

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

Department of the Treasury
Internal Revenue Service

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.

2023

Open to Public
Inspection

A For the **2023** calendar year, or tax year beginning **JUL 1, 2023** and ending **JUN 30, 2024**

B Check if applicable:	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 95113-2383	D Employer identification number 23-7062028 E Telephone number 408-271-6840
Address change Name change Initial return Final return/terminated Amended return Application pending	F Name and address of principal officer: SUSAN SAYRE BATTON SAME AS C ABOVE	G Gross receipts \$ 7,708,702. H(a) Is this a group return for subordinates? Yes <input checked="" type="checkbox"/> 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: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527		
J Website: WWW.SJMUSART.ORG		
K Form of organization: <input checked="" type="checkbox"/> 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: NURTURE EMPATHY AND CONNECTION BY ENGAGING COMMUNITIES WITH SOCIALLY RELEVANT CONTEMPORARY ART		
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	22
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	22
5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	78
6	Total number of volunteers (estimate if necessary)	6	160
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	20,258.
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
8	Contributions and grants (Part VIII, line 1h)	8	5,003,408.
9	Program service revenue (Part VIII, line 2g)	9	528,560.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10	954,365.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11	-394,200.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12	6,545,221.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13	0.
14	Benefits paid to or for members (Part IX, column (A), line 4)	14	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15	3,603,144.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	16a	0.
16b	Total fundraising expenses (Part IX, column (D), line 25)	16b	678,590.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	17	2,847,542.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18	6,450,686.
19	Revenue less expenses. Subtract line 18 from line 12	19	94,535.
20	Total assets (Part X, line 16)	20	16,848,908.
21	Total liabilities (Part X, line 26)	21	725,474.
22	Net assets or fund balances. Subtract line 21 from line 20	22	15,584,761.

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 SUSAN SAYRE BATTON, EXECUTIVE DIRECTOR	Date			
Paid Preparer Use Only	Print/Type preparer's name MAGA E. KISRIV	Preparer's signature <i>Maga E. Ksiriv</i>	Date 3/31/2025	Check if self-employed <input type="checkbox"/>	PTIN P01008919
	Firm's name HOOD & STRONG LLP	Firm's EIN 94-1254756			
	Firm's address 2580 N 1ST ST, STE 460 SAN JOSE, CA 95131	Phone no. 408.998.8400			

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

**Application for Extension of Time To File an Exempt Organization
Return or Excise Taxes Related to Employee Benefit Plans**File a separate application for each return.
Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I - Identification

Type or Print File by the due date for filing your return. See instructions.	Name of exempt organization, employer, or other filer, see instructions. SAN JOSE MUSEUM OF ART ASSOCIATION	Taxpayer identification number (TIN) 23-7062028
	Number, street, and room or suite no. If a P.O. box, see instructions. 110 SOUTH MARKET STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SAN JOSE, CA 95113-2383	

Enter the Return Code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
Plan Number _____
Plan Year Ending (MM/DD/YYYY) _____

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of BRIAN SPANG

110 SOUTH MARKET STREET - SAN JOSE, CA 95113-2383

Telephone No. 408-271-6840

Fax No. _____

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until MAY 15, 20 25, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

☐ calendar year 20 _____ or

☒ tax year beginning JUL 1, 20 23, and ending JUN 30, 20 24

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return

☐ Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2024)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒ **X**

- 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 \$ 3,561,662. including grants of \$ 0.) (Revenue \$ 513,825.)
EXHIBITIONS AND PROGRAMS:

A DOWNTOWN ANCHOR INSTITUTION, THE SAN JOSE MUSEUM OF ART (SJMA) IS THE PREMIER MODERN AND CONTEMPORARY ART MUSEUM IN SILICON VALLEY. ITS DYNAMIC PROGRAM, WHICH BALANCES SOCIALLY RELEVANT TRAVELING EXHIBITIONS WITH CRITICALLY ENGAGING SHOWS DRAWN FROM A COLLECTION OF 2,700+ WORKS, RESONATES WITH DEFINING CHARACTERISTICS OF SAN JOSE AND THE SILICON VALLEY FROM ITS RICH DIVERSITY TO ITS HALLMARK INNOVATIVE ETHOS.

(SEE SCHEDULE O FOR CONTINUATION)

4b (Code:) (Expenses \$ 1,286,350. including grants of \$ 0.) (Revenue \$ 30,507.)
EDUCATION:

SJMA'S EXTENSIVE ON AND OFF-SITE EDUCATION PROGRAMS FILL MULTIPLE GAPS IN LOCAL K-12 ARTS EDUCATION ON-SITE AND VIRTUAL PROGRAMS INCLUDE A ROBUST MUSEUM FIELD TRIP PROGRAM; FAMILY PROGRAMMING, INCLUDING THREE FREE COMMUNITY DAYS THAT ATTRACT OVER 2,500 PEOPLE ANNUALLY; AND A POPULAR KIDS SUMMER ART CAMP INSPIRED BY EXHIBITIONS ON VIEW. ONE-WEEK SUMMER CAMP SCHOLARSHIPS ARE OFFERED TO AT-RISK CHILDREN AND YOUTH BASED IN SAN JOSE SCHOOLS.

(SEE SCHEDULE O FOR CONTINUATION)

4c (Code:) (Expenses \$ 161,336. including grants of \$ 0.) (Revenue \$ 53,639.)
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 SHOP 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.

- 4d**
- Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 5,009,348.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8 X	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10 X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e	X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	X

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or 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? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	X

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	51
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

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

		Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 78		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b	X	
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)?	4a		X
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).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
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?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
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?	7a	X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a		
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	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
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 the instructions and file Form 4720, Schedule N.	15		X
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.	16		X
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17		

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

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 22 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
b Enter the number of voting members included on line 1a, above, who are independent 1b 22		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
6 Did the organization have members or stockholders?	6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9	X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed CA

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on 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
 BJORN REMO - 408-271-6840
 110 SOUTH MARKET STREET, SAN JOSE, CA 95113-2383

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(1) SUSAN SAYRE BATTON EXECUTIVE DIRECTOR	37.50			X				242,917.	0.	20,843.
(2) KAREN RAPP DEPUTY DIRECTOR	37.50				X			139,367.	0.	7,237.
(3) BRIAN SPANG CHIEF FINANCIAL OFFICER	37.50			X				122,000.	0.	7,067.
(4) JENNIFER SIME CHIEF PHILANTHROPY OFFICER	37.50				X			113,971.	0.	12,918.
(5) RICHARD KARSON DIRECTOR OF DESIGN & OPERATIONS	37.50				X			109,094.	0.	12,580.
(6) LAUREN ELENA SCHELL DICKENS CHIEF CURATOR	37.50				X			110,000.	0.	5,999.
(7) TAMMY KIELY PRESIDENT	0.51	X		X				0.	0.	0.
(8) WANDA KOWNACKI VICE PRESIDENT	0.21	X		X				0.	0.	0.
(9) ROBERT LINDO SECRETARY	0.31	X		X				0.	0.	0.
(10) HILDY SHANDELL TREASURER	0.28	X		X				0.	0.	0.
(11) LORRI KERSHNER TRUSTEE	0.19	X						0.	0.	0.
(12) NADIA AHMAD TRUSTEE	0.28	X						0.	0.	0.
(13) PETER CROSS TRUSTEE	0.30	X						0.	0.	0.
(14) GLENDA DORCHAK TRUSTEE	0.16	X						0.	0.	0.
(15) ANNEKE DURY TRUSTEE	0.17	X						0.	0.	0.
(16) BILL FAULKNER TRUSTEE	0.24	X						0.	0.	0.
(17) TOBY FERNALD TRUSTEE	0.22	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(18) TAD FREESE TRUSTEE	0.16	X						0.	0.	0.
(19) CHANDRA GNANASAMBANDAM TRUSTEE	0.04	X						0.	0.	0.
(20) COLE HARRELL TRUSTEE	0.18	X						0.	0.	0.
(21) RICHARD A. KARP TRUSTEE	0.15	X						0.	0.	0.
(22) DANIEL LE TRUSTEE	0.12	X						0.	0.	0.
(23) KIMBERLY LIN TRUSTEE	0.16	X						0.	0.	0.
(24) PETER W. LIPMAN TRUSTEE	0.29	X						0.	0.	0.
(25) RANU MUKHERJEE TRUSTEE	0.11	X						0.	0.	0.
(26) YVONNE NEVENS TRUSTEE	0.53	X						0.	0.	0.
1b Subtotal								837,349.	0.	66,644.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								837,349.	0.	66,644.

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

6

- 3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual*
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. 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	279,929.
SEABRIGHT HR 59 S. BRANCIFORTE AVE, SANTA CRUZ, CA 95062	HR CONSULTING	112,747.

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

2

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2023)

332201
04-01-23

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	166,166.				
	c Fundraising events	1c	839,505.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	910,093.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	3,540,732.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 205,354.				
	h Total. Add lines 1a-1f		5,456,496.				
Program Service Revenue	2 a PUBLIC PROGRAMS	Business Code	713990	496,053.	496,053.		
	b ART CLASS TUITION		713990	30,507.	30,507.		
	c MEMBERSHIP DUES		713990	2,000.	2,000.		
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		528,560.				
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			110,711.		
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6 a Gross rents		6a	(i) Real 51,185.				
b Less: rental expenses ...		6b	97,037.				
c Rental income or (loss)		6c	-45,852.				
d Net rental income or (loss)				-45,852.			-45,852.
7 a Gross amount from sales of assets other than inventory		7a	(i) Securities 1,329,985.				
b Less: cost or other basis and sales expenses		7b	486,331.				
c Gain or (loss)		7c	843,654.				
d Net gain or (loss)				843,654.			843,654.
8 a Gross income from fundraising events (not including \$ 839,505. of contributions reported on line 1c). See Part IV, line 18		8a	71,100.				
b Less: direct expenses		8b	509,117.				
c Net income or (loss) from fundraising events				-438,017.			-438,017.
9 a Gross income from gaming activities. See Part IV, line 19		9a					
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a	144,893.					
b Less: cost of goods sold	10b	70,996.					
c Net income or (loss) from sales of inventory			73,897.	53,639.	20,258.		
Miscellaneous Revenue	11 a OTHER INCOME	Business Code	900099	15,772.	15,772.		
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			15,772.			
	12 Total revenue. See instructions			6,545,221.	597,971.	20,258.	470,496.

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

☒ X

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	392,827.	255,337.	39,283.	98,207.
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	2,707,366.	2,124,161.	221,969.	361,236.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	107,760.	85,825.	3,071.	18,864.
9 Other employee benefits	162,821.	131,791.	5,054.	25,976.
10 Payroll taxes	232,370.	182,994.	9,156.	40,220.
11 Fees for services (nonemployees):				
a Management				
b Legal	3,880.		3,880.	
c Accounting	46,900.		46,900.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	50,086.		50,086.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	708,092.	515,270.	173,739.	19,083.
12 Advertising and promotion	108,934.	103,285.	4,337.	1,312.
13 Office expenses	439,759.	396,004.	9,163.	34,592.
14 Information technology	181,821.	97,936.	45,995.	37,890.
15 Royalties				
16 Occupancy	28,233.	19,531.	5,087.	3,615.
17 Travel	58,241.	33,553.	22,010.	2,678.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	8,353.	2,527.	4,572.	1,254.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	67,094.	62,946.	1,901.	2,247.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on 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	654,419.	654,419.		
b MATERIALS	79,350.	78,676.	278.	396.
c EQUIPMENT EXPENSES	72,142.	57,079.	8,832.	6,231.
d EXHIBITION COSTS	69,592.	69,479.		113.
e All other expenses	270,646.	138,535.	107,435.	24,676.
25 Total functional expenses. Add lines 1 through 24e	6,450,686.	5,009,348.	762,748.	678,590.
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 SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	191,474.	1	411,380.
	2 Savings and temporary cash investments	3,401,156.	2	2,212,901.
	3 Pledges and grants receivable, net	870,843.	3	1,718,653.
	4 Accounts receivable, net	55,920.	4	99,742.
	5 Loans and other receivables from 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	59,340.	8	81,408.
	9 Prepaid expenses and deferred charges	165,341.	9	164,420.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,710,296.		
	b Less: accumulated depreciation	10b 1,710,296.	10c 0.	0.
	11 Investments - publicly traded securities	11,429,609.	11	12,160,404.
	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 33)	16,173,683.	16	16,848,908.	
Liabilities	17 Accounts payable and accrued expenses	498,266.	17	638,173.
	18 Grants payable		18	
	19 Deferred revenue	90,656.	19	87,301.
	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		24	
	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	588,922.	26	725,474.
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	2,031,498.	27	2,121,225.
	28 Net assets with donor restrictions	13,553,263.	28	14,002,209.
	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	15,584,761.	32	16,123,434.
	33 Total liabilities and net assets/fund balances	16,173,683.	33	16,848,908.

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Part XI Reconciliation of Net AssetsCheck 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	6,545,221.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,450,686.
3	Revenue less expenses. Subtract line 2 from line 1	3	94,535.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	15,584,761.
5	Net unrealized gains (losses) on investments	5	444,138.
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 on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	16,123,434.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
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 on Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____	3a	X
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 on Schedule O and describe any steps taken to undergo such audits _____	3b	

Form **990** (2023)

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

23-7062028

g Provide the following information about the supported organization(s).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332021 12-21-23 Schedule A (Form 990) 2023

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 fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,724,237.	4,950,610.	5,267,768.	5,003,408.	5,456,496.	25,402,519.
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 ...	2,340,000.	1,825,000.	1,637,999.	1,638,001.	1,404,000.	8,845,000.
4 Total. Add lines 1 through 3	7,064,237.	6,775,610.	6,905,767.	6,641,409.	6,860,496.	34,247,519.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,160,584.
6 Public support. Subtract line 5 from line 4.						33,086,935.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	7,064,237.	6,775,610.	6,905,767.	6,641,409.	6,860,496.	34,247,519.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...	51,850.	15,355.	63,332.	122,067.	161,896.	414,500.
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.)	148,700.	18,784.	22,377.	117,400.	71,100.	378,361.
11 Total support. Add lines 7 through 10						35,040,380.
12 Gross receipts from related activities, etc. (see instructions)					12	1,713,141.

13 First 5 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 2023 (line 6, column (f), divided by line 11, column (f))	14	94.43 %
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	92.56 %
16a 33 1/3% support test - 2023. 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 <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2022. 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 <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2023. 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 <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2022. 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 <input type="checkbox"/>		
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 <input type="checkbox"/>		

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 on 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 5 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 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2023. 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 - 2022. 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 box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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 (as 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).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</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 on 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 on 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 on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, 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>		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <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>		
2		

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>		
1		

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?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
2		
3 By reason of the relationship described on line 2, above, 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>		
3		

Section E. Type III Functionally Integrated Supporting Organizations

	Yes	No
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 governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b 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>		
2a		
b Did the activities described on line 2a, above, 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>		
2b		
3 Parent of Supported Organizations. Answer lines 3a and 3b 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>If "Yes" or "No" provide details in Part VI.</i>		
3a		
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>		
3b		

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):		
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 (<i>explain in detail in Part VI</i>):		
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 0.015 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 0.035.	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 0.85 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	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5	
6 Other distributions (<i>describe in Part VI</i>). See instructions.	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8	
9 Distributable amount for 2023 from Section C, line 6	9	
10 Line 8 amount divided by line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

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.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

GROSS INCOME FROM FUNDRAISING EVENTS

2019 AMOUNT: \$ 148,200.

2020 AMOUNT: \$ 18,784.

2021 AMOUNT: \$ 22,377.

2022 AMOUNT: \$ 117,400.

2023 AMOUNT: \$ 71,100.

GROSS INCOME FROM GAMING ACTIVITIES

2019 AMOUNT: \$ 500.

2020 AMOUNT: \$ 0.

2021 AMOUNT: \$ 0.

2022 AMOUNT: \$ 0.

2023 AMOUNT: \$ 0.

Schedule B
(Form 990)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization

SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number

23-7062028

Organization type (check one):

Filers of:**Section:**

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.**Special Rules**☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

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

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 460,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 188,700.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 612,283.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 232,935.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 125,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 140,954.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9		\$ 203,965.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10		\$ 896,876.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

23-7062028

Part II

[illegible]

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

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number

23-7062028

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

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

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

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

a ☒ Public exhibition

d ☒ Loan or exchange program

b ☒ Scholarly research

e ☐ Other _____

c ☒ Preservation for future generations

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	11,429,609.	10,661,171.	13,358,549.	12,141,898.	12,410,143.
b Contributions	79,823.	79,027.	78,410.	80,074.	3,944.
c Net investment earnings, gains, and losses	1,157,883.	1,052,815.	-2,223,252.	1,668,709.	258,612.
d Grants or scholarships					
e Other expenditures for facilities and programs	506,911.	363,404.	552,536.	532,132.	530,801.
f Administrative expenses					
g End of year balance	12,160,404.	11,429,609.	10,661,171.	13,358,549.	12,141,898.

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

a Board designated or quasi-endowment .8223 %

b Permanent endowment 71.5674 %

c Term endowment 27.6103 %

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)	X	
3a(ii)		X
3b		

b If "Yes" on line 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.	613,310.	0.
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, line 10c, column (B))				0.

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. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

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. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

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, line 15, col. (B))	

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)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	

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 FASB 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	8,578,239.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	444,138.
b	Donated services and use of facilities	2b	1,541,929.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	1,986,067.
3	Subtract line 2e from line 1	3	6,592,172.
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	50,086.
b	Other (Describe in Part XIII.)	4b	-97,037.
c	Add lines 4a and 4b	4c	-46,951.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	6,545,221.

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	8,039,566.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	1,541,929.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	97,037.
e	Add lines 2a through 2d	2e	1,638,966.
3	Subtract line 2e from line 1	3	6,400,600.
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	50,086.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	50,086.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	6,450,686.

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.

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

Part XIII Supplemental Information *(continued)*

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.

PART III, LINE 4:

THE SAN JOSE MUSEUM OF ART SEEKS TO BUILD A COLLECTION OF THE HIGHEST

QUALITY AND WITH THE GREATEST POTENTIAL FOR COMMUNITY ENGAGEMENT, THEREBY

FULFILLING ITS MISSION TO BE A 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

Part XIII Supplemental Information *(continued)*

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 VISIONARY WOMEN COLLECTION ARTISTS

WERE HIGHLIGHTED IN SIX DEDICATED EXHIBITIONS AND A MAJOR NEW COMMISSIONED

Part XIII Supplemental Information *(continued)*

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.

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.

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

Part XIII Supplemental Information *(continued)*

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.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RENTAL EXPENSES RECLASSIFIED TO REVENUE -97,037.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES RECLASSIFIED TO REVENUE 97,037.

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545-0047

2023

Open to Public Inspection

SAN JOSE MUSEUM OF ART ASSOCIATION

23-7062028

Part I

Fundraising Activities.

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- d** ☐ In-person solicitations

- ☐
- No**

- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

[illegible]

- 3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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.

		(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
		ANNUAL FALL GALA (event type)	(event type)	(total number)	
Revenue	1 Gross receipts	910,605.			910,605.
	2 Less: Contributions	839,505.			839,505.
	3 Gross income (line 1 minus line 2)	71,100.			71,100.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	71,593.			71,593.
	8 Entertainment	3,045.			3,045.
	9 Other direct expenses	434,479.			434,479.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				509,117.
11 Net income summary. Subtract line 10 from line 3, column (d)				-438,017.	

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.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	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 to be 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.

**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

2023

Open to Public
Inspection

Name of the organization

SAN JOSE MUSEUM OF ART ASSOCIATION

Employer identification number

23-7062028

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

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

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

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

3 Indicate which, if any, of the following the 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.

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

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

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

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:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

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:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

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

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

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

X

X

X

X

X

X

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

Schedule J (Form 990) 2023

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

[illegible]

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2023

Open to Public
Inspection

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 instructions and the latest information.

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	11	186,500.	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				
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 (GIFT CERTIFICAT)	X	6	12,910.	FMV
26 Other (FOOD & BEVERAGE)	X	4	5,944.	FMV
27 Other ()				
28 Other ()				

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

29

0

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 3 years from the date of the initial contribution, and which isn't required to be used for
exempt purposes for the entire holding period?

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?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

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.

	Yes	No
30a		X
31	X	
32a		X
33		

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

Schedule M (Form 990) 2023

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.

SCHEDULE M, PART I, COLUMN (B):

THIS COLUMN REPRESENTS THE NUMBER OF ITEMS CONTRIBUTED.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

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 Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023
Open to Public
Inspection

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

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

MISSION:

THE SAN JOSE MUSEUM OF ART NURTURES EMPATHY AND CONNECTION BY ENGAGING
COMMUNITIES WITH SOCIALLY RELEVANT CONTEMPORARY ART.

VISION:

SJMA'S 2024-2027 STRATEGIC PLAN EMPOWERS US TO BECOME A BORDERLESS
MUSEUM, ESSENTIAL TO CREATIVE LIFE THROUGHOUT THE DIVERSE COMMUNITIES
OF SAN JOS AND SILICON VALLEY. AS WE RE-IMAGINE OURSELVES AS A MUSEUM
FOR THE AUDIENCE OF THE FUTURE, THE INNOVATIVE ETHOS OF SILICON VALLEY
INFORMS WHO WE ARE, AND WHO WE SERVE-LOCALLY AND GLOBALLY. WE
PRIORITIZE COMMUNITY RELEVANCE THROUGHOUT OUR EXHIBITIONS, COMMUNITY
COLLABORATIONS AND PUBLIC AND EDUCATION PROGRAMS AND ARE GUIDED BY THE
BELIEF THAT CREATIVITY IS AN ESSENTIAL AND CULTIVATABLE SKILL THAT
TRANSCENDS DISCIPLINES AND INDUSTRIES.

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

PROJECTS TOUCH ON TIMELY TOPICS FROM MIGRATION AND IDENTITY TO
ARTIFICIAL INTELLIGENCE AND INCLUDE SIGNIFICANT ORIGINAL AND TOURING
EXHIBITIONS BY BOTH NATIONALLY AND INTERNATIONALLY ACCLAIMED ARTISTS
AND EMERGING AND UNDER-RECOGNIZED PRACTITIONERS. SJMA SUPPORTS ITS
EXHIBITION PROGRAM WITH SUBSTANTIAL ARTS EDUCATION AND OUTREACH
EFFORTS, A STRONG COMMITMENT TO COMMUNITY PARTNERSHIP, AND A CORE
COMMITMENT TO NURTURING A SENSE OF BELONGING AND WELCOME FOR ALL
MEMBERS OF THE RACIALLY, ETHNICALLY, AND LINGUISTICALLY DIVERSE
COMMUNITY. THE MUSEUM HAS A PUBLICLY STATED COMMITMENT TO ENSURE THAT

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THE MAJORITY OF ARTIST ON VIEW IN ANY GIVEN SEASON ARE WOMEN OR ARTISTS

OF COLOR AND WORKS TO ELIMINATE BARRIERS TO ACCESS BY OFFERING WEEKEND

AND EVENING HOURS, ELIMINATING ADMISSION FEES FOR STUDENTS AND

TEACHERS, AND PROVIDING EXHIBITION DIDACTICS IN ENGLISH, SPANISH, AND

VIETNAMESE-THE THREE OFFICIAL LANGUAGES OF SAN JOSE. IN NOVEMBER 2023,

SJMA WAS AWARDED REACCREDITATION BY THE AMERICAN ALLIANCE OF MUSEUMS.

SJMA'S FY24 EXHIBITION PROGRAM ADVANCED A COMMITMENT TO WOMEN ARTISTS,

SOCIAL JUSTICE, AND TO HIGHLIGHTING THE RICHNESS OF SJMA'S PERMANENT

COLLECTION. VISITORS EXPERIENCED THE BREADTH OF THE MUSEUM'S HOLDINGS

WITH THE PRESENTATION OF EVERGREEN: ART FROM THE COLLECTION (ON VIEW

THROUGH 8/4/24), ENCODE/STORE/RETRIEVE (12/8/23-4/21/24), AND NUTS AND

WHO'S: A CANDY STORE SAMPLER (8/11/23-2/19/24). SJMA WAS THE SOLE BAY

AREA VENUE FOR THE LANDMARK PRESENTATION OF YOLANDA LPEZ: PORTRAIT OF

THE ARTIST, WHICH TRAVELED TO SAN JOSE FROM THE MUSEUM OF CONTEMPORARY

ART, SAN DIEGO, AND EXAMINED THE ARTIST'S LEGACY AS AN ARTIST AND

ACTIVIST. VISUALIZING ABOLITION, AN ONGOING PARTNERSHIP WITH UC SANTA

CRUZ'S INSTITUTE OF ARTS AND SCIENCES, EXPLORED THE INTERSECTIONS OF

ART, PRISONS, AND JUSTICE THROUGH THE MULTI-SITED EXHIBITIONS SADIE

BARNETTE: FAMILY BUSINESS AND SEEING THROUGH STONE. SJMA ALSO PRESENTED

CHRISTINA FERNANDEZ: MULTIPLE EXPOSURES, A LANDMARK EXHIBITION THAT

SURVEYED OVER THREE DECADES OF FERNANDEZ'S MOST IMPORTANT PHOTOGRAPHIC

SERIES AND INSTALLATIONS.

SJMA OFFERS A RANGE OF LECTURES AND PUBLIC PROGRAMS FOR ADULT AUDIENCES

TO INSPIRE LIFELONG LEARNING, FROM ARTIST TALKS AND GALLERY TOURS TO

ARTMAKING WORKSHOPS. THE MUSEUM'S POPULAR FIRST FRIDAY PROGRAM OFFERS

FREE ADMISSION, OPEN GALLERIES, AND LIVE PERFORMANCES, OFTEN FEATURING

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LOCAL PERFORMING ARTISTS AND ARTS ORGANIZATIONS. SJMA'S ANNUAL SUMMER

SERIES, CITYDANCE SAN JOSE, IS OFFERED ON THE THIRD THURSDAY OF EACH

MONTH FROM JUNE THROUGH SEPTEMBER IN PARTNERSHIP WITH THE SAN JOSE

OFFICE OF ECONOMIC DEVELOPMENT AND CULTURAL AFFAIR. THESE PROGRAMS PLAY

A VITAL ROLE IN ADVANCING THE MUSEUM'S CORE COMMITMENT TO CONTRIBUTE TO

THE VIBRANCY OF DOWNTOWN SAN JOSE.

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 IN FY24: 76,183

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

OFF-SITE PROGRAMS, WHICH REACH UP TO 30,000 STUDENTS PER YEAR, INCLUDE

HOURLONG DOCENT PRESENTATIONS ON ARTS APPRECIATION AND MULTI-WEEK

HANDSON ART MAKING CLASSES DEVELOPED AND DELIVERED BY TRAINED SJMA

TEACHING ARTISTS.

OVER 24,000 STUDENTS PARTICIPATED IN SJMA'S EDUCATION PROGRAMS IN FY24.

THE MUSEUM'S CLASSROOM RESIDENCY PROGRAM SOWING CREATIVITY, WHICH

BRINGS TRAINED TEACHING ARTISTS TO AREA CLASSROOMS FOR MULTI-WEEK

RESIDENCIES, SERVED 1,712 STUDENTS. OF THE TOTAL STUDENTS SERVED, 74%

WERE BASED IN TITLE I SCHOOLS AND PARTICIPATED AT NO COST. OVER 5,000

STUDENTS WERE SERVED THROUGH K-12 AND COLLEGE TOURS. SJMA'S FREE,

CLASSROOM-BASED LET'S LOOK AT ART PROGRAM SERVED OVER 18,000 STUDENTS

AND EARNED PUBLIC RECOGNITION WHEN IT WAS AWARDED THE CREATIVE IMPACT

AWARD AT THE CITY OF SAN JOSE'S 2023 CORNERSTONE OF THE ARTS CEREMONY

ON 10/19/23. ALL STUDENTS PARTICIPATING IN SJMA'S EDUCATION PROGRAMS

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RECEIVE FAMILY PASSES THAT GRANT FREE MUSEUM ADMISSION FOR UP TO 8

INDIVIDUALS. OVER 1,500 VISITORS ACCESSED SJMA WITH FAMILY PASSES

DURING FY24.

NUMBER OF STUDENTS SERVED: 26,071

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.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL TRUSTEES, STAFF MEMBERS AND COMMUNITY MEMBERS OF BOARD COMMITTEES MUST

FILL OUT AN ANNUAL CONFLICT OF INTEREST DISCLOSURE STATEMENT. THIS

DISCLOSURE STATEMENT ASKS IF THE RESPONDENTS ARE AWARE OF ANY AFFILIATIONS,

EMPLOYMENT OR OTHER MATTERS INVOLVING THE INDIVIDUAL OR ANY OF IMMEDIATE

FAMILY THAT MIGHT BE PERCEIVED TO COMPROMISE 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,

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

INDIVIDUAL OR IMMEDIATE FAMILY MEMBERS HOLD AN OWNERSHIP INTEREST IN A

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

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

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

ANNUAL DISCLOSURE. ALL STAFF RESPONSES ARE REVIEWED BY THE EXECUTIVE

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

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

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

BOARD COMMITTEE) SHALL REFRAIN FROM ATTEMPTING TO INFLUENCE ANY DECISION OF

THE BOARD, BOARD COMMITTEE, OR STAFF ON ANY MATTER WHICH MAY INVOLVE A

POTENTIAL OR ACTUAL CONFLICT OF INTEREST AND SHALL ABSTAIN FROM VOTING ON

ANY SUCH MATTER.

FORM 990, PART VI, SECTION B, LINE 15:

THE SJMA BOARD OF TRUSTEES HAS ESTABLISHED A COMPENSATION PHILOSOPHY THAT

BALANCES MULTIPLE OBJECTIVES: APPROPRIATE STEWARDSHIP OF ITS FINANCIAL

RESOURCES; ADHERENCE TO THE STRATEGIC PLAN AND ARTISTIC EXCELLENCE IN

PROGRAMMING; AND INCLUSIVE PRACTICES FOR ITS PEOPLE & WORKPLACE WITH A

FOCUS ON EQUITY. SJMA AIMS TO PAY IN THE TOP 50% OF COMPARABLE SALARIES FOR

NEXT-STAGE PEER INSTITUTIONS AND COMPENSATION IS ESTABLISHED COMMENSURATE

WITH EXPERIENCE AND TRAINING, AND IN ACCORDANCE WITH ANNUAL PERFORMANCE

REVIEWS TYING JOB DESCRIPTIONS AND GOALS TO KEY PERFORMANCE INDICATORS

(KPI). THE EXECUTIVE LEADERSHIP TEAM WORKS WITH THE HR DIRECTOR TO ATTRACT,

RETAIN AND MOTIVATE THE TALENT NEEDED TO MAINTAIN THE MUSEUM'S STRATEGIC

GOALS AS A COMMUNITY-FOCUSED PARTNER WITH EQUITY AT ITS CENTER.

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).

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FORM 990, PART IX, LINE 11G, OTHER FEES:

CONSULTING AND OTHER:

PROGRAM SERVICE EXPENSES	495,312.
MANAGEMENT AND GENERAL EXPENSES	166,957.
FUNDRAISING EXPENSES	18,344.
TOTAL EXPENSES	680,613.

PHOTOGRAPHY:

PROGRAM SERVICE EXPENSES	7,404.
MANAGEMENT AND GENERAL EXPENSES	2,516.
FUNDRAISING EXPENSES	274.
TOTAL EXPENSES	10,194.

PROFESSIONAL DEVELOPMENT:

PROGRAM SERVICE EXPENSES	12,554.
MANAGEMENT AND GENERAL EXPENSES	4,266.
FUNDRAISING EXPENSES	465.
TOTAL EXPENSES	17,285.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	708,092.
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