** PUBLIC DISCLOSURE COPY **

COPY

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning SEP 1, 2011 **and ending** AUG 31, 2012

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
SAN JOSE CHILDREN'S DISCOVERY MUSEUM

Doing Business As CHILDREN'S DISCOVERY MUSEUM OF

Number and street (or P.O. box if mail is not delivered to street address) 180 WOZ WAY

Room/suite

City or town, state or country, and ZIP + 4
SAN JOSE, CA 95110

F Name and address of principal officer: MARILEE JENNINGS
SAME AS C ABOVE

D Employer identification number
94-2870828

E Telephone number
408-298-5437

G Gross receipts $ 6,232,217.

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

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

H(c) Group exemption number ▶

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

J Website: ▶ WWW.CDM.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1983 **M** State of legal domicile: CA

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO SERVE THE NEEDS OF CHILDREN, FAMILIES AND SCHOOLS AS A CENTER FOR LEARNING AND DISCOVERY.	
	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)	26
	4	Number of independent voting members of the governing body (Part VI, line 1b)	26
	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	141
	6	Total number of volunteers (estimate if necessary)	203
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.
	b	Net unrelated business taxable income from Form 990-T, line 34	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	3,717,914.	3,848,099.
	9	Program service revenue (Part VIII, line 2g)	1,698,339.	1,830,749.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	923,074.	135,268.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	131,541.	152,501.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,470,868.	5,966,617.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,147,426.	3,404,157.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	115,104.	61,337.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 423,171.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,475,980.	2,568,762.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,738,510.	6,034,256.
	19	Revenue less expenses. Subtract line 18 from line 12	732,358.	-67,639.

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	21,604,664.	21,904,283.
	21	Total liabilities (Part X, line 26)	447,247.	549,315.
	22	Net assets or fund balances. Subtract line 21 from line 20	21,157,417.	21,354,968.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Signature of officer — Date

▶ MARILEE JENNINGS, EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
LAWRENCE S. KUECHLER	LAWRENCE S. KUECHLER	04/08/13	☐	P00233621

Firm's name ▶ BERGER LEWIS ACCOUNTANCY CORP. — Firm's EIN ▶ 94-2763139

Firm's address ▶ 55 ALMADEN BLVD., STE 600, SAN JOSE, CA 95113 — Phone no. (408) 494-1200

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III X

1 Briefly describe the organization's mission:
THE PURPOSE OF CHILDREN'S DISCOVERY MUSEUM OF SAN JOSE IS TO SERVE THE NEEDS OF CHILDREN, FAMILIES AND SCHOOLS AS A CENTER FOR LEARNING AND DISCOVERY. FOR CHILDREN, IT IS FIRST AND FOREMOST A PLACE TO CALL THEIR OWN, OFFERING INTERACTIVE EXHIBITS AND PROGRAMS IN A WARM AND

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 and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 1,658,286. including grants of $) (Revenue $ 1,722,950.)
EXHIBITS - CHILDREN'S DISCOVERY MUSEUM OF SAN JOSE HAS SERVED OVER 6.7 MILLION ADULTS AND CHILDREN SINCE OPENING ITS DOORS IN THE SPRING OF 1990. IN THE 2011-2012 FISCAL YEAR, THE MUSEUM PROVIDED ENGAGING LEARNING OPPORTUNITIES TO OVER 255,000 FAMILIES AND 35,000 GROUP VISITORS.

THE MUSEUM OFFERS 28,000 SQUARE FEET OF EXHIBITION SPACE IN 13 DEDICATED GALLERIES, EACH HOUSING 8 - 10 INTERACTIVE EXHIBITS WHICH RESPOND TO THE DISTINCTIVE NEED FOR CHILDREN TO LEARN THROUGH CONCRETE INTERACTIONS. THEREFORE, THE MUSEUM'S EXHIBITS ENCOURAGE TOUCHING, EXPLORING, MANIPULATING AND EXPERIMENTING AND CUT ACROSS THE DISCIPLINES OF ART, SCIENCE AND THE HUMANITIES. THE MUSEUM'S THEME IS

4b (Code:) (Expenses $ 2,696,856. including grants of $) (Revenue $ 110,947.)
EDUCATIONAL PROGRAMS - THE MUSEUM PROVIDES ON-SITE PROGRAMS WHICH COMPLEMENT ITS EXHIBITS AND SUPPORT VISITOR INTERACTIONS AND LEARNING OPPORTUNITIES. IN 2011-2012, THE MUSEUM PROVIDED PROGRAMS FOR OVER 38,000 PARTICIPANTS. IN ADDITION, THE ON-SITE ART STUDIO IN THE WONDER CABINET AND ART LOFT ARE EXAMPLES OF THE MUSEUM'S COMMITMENT TO ARTS EDUCATION EXPERIENCES. THE KIDS' GARDEN FEATURES PROGRAMMING THAT SUPPORTS SCIENCE LEARNING AND PROVIDES HANDS-ON NATURE EXPERIENCES. BEYOND CHILDREN'S DISCOVERY MUSEUM OF SAN JOSE'S EXHIBIT GALLERIES, THE EDUCATIONAL PROGRAMS BRING RESOURCES AND INNOVATIVE LEARNING TECHNIQUES TO SCHOOLS; ENCOURAGE YOUNG ADULTS TO BECOME ACTIVE CITIZENS BY IMPACTING THEIR ENVIRONMENT AND SERVING THEIR COMMUNITY; STIMULATE CURIOSITY AND PROMOTE AN INQUIRY BASED LEARNING ENVIRONMENT; AND REACH

4c (Code:) (Expenses $ 198,092. including grants of $) (Revenue $ 149,353.)
RETAIL SERVICES - LOCATED AT THE ENTRANCE TO THE MUSEUM, THE RETAIL STORE OFFERS EDUCATIONALLY-BASED PRODUCTS FOR SALE, WHICH SUPPORT AND EXTEND THE ACTIVITIES ENCOUNTERED THROUGH INTERACTION WITH MUSEUM EXHIBITS AND PROGRAMS. CUSTOM PRODUCTS AND LICENSED EXHIBIT- AND PROGRAM-RELATED ITEMS ARE ALSO FEATURED.

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

4e **Total program service expenses** ▶ 4,553,234.

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)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	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 Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	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? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	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? *If "Yes," complete Schedule D, Part VI*	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? *If "Yes," complete Schedule D, Part VII*	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? *If "Yes," complete Schedule D, Part VIII*	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? *If "Yes," complete Schedule D, Part IX*	11d	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	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)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	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? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	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? *If "Yes," complete Schedule G, Part I*	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? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		X
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25*	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) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		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? *If "Yes," complete Schedule L, Part I*	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		X
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	29		
b	Enter the number of Forms W-2G included in 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			
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	141		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
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? *If "No," provide an explanation in Schedule O*	3b			
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 Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
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?	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			
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		N/A	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		N/A	
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	N/A		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	9a	N/A		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	N/A		
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12 N/A	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 N/A	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 N/A	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	N/A		
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? *If "No," provide an explanation in Schedule O*	14b			

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

Check if Schedule O contains a response to any question in this Part VI X

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	26		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	26		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its 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 in 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 in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	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 in 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 in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," 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 (or 1024 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.

[X] Own website [ ] Another's website [X] Upon request

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶

SUSAN CLARK - 408-298-5437

180 WOZ WAY, SAN JOSE, CA 95110

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

Check if Schedule O contains a response to any question in this Part VII ☐

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MARK GARRETT CHAIR OF THE BOARD	2.00	X		X				0.	0.	0.
(2) MARK MCCAFFREY VICE CHAIR	2.00	X		X				0.	0.	0.
(3) KEVIN KRYSLER - FROM JAN 2012 TREASURER	2.00	X		X				0.	0.	0.
(4) MELISSA HARDAWAY SECRETARY	2.00	X		X				0.	0.	0.
(5) WILLIAM SULLIVAN BOARD MEMBER	2.00	X						0.	0.	0.
(6) FRANK A. CALDERONI BOARD MEMBER	2.00	X						0.	0.	0.
(7) DAN AMEND BOARD MEMBER	2.00	X						0.	0.	0.
(8) RAJAN BHANDARI, MD BOARD MEMBER	2.00	X						0.	0.	0.
(9) RENU R. BHATIA BOARD MEMBER	2.00	X						0.	0.	0.
(10) TIM CAMPOS - FROM MAR 2012 BOARD MEMBER	2.00	X						0.	0.	0.
(11) KEVIN CANTY BOARD MEMBER	2.00	X						0.	0.	0.
(12) SYDNEY CAREY - FROM MAR 2012 BOARD MEMBER	2.00	X						0.	0.	0.
(13) JESSICA DENECOUR BOARD MEMBER	2.00	X						0.	0.	0.
(14) PATRICIA K. EASTMAN - FROM JUL BOARD MEMBER	2.00	X						0.	0.	0.
(15) LAURA FENNELL BOARD MEMBER	2.00	X						0.	0.	0.
(16) RALPH GILLESPIE - FROM JAN 2012 BOARD MEMBER	2.00	X						0.	0.	0.
(17) LISA SOBRATO SONSINI BOARD MEMBER	2.00	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 (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ELAINE HAMILTON BOARD MEMBER	2.00	X						0.	0.	0.
(19) JEFFREY HOUSENBOLD BOARD MEMBER	2.00	X						0.	0.	0.
(20) SUSAN LEE - FROM MAY 2012 BOARD MEMBER	2.00	X						0.	0.	0.
(21) ALAN MARKS BOARD MEMBER	2.00	X						0.	0.	0.
(22) SONNY SINGH BOARD MEMBER	2.00	X						0.	0.	0.
(23) SIMON HEAP BOARD MEMBER	2.00	X						0.	0.	0.
(24) KIRSTEN RHODES BOARD MEMBER	2.00	X						0.	0.	0.
(25) ROBIN WASHINGTON BOARD MEMBER	2.00	X						0.	0.	0.
(26) IRENE WONG BOARD MEMBER	2.00	X						0.	0.	0.
1b Sub-total ▶								0.	0.	0.
c Total from continuation sheets to Part VII, Section A ▶								578,148.	0.	36,687.
d Total (add lines 1b and 1c) ▶								578,148.	0.	36,687.

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

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. 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
TBI CONSTRUCTION AND CONSTRUCTION MANAGEMEN 1960 THE ALAMEDA, STE 20, SAN JOSE, CA 9512	FACILITY/EXHIBIT CONSTRUCTION AND INS	372,173.
FLAGSHIP FACILITY SERVICES PO BOX 612140, SAN JOSE, CA 95161	FACILITY AND JANITORIAL SERVICES	206,274.

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

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) TED DUBBS - TO JAN 2012 BOARD MEMBER	2.00	X						0.	0.	0.
(28) BETH FARMAN-FARMAIAN,MD - TO NO BOARD MEMBER	2.00	X						0.	0.	0.
(29) KAREN ROHDE - TO SEP 2011 BOARD MEMBER	2.00	X						0.	0.	0.
(30) QUINN TRAN - TO SEP 2011 BOARD MEMBER	2.00	X						0.	0.	0.
(31) MARILEE JENNINGS EXECUTIVE DIRECTOR	40.00			X				210,529.	0.	10,062.
(32) SUSAN CLARK DIRECTOR OF FINANCE & ADM	40.00			X				127,421.	0.	11,814.
(33) PATRICIA NARCISO DIRECTOR OF DVLPMT & MKT	40.00					X		116,176.	0.	12,393.
(34) CHERYL BLUMENTHAL DIRECTOR OF INFORMATION SY	40.00					X		124,022.	0.	2,418.
Total to Part VII, Section A, line 1c								578,148.		36,687.

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b	623,280.			
	c Fundraising events	1c	1,007,835.			
	d Related organizations	1d				
	e Government grants (contributions)	1e	651,414.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,565,570.			
	g Noncash contributions included in lines 1a-1f: $ 122,721.					
	h **Total.** Add lines 1a-1f		3,848,099.			
Program Service Revenue		Business Code				
	2a ADMISSIONS	611600	1,502,237.	1,502,237.		
	b TRAVELING EXHIBITS	611600	217,565.	217,565.		
	c PROGRAM FEES	611600	110,947.	110,947.		
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a-2f		1,830,749.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		135,268.			135,268.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
		(i) Real	(ii) Personal			
	6a Gross rents					
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory					
	b Less: cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)					
	8a Gross income from fundraising events (not including $ 1,007,835. of contributions reported on line 1c). See Part IV, line 18	a 106,282.				
	b Less: direct expenses	b 106,282.				
	c Net income or (loss) from fundraising events		0.			
	9a Gross income from gaming activities. See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances	a 308,671.				
	b Less: cost of goods sold	b 159,318.				
	c Net income or (loss) from sales of inventory		149,353.	149,353.		
	Miscellaneous Revenue	Business Code				
	11a MISC REBATES AND REFUN	611600	3,148.	3,148.		
	b					
	c					
	d All other revenue					
	e **Total.** Add lines 11a-11d		3,148.			
	12 **Total revenue.** See instructions.		5,966,617.	1,983,250.	0.	135,268.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question in this Part IX ☐

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	360,285.	85,339.	215,976.	58,970.
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	2,624,179.	2,126,353.	333,203.	164,623.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	202,321.	108,085.	73,973.	20,263.
10	Payroll taxes	217,372.	166,753.	36,064.	14,555.
11	Fees for services (non-employees):				
a	Management				
b	Legal				
c	Accounting	41,597.		41,597.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17	61,337.			61,337.
f	Investment management fees	2,084.		2,084.	
g	Other	361,191.	184,851.	159,035.	17,305.
12	Advertising and promotion	134,544.	134,544.		
13	Office expenses	176,108.	132,498.	28,555.	15,055.
14	Information technology				
15	Royalties				
16	Occupancy	275,050.	239,336.	27,461.	8,253.
17	Travel	49,876.	45,865.	5,264.	-1,253.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	67,167.	30,601.	10,249.	26,317.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	634,665.	576,724.	45,087.	12,854.
23	Insurance	51,012.	44,381.	5,101.	1,530.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	EQUIPMENT RENTAL & MAIN	475,533.	407,106.	50,857.	17,570.
b	SMALL EQUIPMENT	292,251.	270,798.	15,661.	5,792.
c	TRAINING	7,684.		7,684.	
d					
e	All other expenses				
25	**Total functional expenses.** Add lines 1 through 24e	6,034,256.	4,553,234.	1,057,851.	423,171.
26	**Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		635,216.	1	836,053.
	2	Savings and temporary cash investments		757,047.	2	621,962.
	3	Pledges and grants receivable, net		1,403,197.	3	906,575.
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		28,960.	8	31,714.
	9	Prepaid expenses and deferred charges		63,243.	9	148,864.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 10,095,235.			
	b	Less: accumulated depreciation	10b 6,241,435.	3,633,734.	10c	3,853,800.
	11	Investments - publicly traded securities		5,510,677.	11	6,119,959.
	12	Investments - other securities. See Part IV, line 11		253,687.	12	162,431.
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		9,318,903.	15	9,222,925.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		21,604,664.	16	21,904,283.
Liabilities	17	Accounts payable and accrued expenses		359,806.	17	460,784.
	18	Grants payable			18	
	19	Deferred revenue		77,541.	19	75,846.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			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		9,900.	25	12,685.
	26	**Total liabilities.** Add lines 17 through 25		447,247.	26	549,315.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		9,266,082.	27	9,554,047.
	28	Temporarily restricted net assets		10,730,240.	28	10,639,826.
	29	Permanently restricted net assets		1,161,095.	29	1,161,095.
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		21,157,417.	33	21,354,968.
	34	Total liabilities and net assets/fund balances		21,604,664.	34	21,904,283.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI X

1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,966,617.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,034,256.
3	Revenue less expenses. Subtract line 2 from line 1	3	-67,639.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	21,157,417.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	265,190.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	21,354,968.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII .....

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	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 in Schedule O.	2c	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	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 in Schedule O and describe any steps taken to undergo such audits.	3b		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization	Employer identification number
SAN JOSE CHILDREN'S DISCOVERY MUSEUM	94-2870828

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

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i)		
(ii)	A family member of a person described in (i) above? 11g(ii)		
(iii)	A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii)		

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document? Yes	(iv) No	(v) Did you notify the organization in col. (i) of your support? Yes	(v) No	(vi) Is the organization in col. (i) organized in the U.S.? Yes	(vi) No	(vii) Amount of support
Total									

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3111957.	2413521.	4755907.	3717914.	3848099.	17847398.
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	644,521.	639,479.	634,101.	628,362.	622,241.	3168704.
4 **Total.** Add lines 1 through 3	3756478.	3053000.	5390008.	4346276.	4470340.	21016102.
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)						72,029.
6 **Public support.** Subtract line 5 from line 4.						20944073.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	3756478.	3053000.	5390008.	4346276.	4470340.	21016102.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	204,660.	157,376.	153,982.	128,607.	135,268.	779,893.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	5,130.	12,818.	14,726.	4,720.	3,148.	40,542.
11 **Total support.** Add lines 7 through 10						21836537.
12 Gross receipts from related activities, etc. (see instructions)					12	11,469,159.

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	95.91 %
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	95.91 %

16a **33 1/3% support test - 2011.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support test - 2010.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2011.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2010.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

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

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

(Complete only if you checked the box on line 9 of Part I 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 **Total support** (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2011** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2010** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2011.** 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 - 2010.** 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 ▶ ☐

** PUBLIC DISCLOSURE COPY **

Schedule B (Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2011

Name of the organization	Employer identification number
SAN JOSE CHILDREN'S DISCOVERY MUSEUM	94-2870828

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

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

General Rule

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

Special Rules

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

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

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

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

Name of organization: SAN JOSE CHILDREN'S DISCOVERY MUSEUM

Employer identification number: 94-2870828

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		$ 498,760.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
2		$ 376,860.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
3		$ 150,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
4		$ 125,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
5		$ 110,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
6		$ 106,139.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

Name of organization: SAN JOSE CHILDREN'S DISCOVERY MUSEUM

Employer identification number: 94-2870828

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		$ 101,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
8		$ 84,746.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
9		$ 78,860.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

Name of organization: SAN JOSE CHILDREN'S DISCOVERY MUSEUM

Employer identification number: 94-2870828

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
8	SOFTWARE AND FURNITURE	$ 84,746.	04/19/12
		$	
		$	
		$	
		$	
		$	
		$	

Name of organization: SAN JOSE CHILDREN'S DISCOVERY MUSEUM

Employer identification number: 94-2870828

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

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

(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

(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

(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

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization
SAN JOSE CHILDREN'S DISCOVERY MUSEUM

Employer identification number
94-2870828

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ 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? ☐ Yes ☐ No

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

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

☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

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 in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, 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, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in 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 SFAS 116 (ASC 958) relating to these items:

a Revenues included in 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 are a significant use of its collection items (check all that apply):

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

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

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

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

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

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	4,378,724.	3,631,684.	2,153,488.	3,201,359.	
b Contributions		84,784.	1,033,415.		
c Net investment earnings, gains, and losses	296,371.	681,207.	89,201.	-440,577.	
d Grants or scholarships					
e Other expenditures for facilities and programs	226,789.	18,951.		607,294.	
f Administrative expenses					
g End of year balance	4,448,306.	4,378,724.	3,276,104.	2,153,488.	

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

a Board designated or quasi-endowment ▶ 60.70 %
b Permanent endowment ▶ 26.10 %
c Temporarily restricted endowment ▶ 13.20 %

The percentages in 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:

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

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

Part VI Land, Buildings, and Equipment. 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		803,033.	237,816.	565,217.
d Equipment		1,311,425.	1,001,553.	309,872.
e Other		7,980,777.	5,002,066.	2,978,711.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				3,853,800.

Part VII Investments - Other Securities. 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)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) DONATED RENT RECEIVABLE	9,217,221.
(2) OTHER CURRENT ASSETS	5,704.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15.)* ▶	9,222,925.

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CUSTOMER DEPOSITS	12,685.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25.)* ▶	12,685.

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	5,966,617.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,034,256.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-67,639.
4	Net unrealized gains (losses) on investments	4	265,190.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	265,190.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	197,551.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	7,015,944.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	265,190.		
b	Donated services and use of facilities	2b	625,291.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d			
e	Add lines **2a** through **2d**			2e	890,481.
3	Subtract line **2e** from line **1**			3	6,125,463.
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			
b	Other (Describe in Part XIV.)	4b	-158,846.		
c	Add lines **4a** and **4b**			4c	-158,846.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	5,966,617.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	6,818,393.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	625,291.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV.)	2d	159,318.		
e	Add lines **2a** through **2d**			2e	784,609.
3	Subtract line **2e** from line **1**			3	6,033,784.
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			
b	Other (Describe in Part XIV.)	4b	472.		
c	Add lines **4a** and **4b**			4c	472.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	6,034,256.

Part XIV Supplemental Information

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

PART V, LINE 4: THE INTENDED USE OF ORGANIZATION'S ENDOWMENT FUNDS IS TO GENERATE INCOME FOR VARIOUS PROGRAMS.

PART X, LINE 2: UNCERTAINTY IN INCOME TAXES - GENERALLY ACCEPTED ACCOUNTING PRINCIPLES PROVIDE ACCOUNTING AND DISCLOSURE GUIDANCE ABOUT POSITIONS TAKEN BY AN ORGANIZATION IN ITS TAX RETURNS THAT MIGHT BE UNCERTAIN. MANAGEMENT HAS CONSIDERED ITS TAX POSITIONS AND BELIEVES THAT ALL OF THE POSITIONS TAKEN BY THE MUSEUM IN ITS FEDERAL AND STATE EXEMPT

Part XIV Supplemental Information *(continued)*

ORGANIZATION TAX RETURNS ARE MORE LIKELY THAN NOT TO BE SUSTAINED UPON EXAMINATION.

THE MUSEUM'S FEDERAL RETURNS FOR THE YEARS ENDED AUGUST 31, 2011, 2010 AND 2009 COULD BE SUBJECT TO EXAMINATION BY FEDERAL TAXING AUTHORITIES, GENERALLY FOR THREE YEARS AFTER THEY ARE FILED. THE MUSEUMS STATE RETURNS FOR THE YEARS ENDED AUGUST 31, 2011, 2010, 2009 AND 2008 COULD BE SUBJECT TO EXAMINATION BY STATE TAXING AUTHORITIES, GENERALLY FOR FOUR YEARS AFTER THEY ARE FILED.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

COST OF GOODS SOLD	-159,318.
CAR DONATION SERVICE FEE	472.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	-158,846.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD	159,318.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

CAR DONATION SERVICE FEE	472.

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2011

Open To Public Inspection

Name of the organization
SAN JOSE CHILDREN'S DISCOVERY MUSEUM

Employer identification number
94-2870828

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

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a [X] Mail solicitations
b [X] Internet and email solicitations
c [X] Phone solicitations
d [X] In-person solicitations
e [X] Solicitation of non-government grants
f [X] Solicitation of government grants
g [X] Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? [X] Yes [ ] No

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
MARCUSSEN & ASSOCIATES - 2300 THORNSBERRY ROAD, SONOMA, CA	INFORMAL SCIENCE GRANT WRITER		X	0.	15,000.	0.
TOWNSEND PUBLIC AFFAIRS - 2644 WHITE ROAD, IRVINE, CA	PUBLIC SUPPORT		X	0.	26,200.	0.
BRAKELEY BRISCOE, INC. - 85 CAMP AVENUE, SUITE 9H,	CAPITAL CAMPAIGN FEASIBILITY STUDY		X	0.	15,365.	0.
Total ▶					56,565.	

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.

CA

SEE PART IV FOR CONTINUATIONS

Part II Fundraising Events. Complete if the organization answered "Yes" to 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 LEGACY OF CHILDREN (event type)	(b) Event #2 FAMILY SCIENCE NIGH (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	1,097,617.	12,673.		1,110,290.
	2 Less: Charitable contributions	991,335.	12,673.		1,004,008.
	3 Gross income (line 1 minus line 2)	106,282.			106,282.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	4,400.			4,400.
	7 Food and beverages	85,021.			85,021.
	8 Entertainment				
	9 Other direct expenses	16,861.			16,861.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				(106,282.)
	11 Net income summary. Combine line 3, column (d), and line 10 ▶				0.

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

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

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

a Is the organization licensed to operate gaming activities in each of these states? ☐ 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 operate 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 operated in:

a The organization's facility	13a	%
b An outside facility	13b	%

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

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ 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.** Complete this part to 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 complete this part to provide any additional information (see instructions).

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: MARCUSSEN & ASSOCIATES

(I) ADDRESS OF FUNDRAISER: 2300 THORNSBERRY ROAD, SONOMA, CA 95476

(I) NAME OF FUNDRAISER: TOWNSEND PUBLIC AFFAIRS

(I) ADDRESS OF FUNDRAISER: 2644 WHITE ROAD, IRVINE, CA 92614

(I) NAME OF FUNDRAISER: BRAKELEY BRISCOE, INC.

Part IV **Supplemental Information** *(continued)*

(I) ADDRESS OF FUNDRAISER: 85 CAMP AVENUE, SUITE 9H, STAMFORD, CT 06907

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization

SAN JOSE CHILDREN'S DISCOVERY MUSEUM

Employer identification number

94-2870828

Part I Questions Regarding Compensation

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

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 MARILEE JENNINGS	(i)	190,000.	1,900.	18,629.	0.	10,062.	220,591.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization: SAN JOSE CHILDREN'S DISCOVERY MUSEUM

Employer identification number: 94-2870828

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				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles	X	4	23,522.	FMV/GROSS SALES PROC
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	1	2,612.	FAIR MARKET VALUE
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 ▶ (SOFTWARE)	X	2	79,746.	FAIR MARKET VALUE
26	Other ▶ (FUNITURE)	X	2	12,000.	FAIR MARKET VALUE
27	Other ▶ (SUPPLIES)	X	8	4,841.	FAIR MARKET VALUE
28	Other ▶ ( )				

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

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

Part II **Supplemental Information.** Complete this part to 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, LINE 32B: THE ORGANIZATION CONTRACTS WITH CAR PROGRAM INC TO CONDUCT A CAR DONATION PROGRAM.

SCHEDULE O (Form 990 or 990-EZ)

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 990-EZ.

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization: SAN JOSE CHILDREN'S DISCOVERY MUSEUM

Employer identification number: 94-2870828

FORM 990, PART I, DOING BUSINESS AS:

CHILDREN'S DISCOVERY MUSEUM OF SAN JOSE

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

INVITING SETTING. ITS EDUCATIONAL MISSION ENCOMPASSES THE THEMES OF CONNECTIONS, COMMUNITY, AND CREATIVITY. IN ITS UNIQUE ENVIRONMENT, CHILDREN ACTIVELY MAKE CONNECTIONS AMONG IDEAS, PEOPLE AND CULTURES. THE MUSEUM'S PROGRAMS ALSO ENCOURAGE CHILDREN TO DEFINE THEIR ROLE IN AND CONTRIBUTION TO BOTH LOCAL AND GLOBAL COMMUNITIES. FINALLY, AS A CENTER FOR CREATIVE PLAY AND EXPRESSION, CHILDREN'S DISCOVERY MUSEUM OF SAN JOSE PROVIDES OPPORTUNITIES FOR ALL OF US TO DISCOVER THE WORLD THROUGH THE EYES OF OUR CHILDREN.

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

CONNECTIONS; THE CONTEXT IS COMMUNITY - THE MYRIAD RELATIONSHIPS WITHIN AND BETWEEN THE MANMADE AND NATURAL WORLDS AND THE WAY THOSE RELATIONSHIPS ARE EXPRESSED HERE IN OUR OWN BACKYARD. WHETHER CHILDREN ARE ROLE-PLAYING A FIREFIGHTER ON THE AUTHENTIC FIRE ENGINE IN THE STREETS OF SAN JOSE EXHIBIT, USING COLORFUL PLASTIC BALLS TO STUDY HOW WATER RUSHES AND FLOWS IN WATERWAYS, OR EXPERIMENTING WITH SURFACE TENSION BY PLAYING WITH BUBBLES IN BUBBALOGNA, THEY ARE ACTIVELY ENGAGED IN LEARNING, INSPIRED BY THEIR OWN CURIOSITY TO INVESTIGATE HOW THINGS WORK AND UNDERSTAND MORE ABOUT THE WORLD WE LIVE IN. WHILE THE MAJORITY OF EXHIBITS FOCUS ON CHILDREN TO AGE 10 AND THEIR PARENTS AND CAREGIVERS, THE WONDER CABINET SERVES THE NEEDS OF THE MUSEUM'S YOUNGEST VISITORS AS AN EARLY LEARNING ENVIRONMENT WITH EXHIBITS

Name of the organization: SAN JOSE CHILDREN'S DISCOVERY MUSEUM

Employer identification number: 94-2870828

DESIGNED TO SUPPORT THE COGNITIVE, EMOTIONAL AND SOCIAL DEVELOPMENT OF INFANTS, TODDLERS AND PRESCHOOLERS. IN JUNE, 2011, THE MUSEUM OPENED ITS NEWEST NATIONAL SCIENCE FOUNDATION-FUNDED EXHIBIT, MAMMOTH DISCOVERY!, SHOWCASING THE REMAINS OF A COLUMBIAN MAMMOTH FOUND BY A SAN JOSE RESIDENT ALONG THE GUADALUPE RIVER. THE EXHIBIT ALSO FEATURES A FULL-SIZE REPLICA OF THIS YOUNG MAMMOTH, FUNDED BY THE SANTA CLARA VALLEY WATER DISTRICT, AND A SCULPTURE OF AN ADULT MAMMOTH LOCATED JUST OUTSIDE OF THE MUSEUM. THE RESEARCH ROOM, LOCATED UNDER THE MAIN STAIRWAY, SUPPORTS THE MUSEUMS LONG STANDING UC SANTA CRUZ RESEARCH PARTNERS CONDUCTING INTERVIEWS AND ONE-ON ONE INTERACTIONS WITH THE MUSEUM'S AUDIENCE THAT HELP INFORM EXHIBIT DESIGN AND EDUCATIONAL PROGRAM DEVELOPMENT ON SCIENCE TOPICS. THE SPACE ALSO PROVIDES THE RESEARCH OF A DEVELOPMENTAL PSYCHOLOGIST AT STANFORD UNIVERSITY SEEKING INCREASE THE UNDERSTANDING OF LANGUAGE DEVELOPMENT IN VERY YOUNG CHILDREN.

TOTAL OF 290,294 PEOPLE WERE SERVED DURING THE YEAR.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
THE CHILDREN AND YOUTH IN OUR COMMUNITY MOST IN NEED OF EXTRA SUPPORT, WITH EXPERIENCES DESIGNED TO ENSURE THAT CHILDREN KNOW THEIR OWN WORTH, RESPECT THEIR OWN KNOWLEDGE, AND ACHIEVE THEIR GREATEST POTENTIAL. HIGHLY SUCCESSFUL PROGRAMS, SUCH AS BIOSITE (STUDENTS INVESTIGATING THEIR ENVIRONMENT), ENGAGE HIGH SCHOOL STUDENTS IN MENTORING ELEMENTARY SCHOOL STUDENTS TO VALUE THEIR LOCAL RIVER BY GATHERING IMPORTANT WATER QUALITY INFORMATION AND SHARING THE INFORMATION WITH THE SCIENTIFIC RESEARCH COMMUNITY; SUMMER OF SERVICE PROVIDES MIDDLE SCHOOL YOUTH VOLUNTEER OPPORTUNITIES AT LOCAL FOOD BANKS AND SHELTERS, SENIOR

Name of the organization: SAN JOSE CHILDREN'S DISCOVERY MUSEUM

Employer identification number: 94-2870828

CENTERS, PARKS AND PRESCHOOLS; AND FAMILY LUNADAS SHOWCASE LOCAL YOUTH IN A FREE EVENING EVENT FOR GRANDPARENTS, AUNTS, UNCLES, AND PARENTS TO SUPPORT THE CHILDREN IN THEIR LIVES AS THEY PERFORM DANCES AND SONGS FROM THEIR OWN CULTURAL TRADITIONS, ARE JUST A FEW OF THE WAYS THAT CHILDREN'S DISCOVERY MUSEUM OF SAN JOSE SEEKS TO BROADEN ITS IMPACT THROUGHOUT OUR DIVERSE COMMUNITY.

IN JULY, 2012, THE MUSEUM RECEIVED FUNDING FROM IMLS (INSTITUTE OF MUSEUM AND LIBRARIES SERVICES) TO STRENGTHEN RECENT HEALTHY EATING INITIATIVES IN THE RAINBOW PIZZA AND MARKET EXHIBIT AND HOPE REHABILITATION'S KIDS' CAFE. OVER THE NEXT TWO YEARS, THE MUSEUM WILL UNDERTAKE AN INSTITUTIONAL APPROACH THAT EMBRACES AUTHENTIC EXPERIENCES WITH FOOD, FULLY ENGAGING THE MUSEUM'S AUDIENCE IN EXPLORATION OF THE CULTURAL, SOCIAL AND ECONOMIC PRACTICES OF FOOD PRODUCTION AND CONSUMPTION IN SILICON VALLEY, A REGION RICH IN AGRICULTURAL HISTORY, NEW EXCITEMENT FOR URBAN FARMING, AND BURGEONING ETHNIC CUISINE. FAMILY FOODWAYS WILL ENGAGE THE MUSEUM'S AUDIENCE IN IDENTIFYING AND CREATING STRATEGIES TO ADDRESS OUR COMMUNITY'S PRIORITY TO REDUCE OBESITY THROUGH EARLY INTERVENTION BY ADVANCING FOOD LITERACY AND HONORING OUR VALLEY'S AGRICULTURAL PAST THROUGH FARM-TO-FORK PROGRAMS.

THE SUCCESS OF THE MUSEUM'S ZERO-WASTE INITIATIVE WAS RECOGNIZED BY THE NATIONAL ASSOCIATION OF CHILDREN'S MUSEUMS WITH ITS 2012 PROMISING PRACTICES REPLICATION AWARD SPONSORED BY THE METLIFE FOUNDATION. WITH THIS ACKNOWLEDGMENT, THE MUSEUM WILL DESIGN AND PUBLISH AN ON-LINE TOOLKIT TO BE USED BY OTHER MUSEUMS SEEKING TO DEVELOP SIMILAR PROGRAMS IN THEIR INSTITUTIONS.

Name of the organization: SAN JOSE CHILDREN'S DISCOVERY MUSEUM

Employer identification number: 94-2870828

TOTAL OF 38,963 PEOPLE WERE SERVED DURING THE YEAR.

FORM 990, PART VI, SECTION A, LINE 4: CHANGES INCLUDE LIMITING THE TERM OF BOARD DIRECTORS TO 3 CONSECUTIVE 3 YEAR TERMS.

FORM 990, PART VI, SECTION B, LINE 11: THE 990 IS FIRST PRESENTED TO AND REVIEWED IN DEPTH BY THE ORGANIZATION'S AUDIT COMMITTEE. UPON THE COMPLETION OF THE REVIEW, THE CHAIR OF THE AUDIT COMMITTEE WILL PRESENT THE BOARD WITH THE RETURN AND A LIST OF ANY SIGNIFICANT POINTS.

FORM 990, PART VI, SECTION B, LINE 12C: EACH BOARD MEMBER REVIEWS AND SIGNS THE CONFLICT OF INTEREST POLICY AT THE BOARD'S ANNUAL BUSINESS MEETING IN SEPTEMBER. NEWLY ELECTED BOARD MEMBERS REVIEW AND SIGN THE POLICY UPON THEIR ELECTION TO THE BOARD.

FORM 990, PART VI, SECTION B, LINE 15: A) PERFORMANCE REVIEW OF EXECUTIVE DIRECTOR IS CONDUCTED BY THE CHAIR OF THE BOARD WITH INPUT FROM BOARD MEMBERS.

B) DIRECTOR OF FINANCE & ADMINISTRATION IS REVIEWED ANNUALLY BY THE EXECUTIVE DIRECTOR. HR COMMITTEE HAS IDENTIFIED 5 SIMILAR INSTITUTIONS WHERE COMPENSATION, ALONG WITH OTHER RELEVANT INFORMATION, IS REVIEWED FOR COMPARIBILITY.

THE BOARD APPROVES COMPENSATION FOR THESE TWO POSITIONS. THE PROCESS WAS UNDERTAKEN IN 2012.

FORM 990, PART VI, SECTION C, LINE 19: ORGANIZATIONAL AND GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.

Name of the organization: SAN JOSE CHILDREN'S DISCOVERY MUSEUM

Employer identification number: 94-2870828

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED GAINS ON INVESTMENTS: 265,190.

FORM 990, SCHEDULE M, LINE 31:

POLICY FOR ACCEPTING NON-CASH CONTRIBUTIONS

IT IS THE POLICY OF CHILDREN'S DISCOVERY MUSEUM OF SAN JOSE TO ACCEPT NON-CASH DONATIONS, INCLUDING SERVICES, MATERIALS, FURNITURE, EQUIPMENT, ETC. DONATIONS ARE RECORDED AT FAIR MARKET VALUE. ASSETS ARE DEPRECIATED ON THE SAME BASIS AS PURCHASED ASSETS. DETERMINATION OF THE FAIR MARKET VALUE WILL BE THE RESPONSIBILITY OF THE DONOR.

THE AUDIT COMMITTEE WILL REVIEW ESTIMATED AMOUNTS OVER $10,000.

FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	FURNITURE & FIXTURES											
27	FURNITURE AND FIXTURES	VARIES	SL	.000	16	201,326.			201,326.	107,260.		30,284.
	* 990 PAGE 10 TOTAL FURNITUR & FIXTUR					201,326.		0.	201,326.	107,260.	0.	30,284.
	MACHINERY & EQUIPMENT											
25	EQUIPMENT	VARIES	SL	.000	16	1021051.			1021051.	817,176.		24,840.
31	SOFTWARE	VARIES	SL	.000	16	290,374.			290,374.	96,693.		62,844.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPM					1311425.		0.	1311425.	913,869.	0.	87,684.
	OTHER											
24	EXHIBITS	VARIES	SL	.000	16	7222106.			7222106.	4347629.		482,946.
26	LEASEHOLD IMPROVEMENTS	VARIES	SL	.000	16	803,033.			803,033.	207,290.		30,526.
28	VEHICLES	VARIES	SL	.000	16	34,484.			34,484.	30,722.		3,225.
29	CONSTRUCTION IN PROGRESS	VARIES	SL	.000	16	260,438.			260,438.			0.
30	ART	VARIES	SL	.000	16	262,423.			262,423.			0.
	* 990 PAGE 10 TOTAL OTHER					8582484.		0.	8582484.	4585641.	0.	516,697.
	* GRAND TOTAL 990 PAGE 10 DEPR					10095235.		0.	10095235.	5606770.	0.	634,665.

128102
05-01-11

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property) 990

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2011

Attachment Sequence No. **179**

Name(s) shown on return	Business or activity to which this form relates	Identifying number
SAN JOSE CHILDREN'S DISCOVERY MUSEUM	FORM 990 PAGE 10	94-2870828

Part I **Election To Expense Certain Property Under Section 179** **Note:** *If you have any listed property, complete Part V before you complete Part I.*

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,000,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2010 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2012. Add lines 9 and 10, less line 12 ▶	13	

Note: *Do not use Part II or Part III below for listed property. Instead, use Part V.*

Part II **Special Depreciation Allowance and Other Depreciation (Do not** include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	634,665.

Part III **MACRS Depreciation (Do not** include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2011	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B - Assets Placed in Service During 2011 Tax Year Using the General Depreciation System

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property						
c	7-year property						
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property			25 yrs.		S/L	
h	Residential rental property	/		27.5 yrs.	MM	S/L	
		/		27.5 yrs.	MM	S/L	
i	Nonresidential real property	/		39 yrs.	MM	S/L	
		/			MM	S/L	

Section C - Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System

20a	Class life					S/L	
b	12-year			12 yrs.		S/L	
c	40-year	/		40 yrs.	MM	S/L	

Part IV **Summary** (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	634,665.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V **Listed Property** (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: *For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete* **only** *24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.*

Section A - Depreciation and Other Information (Caution: *See the instructions for limits for passenger automobiles.*)

24a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use						**25**		
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1						**28**		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							**29**	

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
30 Total business/investment miles driven during the year (**do not** include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: *If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.*

Part VI **Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2011 tax year:					
43 Amortization of costs that began before your 2011 tax year				**43**	
44 **Total.** Add amounts in column (f). See the instructions for where to report				**44**	