA'S ACQUISITIONS REFLECT THE DIVERSITY THAT CHARACTERIZES LOCAL COMMUNITIES AND THE GLOBAL NATURE OF CONTEMPORARY ART. MAJOR EXHIBITION TEXTS ARE TRANSLATED INTO SPANISH AND VIETNAMESE, JOINING ENGLISH AS THE THREE OFFICIAL LANGUAGES OF SAN JOSE .</p>

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	THE PRIMARY OBJECTIVES OF THE MUSEUM'S ENDOWMENTS ARE TO SUPPORT THE OPERATIONS OF THE MUSEUM OVER TIME, WHILE PRESERVING THE ENDOWMENT'S INFLATION-ADJUSTED ASSET VALUE.

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	THE MUSEUM IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND STATE INCOME TAXES UNDER SECTION 23701D OF THE CALIFORNIA REVENUE AND TAXATION CODE. HOWEVER, INCOME FROM CERTAIN ACTIVITIES NOT DIRECTLY RELATED TO THE MUSEUM'S TAX-EXEMPT PURPOSE IS SUBJECT TO TAXATION AS UNRELATED BUSINESS INCOME. IN ADDITION, THE MUSEUM HAS BEEN DETERMINED BY THE INTERNAL REVENUE SERVICE NOT TO BE A PRIVATE FOUNDATION WITHIN THE MEANING OF SECTION 509(A) OF THE INTERNAL REVENUE CODE. MANAGEMENT HAS EVALUATED THE MUSEUM'S TAX POSITIONS AND CONCLUDED 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.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	RENTAL EXPENSES RECLASSIFIED TO REVENUE -8,011. RAFFLE EXPENSES RECLASSIFIED TO REVENUE -1,250. COST OF GOODS SOLD RECLASSIFIED TO REVENUE -3,662.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	RENTAL EXPENSES RECLASSIFIED TO REVENUE 8,011. RAFFLE EXPENSES RECLASSIFIED TO REVENUE 1,250. COST OF GOODS SOLD RECLASSIFIED TO REVENUE 3,662.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
	ANNUAL FALL GALA (event type)	(event type)	(total number)	(add col. (a) through col. (c))
1 Gross receipts	957,974			957,974
2 Less: Contributions	809,774			809,774
3 Gross income (line 1 minus line 2)	148,200			148,200
Direct Expenses	4 Cash prizes			
	5 Noncash prizes	263,386		263,386
	6 Rent/facility costs	109,396		109,396
	7 Food and beverages	118,394		118,394
	8 Entertainment	5,350		5,350
	9 Other direct expenses	83,000		83,000
10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				579,526
11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-431,326

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

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

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11** Does the organization conduct gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |

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

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

- Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
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Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number
23-7062028

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax idemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?</p>	2									
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input checked="" type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
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<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a	No								
	4b	No								
	4c	No								
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>	5a	No								
	5b	No								
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>	6a	No								
	6b	No								
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	7	No								
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	8	No								
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

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.

Return Reference	Explanation
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**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for the latest information.**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number
23-7062028

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art	X	15	232,600	FMV
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	8	590,759	FMV
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (<u>WINE</u>)	X	2	20,795	FMV
26 Other ▶ (<u>PROJECTOR</u>)	X	1	5,600	FMV
27 Other ▶ (<u>FOOD & BEVERAGES</u>)	X	3	4,323	FMV
28 Other ▶ (<u>SUPPLIES</u>)	X	1	68	FMV

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

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		No
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		No
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B):	THIS COLUMN REPRESENTS THE NUMBER OF DONORS, NOT THE NUMBER OF ITEMS CONTRIBUTED.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury

Name of the Organization

SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number

23-7062028

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 1	MISSION: THE SAN JOSE MUSEUM OF ART REFLECTS THE DIVERSE CULTURES AND INNOVATIVE SPIRIT OF SILICON VALLEY. THROUGH ITS EXHIBITIONS, PROGRAMS, SCHOLARSHIP, AND COLLECTIONS, SJMA CONNECTS THE PRESENT AND THE PAST, THE ART OF THE WEST COAST AND THE WORLD. THE MUSEUM FOSTERS AWARENESS OF ARTISTS' BROAD CONTRIBUTIONS TO SOCIETY AND ENGAGES AUDIENCES WITH THE ART OF OUR TIME AND THE VITALITY OF THE CREATIVE PROCESS. VISION: THE SAN JOSE MUSEUM OF ART IS THE PREEMINENT MODERN AND CONTEMPORARY ART MUSEUM IN SILICON VALLEY. SJMA ENRICHES ITS COMMUNITIES THROUGH INVITING, INNOVATIVE PROGRAMS AND CREATIVE, INTERACTIVE EXPERIENCES. IT PROVIDES DYNAMIC LEARNING OPPORTUNITIES FOR ADULTS AS WELL AS VITAL EDUCATIONAL SERVICES FOR YOUTHS AND FAMILIES, TO ENCOURAGE INQUIRY AND VISUAL THINKING. AS A CONSEQUENCE, SJMA IS RECOGNIZED FOR HIGH-QUALITY PROGRAMS, COLLABORATIVE ENDEAVORS, A DISTINCTIVE PERMANENT COLLECTION, AND ADVENTUROUS APPROACHES. THE MUSEUM CONNECTS ART AND LIFE; WORKS ACROSS CULTURAL BOUNDARIES; AND PROMOTES DEEPER AWARENESS, ENJOYMENT, AND KNOWLEDGE OF MODERN AND CONTEMPORARY ART AND DESIGN. SJMA IS A CULTURAL HUB FOR THE RESIDENTS OF THE REGION, A SPACE FOR PERSONAL REFLECTION, A GATHERING PLACE FOR CREATIVE THINKERS, AND A SOURCE OF VIBRANCY FOR THE CITY CENTER.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 3	DUE TO THE COVID-19 PANDEMIC, THE MUSEUM HAD TO CLOSE IN MARCH 2020 THROUGH THE END OF THE FISCAL YEAR AND PROVIDED VIRTUAL PROGRAMMING/EVENTS IN LIEU OF IN-PERSON ACTIVITIES.

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:</p>	<p>INITIATIVES INCLUDE A COMMITMENT TO ART AND TECHNOLOGY THAT BUILDS ON STRENGTHS OF THE COLLECTION AND KEY INTERESTS OF THE LOCAL COMMUNITY, A SUSTAINED COMMITMENT TO CONTEMPORARY ASIAN ART AND THOUGHTFUL GROUP EXHIBITIONS DRAWN FROM BOTH 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. SJMA IS COMMITTED TO PRESENTING A MINIMUM OF 60% ARTISTS OF COLOR AND WOMEN EACH SEASON, WITH PARTICULAR ATTENTION TO ARTISTS WHO REPRESENT THE DIVERSE COMMUNITIES OF SAN JOSE AND OUR REGION. HIGHLIGHTS OF THE FY20 EXHIBITION PROGRAM INCLUDED THE FEATURE EXHIBITION WITH DRAWN ARMS: GLENN KAINO AND TOMMIE SMITH, WHICH HONORED THE ACTIVIST LEGACY OF SAN JOSE STATE UNIVERSITY TRACK STAR TOMMIE SMITH, WHO FAMOUSLY RAISED A GLOVED FIST ON THE MEDAL STAND AT THE 1968 MEXICO CITY OLYMPICS TO PROTEST CIVIL RIGHTS ABUSES WORLD-WIDE. PUBLIC PROGRAMS WITH TOMMIE SMITH AND A RELATED EXHIBITION ON HIS LEGACY TITLED SPEED CITY: FROM CIVIL RIGHTS TO BLACK POWER CREATED NEW PARTNERSHIPS WITH THE INSTITUTE FOR SPORT AND SOCIAL JUSTICE AT SAN JOSE STATE UNIVERSITY AND HISTORY SAN JOSE. SJMA ALSO ADVANCED ITS COMMITMENT TO ART AND TECHNOLOGY WITH ALMOST HUMAN: DIGITAL ART FROM THE PERMANENT COLLECTION, AN EXHIBITION FEATURING ARTISTS WHO USE DIGITAL AND EMERGENT TECHNOLOGIES FROM CUSTOM COMPUTER ELECTRONICS AND EARLY ROBOTICS TO VIRTUAL REALITY AND ARTIFICIAL INTELLIGENCE, AND SONYA RAPOPORT: BIORHYTHM. LOS ANGELES ARTIST PAE WHITE WAS THE SUBJECT OF THE LATEST ITERATION OF THE BETA SPACE SERIES; WOODY DEOTTO: BREATHING ROOM WAS THE FIRST SOLO MUSEUM PRESENTATION BY THE OAKLAND-BASED ARTIST. SJMA ALSO LAUNCHED A NEW DEDICATED EDUCATION SPACE IN FY20 CALLED THE "ART LEARNING LAB" IN THE MUSEUM'S KORET FAMILY GALLERY. DESIGNED AS A SPACE FOR EXPERIMENTATION, PLAY, AND IMAGINATION, THE LEARNING LAB ENCOURAGES FOCUSED ENGAGEMENT WITH SELECT PERMANENT COLLECTION WORKS OF ART, EACH ACCOMPANIED BY ITS OWN LEARNING ACTIVITY DESIGNED TO PROMOTE STANDARDS-BASED LEARNING. SJMA'S FY20 EXHIBITION PROGRAM WAS CUT SHUT WHEN THE MUSEUM TEMPORARILY CLOSED TO THE PUBLIC ON MARCH 14, 2020 IN RESPONSE TO THE COVID19 PUBLIC HEALTH EMERGENCY. SCOPE OF SJMA'S COLLECTION AND THE NATURE OF EXHIBITIONS DRAWN FROM THE COLLECTION ARE DESCRIBED IN SCHEDULE D PART III, LINE 4. NUMBER OF PEOPLE SERVED PRIOR TO COVID-19 CLOSURE: 39,928</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:</p>	<p>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 ANNUALLY; AND A POPULAR KIDS SUMMER ART CAMP INSPIRED BY EXHIBITIONS ON VIEW. THE MUSEUM OFFER A RANGE OF LECTURES AND PUBLIC PROGRAMS FOR ADULT AUDIENCES TO INSPIRE LIFELONG LEARNING, FROM ARTIST TALKS AND GALLERY TOURS TO ARTMAKING WORKSHOPS. PRIOR TO THE COVID19 CLOSURE, IN FY20 SJMA LAUNCHED THE CAPSTONE CURRICULAR PIECE OF ITS THREE-YEAR UPPER ELEMENTARY SCHOOL STEAM PROGRAM, SOWING CREATIVITY, IN SAN JOSE TITLE I SCHOOLS. THE MUSEUM ALSO SERVED MORE THAN 2,300 STUDENTS WITH ITS PREMIERE FIELD TRIP PROGRAM, TWO PART ART, 83% OF WHOM WERE BASED IN LOW-INCOME TITLE I SCHOOLS AND PARTICIPATED FOR FREE. DURING THE CLOSURE, THE MUSEUM HAS CONTINUED TO SUPPORT ITS AUDIENCE AND COMMUNITY WITH A HOST OF NEW VIRTUAL PROGRAMS. KEY ACCOMPLISHMENTS INCLUDE MULTIPLE SOLD-OUT PUBLIC PROGRAMS - FROM GALLERY TALKS TO BEHIND-THE-SCENES TOURS AND NEW EDUCATIONAL OFFERINGS AVAILABLE ON THE MUSEUM'S WEBSITE AND FACEBOOK PAGE (HTTPS://SJMUSART.ORG/MUSEUM-FROM-HOME/ONLINE-EDUCATION). IN SUMMER 2020, SJMA LAUNCHED ITS FIRST VIRTUAL SUMMER ART CAMP. THE MUSEUM IS PROUD TO HAVE BEEN ABLE TO SUPPORT THE MAYOR'S "SILICON VALLEY STRONG" INITIATIVE WITH A COMPILATION VIDEO OF EDUCATION ACTIVITIES THAT WAS DISTRIBUTED WIDELY THROUGH THE CITY'S NETWORKS. IN RESPONSE TO THE SUCCESS OF THESE PROGRAMS, AND AS PART OF THE MUSEUM'S BORDERLESS INITIATIVES, SJMA WILL CONTINUE TO OFFER REMOTE PROGRAMMING ALONGSIDE ITS ONSITE OFFERINGS WHEN THE MUSEUM REOPENS. NUMBER OF PEOPLE SERVED PRIOR TO COVID-19 CLOSURE: 22,213 TOTAL VIRTUAL PROGRAM ATTENDANCE: 18,356</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE PROCESS THE SAN JOSE MUSEUM OF ART USES TO REVIEW THE FORM 990 IS SET FORTH IN ITS RISK MANAGEMENT AND FISCAL OPERATING POLICIES. PRIOR TO FILING WITH THE IRS, THE ANNUAL TAX RETURN (FORM 990) SHALL BE REVIEWED BY THE FINANCE AND POLICY COMMITTEE AND SHALL BE PROVIDED TO THE BOARD OF TRUSTEES, TO COMPLY WITH SUGGESTED BEST PRACTICES.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	<p>ALL TRUSTEES, STAFF MEMBERS AND COMMUNITY MEMBERS OF BOARD COMMITTEES MUST FILL OUT AN ANNUAL CONFLICT OF INTEREST DISCLOSURE STATEMENT. THIS DISCLOSURE STATEMENT ASKS IF THE RESPONDENTS ARE AWARE OF ANY AFFILIATIONS, EMPLOYMENT OR OTHER MATTERS INVOLVING THE INDIVIDUAL OR ANY OF IMMEDIATE FAMILY THAT MIGHT BE PERCEIVED TO COMPROMISE 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 TRUSTEE, OFFICER, DIRECTOR OR EMPLOYEE. IN ADDITION, DISCLOSURE IS REQUIRED IF THE INDIVIDUAL OR IMMEDIATE FAMILY MEMBERS HOLD AN OWNERSHIP INTEREST IN A CLOSELY HELD COMPANY OR A 5% OWNERSHIP INTEREST IN A PUBLIC COMPANY WITH THE MUSEUM HAS A BUSINESS RELATIONSHIP. ALL RESPONDENTS ARE ASKED TO SUPPLEMENT THE INFORMATION IN THE EVENT OF ANY CHANGES BEFORE THE NEXT ANNUAL DISCLOSURE. ALL STAFF RESPONSES ARE REVIEWED BY THE EXECUTIVE DIRECTOR. ALL OTHER RESPONSES ARE REVIEWED BY THE SECRETARY OF THE BOARD OF TRUSTEES. IF A RESPONSE ON A DISCLOSURE IDENTIFIES A CONFLICT, THE INTERESTED TRUSTEE, STAFF MEMBER, OR VOLUNTEER (A COMMUNITY MEMBER OF A BOARD COMMITTEE) SHALL REFRAIN FROM ATTEMPTING TO INFLUENCE ANY DECISION OF THE BOARD, BOARD COMMITTEE, OR STAFF ON ANY MATTER WHICH MAY INVOLVE A POTENTIAL OR ACTUAL CONFLICT OF INTEREST AND SHALL ABSTAIN FROM VOTING ON ANY SUCH MATTER.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	<p>THE BOARD OF TRUSTEES OF SJMA HAS ESTABLISHED A COMPENSATION PHILOSOPHY THAT BALANCES TWO OBJECTIVES: APPROPRIATE STEWARDSHIP OF ITS FINANCIAL RESOURCES; AND MAINTAINING THE VITALITY OF THE INSTITUTION AND EXCELLENCE OF ITS PROGRAMMING. THE RESULTING COMPENSATION DESIGN IS TO PAY IN THE TOP 50% OF COMPARABLE SALARIES FOR NEXT-STAGE PEER INSTITUTIONS. IN SJMA'S EXPERIENCE, THESE ARE THE MOST RELEVANT FACTORS IN COMPETITION FOR TALENT. INDIVIDUAL COMPENSATION IS THEN ESTABLISHED COMMENSURATE WITH EXPERIENCE, RELEVANT ACADEMIC CREDENTIALS AND PROFESSIONAL TRAINING. THE BOARD OF TRUSTEES HAS APPROVED THAT PHILOSOPHY IN LIGHT OF THE HIGH COST OF LIVING IN THE SAN FRANCISCO BAY AREA, IN AN EFFORT TO ATTRACT, RETAIN AND MOTIVATE THE TALENT NEEDED TO MAINTAIN THE REQUISITE STANDARDS OF QUALITY AND REPUTATION OF THE MUSEUM AS A LEADER IN THE FIELD. IN ADDITION TO SALARY, SJMA ENDEAVORS TO PROVIDE HEALTH AND RETIREMENT BENEFITS COMMENSURATE WITH THE ABOVE PHILOSOPHY. RETIREMENT-PLAN CONTRIBUTIONS FOR FY20 WERE 5%. THE SALARY LEVELS OF THE EXECUTIVE DIRECTOR, DIRECTOR OF DEVELOPMENT, THE DEPUTY 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 MUSEUM DIRECTORS, WHICH IS THE STANDARD RESOURCE IN THE FIELD AND THE MOST COMPREHENSIVE, PUBLIC INDUSTRY DATA AVAILABLE. THE SALARY AND BENEFIT PACKAGE OF THE EXECUTIVE DIRECTOR WAS ESTABLISHED AFTER A REVIEW OF COMPARABLE EXECUTIVE COMPENSATION FURNISHED BY THE EXECUTIVE SEARCH FIRM ENGAGED BY THE BOARD AND APPROVED BY THE BOARD ON MARCH 23, 2017.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE SAN JOSE MUSEUM OF ART POSTS ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ON ITS WEBSITE. THESE DOCUMENTS ARE MADE AVAILABLE FOR THE SAME PERIOD OF TIME SET FORTH IN SEC. 6104(D).

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	SECURITY SERVICES: PROGRAM SERVICE EXPENSES 193,058. MANAGEMENT AND GENERAL EXPENSES 23,899. FUNDRAISING EXPENSES 4,009. TOTAL EXPENSES 220,966. CONSULTING: PROGRAM SERVICE EXPENSES 320,222. MANAGEMENT AND GENERAL EXPENSES 39,641. FUNDRAISING EXPENSES 6,650. TOTAL EXPENSES 366,513.