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DLN: 93493133042380

Form **990**

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)

OMB No 1545-0047

Department of the Treasury

Internal I	Revenue S							Inspection
A Fo	r the 20	008 cal	endar yea	r, or tax year beginning 07-01-200	8 and ending 06-30-200	9		
B Che	eck if app	plicable	Please	C Name of organization SAN JOSE STATE UNIVERSITY RESEARCH		D Employer ide	entification number	
☐ Add	Iress chai	nge	use IRS label or	Doing Business As			94-601763 E Telephone nu	
∏ Nar	ne chang	ge	print or type. See	Doing business As				
┌ Init	ıal return	ı	Specific	Number and street (or P O box if mai	l is not delivered to street addre	ss) Room/suite	(408) 924-	
Г Теп	mınatıon		Instruc- tions.	PO BOX 720130			G Gross receipt	IS \$ 68,249,488
┌ Am	ended re	eturn		City or town, state or country, and ZIF	P + 4		1	
┌ _{App}	olication p	pending		SAN JOSE, CA 951720130				
		ŀ	F Nam	ne and address of Principal Office	r	H(2) To th		<i>f</i>
			MARYS	SIDNEY	•		us a group return ates?	Yes V No
				720130 e,CA 95172				
T Tax	x-exemp	t status		(3) ◄ (insert no)		1	II affiliates include	
	<u> </u>			TION ORG	, 32.	1	No," attach a list up Exemption Nu	See instructions) mber 🟲
К Туре	e of orga	inization	Corporati	on		L Year of Fo	ormation 1932 M	State of legal domicile CA
Pai	rt I	Sumn	nary					
				e organization's mission or most s	ignificant activities			
Governance	T U	AND TH THE UNI UNIVER	E CALIFO IVERSITY SITY AND	TATE UNIVERSITY FOUNDATIOR RNIA STATE UNIVERSITY SYSTAND ASSIST IN FULFILLING ITO PROMOTE AND ASSIST THE OF THE ORGANIZATION DISCONTINUED ITO THE ORGANIZATION DESCONTINUE OF THE ORGANIZATION DESCONTINUE ORGANIZATI	TEM THE FOUNDATION' IS OBJECTIVES, TO SUP HE EDUCATIONAL SERVI	S MISSION PLEMENT P CES OF THE	IS TO ADVANC ROGRAMS AND UNIVERSITY	E THE WELFARE OF ACTIVITIES OF THE
ŝ			,	nembers of the governing body (Pa				17
			_	dent voting members of the gover			_	3
Activities &				nployees (Part V, line 2a)	_	1,662		
5				lunteers (estimate if necessary)		0		
¥				ed business revenue from Part V		0		
		-						
	b \		lated busi	ness taxable income from Form 99	90-T, line 34		7b	0
	b N		lated busi	ness taxable income from Form 9	90-T, line 34	Pri	_	0 Current Year
				ness taxable income from Form 9 th grants (Part VIII, line 1h)		Pri	7b	
	8	Contrib	outions and			Pri	7b or Year	Current Year
enuese	8 9	Contrib Prograr	utions and	grants (Part VIII, line 1h)		Pri	7b or Year 34,016,232	Current Year 35,009,164
Revenue	8 9 10	Contrib Prograr Investr	outions and m service i	grants (Part VIII, line 1h)		Pri	7b or Year 34,016,232 26,329,430	Current Year 35,009,164 29,925,991
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Deloitte Tax LLP

50 Fremont Street

May the IRS discuss this return with the preparer shown above? (See instructions) $\,$.

San Francisco, CA 94105

Preparer's

Use Only

Firm's name (or yours if self-employed), address, and ZIP + 4

┌Yes ┌No

Phone no 🕨 (415) 783-4000

EIN 🕨

Cat No 11282Y

Part III Statement of Program Service Accomplishments (See the instructions.)

1	Briefly describe the organization's mission				
See A	ddıtıonal Data Table				
2	Did the organization undertake any the prior Form 990 or 990-EZ?.		ervices during the year	which were not listed on	
	If "Yes," describe these new service				Tes No
3	Did the organization cease conducti		t changes in how it con	ducts any program	
3	services?		t changes in now it con	· · · · · · ·	┌ Yes ┌ No
	If "Yes," describe these changes on	Schedule O			
4	Describe the exempt purpose achie Section 501(c)(3) and (4) organizat others, the total expenses, and reve	ions and 4947(a)(1) t	trusts are required to r	eport the amount of grants a	
4a	(Code) (Expenses Sponsored Programs provides grant and co proposals resulting in 369 awards worth \$5 programs incorporate and invigorate both a experiencxes have direct consequences fo	ontract proposal developme 55,737,048 during the fisca the University and the surre	I year 2009 These external ounding community Benefic	lly sponsored awards for research	and other education related
4b	(Code) (Expenses CAMPUS AND COMMUNITY PROGRAMS INC UNIVERSITY'S EDUCATIONAL MISSION TH	CLUDE NUMEROUS NON-CF			
4c	(Code) (Expenses	\$	including grants of \$) (Revenue \$)
4d	Other program services (Describe	in Schedule O) including grants of	f\$) (Revenue \$)
<u></u>	Total program service expenses \$		 ∩ Mustequal Part IX		<u> </u>

Part IV Checklist of Required	S	Sc	che	du	les
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			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νo
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt[4]{3}$	10		No
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If</i> "Yes," complete Schedule F, Part III	16		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
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 questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section $501(c)(3)$ 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		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
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		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
		28a		Νο
b	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		N o
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νο
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		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	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		No
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable			
	1a 9			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1 b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
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			
h	If at least one is reported in 2a, did the organization file all required federal employment tax returns?			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this			
	return?	3a		Νο
Ь	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	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	4a		
_	account)?	40		No
Ь	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, <i>Report of Foreign Bank and Financial Accounts</i> .			
_				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		Νο
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	<i>-</i> 1		
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?	7a		No
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
·	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)			
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the	8		
	year?	0		
9	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			
11	Section 501(c)(12) organizations Enter			
	Gross income from members or shareholders			
а	Gross income from members or snareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
-	against amounts due or received from them)			
17-	Section 4047(a)(1) non-exempt charitable trusts. In the exemption filing Form 200 in line of Form 40442	17-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Gov	erning Body an	d Mana	gement	

			Yes	No				
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.							
1a	Enter the number of voting members of the governing body 1a 17							
Ь	Enter the number of voting members that are independent 1b 3							
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		Νο				
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		Νο				
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?							
5	Did the organization become aware during the year of a material diversion of the organization's assets?							
6	Does the organization have members or stockholders?							
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο				
Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	the governing body?	8a	Yes					
Ь	each committee with authority to act on behalf of the governing body?	8b	Yes					
9a	Does the organization have local chapters, branches, or affiliates?	9a		Νο				
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b						
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		Νο				
11	Is there any officer, director or 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	11		Νo				

Section B. Policies

		Yes	No
Does the organization have a written conflict of interest policy? If "No", go to line 13	12a	Yes	
Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
Does the organization have a written whistleblower policy?	13		Νo
Does the organization have a written document retention and destruction policy?	14	Yes	
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			
The organization's CEO, Executive Director, or top management official?	15a	Yes	
Other officers or key employees of the organization?	15b	Yes	
Describe the process in Schedule O			
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		Νο
If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Does the organization have a written conflict of interest policy? If "No", go to line 13 . Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed CA
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website.

 upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

PAUL E HARRIS 210 NORTH 4TH STREET SAN JOSE, CA 95112 (408) 924-1405

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

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

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

The check this box in the organization and i	(B) Average hours per week	Posit	(C) chec	:k al				(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F)
(A) Name and Title		Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)		Estimated amount of other compensation from the organization and related organizations
							_			

Part VII Continued

			tion that a			all			(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
			-							
			1							
			-				\vdash			
			+							
										·
1b Total							>	1,113,685	1,599,039	463,961

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►6

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		Νο
4	For any individual listed online 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			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		Νο

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Prescience International 425 1st Street Unit 2207 VENTURA, CA 94105	BUSINESS OPERATION MANAGEMENT	1,174,766
James L Poage 17 Westwood Road Lexington, MA 02420	aerosoace consultant	208,989
Bay Ship and Yacht Company 2900 Main Street Alameda, CA 94501	ship repair	181,932
Alion Science and Technology 10 West 35th Street Chicago, IL 60616	marine engineering and simulations	174,488
Deloitte and Touche LLP PO Box 403568 Atlanta, GA 30384	tax and accounting services	160,166
2 Total number of independent contractors (including those in 1) who received more than \$ from the organization	· · · · · · · · · · · · · · · · · · ·	12

Page **9**

Part VIII

Statement of Revenue

				(A) Total Revenue	(B) Related or	(C) Unrelated	(D) Revenue
				Total Revenue	Exempt	Business	Excluded from
					Function	Revenue	Tax under IRC
	1a	Federated campaigns 1	-		Revenue		512, 513, or 514
Contributions, gifts, grants and other similar amounts			<u> </u>				
	ь	Membership dues 1	;				
⊉೯	С	Fundraising events					
u Has	لد	Delated organizations 1					
ਣੰ≣	d	Related organizations 16 Government grants (contributions)					
쏯냚	е			ļ			! !
美声	f	All other contributions, gifts, grants, and similar amounts not included above	32,667				
운항		1					
돌	g	Noncash contributions included i	٦				
O a	h	Total (Add lines 1a-1f)	·	35,009,164			
			Business Code				
<u> 9</u>	2a	LOCAL AND OTHER CONTRA	611,600	10 701 720	10 701 720		
Ē.			-	10,791,738	10,791,738		
Program Service Revenue	Ь	CAMPUS PROGRAMs	611,600	8,336,106	8,336,106		
	С	INDIRECT COST RECOVERY	611,600	7,469,205	7,469,205		
e Z	d	ADMIN & OTHER PROGRAM	611,600	712,695	712,695		
رن ح	е						
<u> </u>	f	All other program service revenue	e	2,616,247	2,616,247		7
ž		Total Add lines 25 25	_[
4	g	Total. Add lines 2a-2f					
	3	Investment income (including div	ıdends, ınterest				
		other sımılar amounts)	[696,837			696,837
	4	Income from investment of tax-exempt	bond proceeds				
	-		▶				
	5	Royalties	_				
		(ı) Real	(II) Personal				
	6a	Gross Rents Less rental					
	Ь	expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)					
		(ı) Securities	(II) O ther				
	7a	Gross amount 2,617,496					
		from sales of assets other					
		than inventory					
	b	Less cost or 2,625,582 other basis and					
		sales expenses Gain or (loss) -8,086					
	c d	Net gain or (loss)		-8,086			-8,086
	"		. ▶	2,223			,,,,,
	8a	Gross income from fundraising					
4.		events (not including					
Other Revenue		\$ of contributions reported on line					
क >		1c) See Part IV, line 18					
<u>æ</u>		Attach Schedule G if total exceeds \$15,000					
<u>u</u>	ь	Less direct expenses					
둦	c	Net income or (loss) from fundrais					
•			<u> </u>				
	9a	Gross income from gaming activities See part IV, line 19					
		Complete Schedule G ıf total					
		exceeds \$15,000					
	ь	Less direct expenses					
	c	Net income or (loss) from gaming					
	_	· · ·	▶				
	10a	Gross sales of inventory, less					
		returns and allowances .					
	ь	Less cost of goods sold I					
	c	Net income or (loss) from sales o					
		Miscellaneous Revenue	Business Code				
	11a	· · ·					
	ь		-				
	c	-	-				
			-				
	d	All other revenue					ļ
	e	Total. Add lines 11a-11d		CE (22 22-	20.025.001	<u>-</u>	500 75
	12	Total Revenue. Add lines 1h, 2g, 8c,	3, 4, 5, 6d, 7d,	65,623,906	29,925,991	0	688,751
		9c, 10c, and 11e	▶				

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).										
Do ı	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21									
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	3,123,078	3,123,078							
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors, trustees, and key employees	163,632	710	162,922						
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									
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	29,722,832	26,159,114	3,563,718						
9	Other employee benefits	919,560	675,329	244,231						
10	Payroll taxes	5,651,992	4,626,570	1,025,422						
11	Fees for services (non-employees)									
а	Management	1,923,382	1,692,691	230,691						
b	Legal	85,639	18,314	67,325						
c	Accounting	216,339		216,339						
d	Lobbying	134,661		134,661						
e	Professional fundraising See Part IV, line 17									
f	Investment management fees									
g	Other	12,058,629	11,880,519	178,110						
12	Advertising and promotion									
13	Office expenses	4,838,759	4,667,797	170,962						
14	Information technology									
15	Royalties									
16	Occupancy	2,231,832	1,280,526	951,306						
17	Travel	2,261,851	2,198,091	63,760						
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	868,847	808,262	60,585						
19	Conferences, conventions and meetings									
20	Interest	9,754	9,667	87						
21	Payments to affiliates	27,764	27,764							
22	Depreciation, depletion, and amortization	327,247	160,021	167,226						
23	Insurance									
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)									
а	equipment rental and ma	1,066,131	984,919	81,212						
Ь	postretirement medical	904,508	904,508							
c	miscellaneous	133,766	104,180	29,586						
f	All other expenses									
25	Total functional expenses. Add lines 1 through 24f	66,670,203	59,322,060	7,348,143	0					
26	Joint Costs. Check if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				rm 000 (2009)					

Dart V	Balance	Shoot
Part X	Balance	Sheet

					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			2,004,000		45,425
	2	Savings and temporary cash investments			3,508,456	2	1,900,189
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			10,939,357	4	10,998,996
	5	Receivables from current and former officers, directors, trustees other related parties Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under sepersons described in section 4958(c)(3)(B) Complete Part II of	ection	4958(f)(1)) and		6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
20	9	Prepaid expenses and deferred charges			174,778	9	104,435
ssets	10a	Land, buildings, and equipment cost basis	10a	12,807,258			
⋖	ь	Less accumulated depreciation Complete Part VI of	104	12,007,230	1		
	, b	Schedule D	10ь	3,733,326	9,343,444	10c	9,073,932
	11	Investments—publicly traded securities			14,661,701	11	12,946,924
	12	Investments—other securities See Part IV, line 11 Complete Pa Schedule D	art VII	of	1,531,148	12	
	13	Investments—program-related See Part IV, line 11 $\it Complete Part Second Part$	art VII	I		13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D	778,939	15	653,243		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			42,941,823	16	35,723,144
	17	Accounts payable and accrued expenses .	6,681,851	17	6,991,302		
	18	Grants payable				18	
	19	Deferred revenue			11,040,514	19	6,907,660
	20	Tax-exempt bond liabilities				20	
<u>ē</u>	21	Escrow account liability Complete Part IV of Schedule D				21	
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
ä		persons Complete Part II of Schedule L		•		22	
	23	Secured mortgages and notes payable to unrelated third parties			1,000,667	23	500,333
	24	Unsecured notes and loans payable				24	
	25	Other liabilities Complete Part X of Schedule D		16,239,568	25	16,583,199	
	26	Total liabilities. Add lines 17 through 25			34,962,600	26	30,982,494
ses		Organizations that follow SFAS 117, check here ▶ ↓ and comp through 29, and lines 33 and 34.	lete li	nes 27			
Balance	27	Unrestricted net assets			6,233,283	27	3,143,436
ස ස	28	Temporarily restricted net assets			1,685,759	28	1,597,214
듣	29	Permanently restricted net assets	60,181	29	0		
or Fund		Organizations that do not follow SFAS 117, check here ► an lines 30 through 34.					
	30	Capital stock or trust principal, or current funds		30			
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .		31			
	32	Retained earnings, endowment, accumulated income, or other fu		32			
Net	33	Total net assets or fund balances			7,979,223	33	4,740,650
_	34	Total liabilities and net assets/fund balances		42,941,823	34	35,723,144	
Pa	rt XI	Financial Statements and Reporting					

Dart VI	Financial Statements and Reporting
P. 1 4 D. 1	Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 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?	2c	Yes	
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	Yes	
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

		he organization	I	Employer identif	fication n	ımber							
AN J	USE 517	ATE UNIVERSITY RESEARCH FOUNDATION		94-6017638									
Рa	rt I	Reason for Public Charity Status (to be completed by all organize			۲)								
		zation is not a private foundation because it is (Please check only one organiza		ee manacion	<u> </u>								
1	Ī	A church, convention of churches, or association of churches described in Sect	-	1)(A)(i).									
2	Ė	A school described in Section 170(b)(1)(A)(ii). (Attach Schedule E)		-7(7(-7-									
3	Ė	A hospital or a cooperative hospital service organization described in Section :	170(b)(1)(A)(iii). (Attach S	chedule H)							
4	Ē	A medical research organization operated in conjunction with a hospital descri				•							
	•	hospital's name, city, and state		()()()	` ,								
5	Г	An organization operated for the benefit of a college or university owned or ope	rated by a go	overnmental uni	t describe	d ın							
	•	Section 170(b)(1)(A)(iv). (Complete Part II)	, 3										
6	Г		170(b)(1)(A)(v).									
7	, 3 3 5												
		described in Section 170(b)(1)(A)(vi) (Complete Part II)	-		-	•							
8	Г	A community trust described in Section 170(b)(1)(A)(vi) (Complete Part II)											
9	Г	An organization that normally receives (1) more than 331/3% of its support from	om contribut	ions, membersh	ııp fees, ar	nd gros	SS						
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% 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). (Con	nplete Part I	II)									
10	\sqcap	An organization organized and operated exclusively to test for public safety. Se	ee Section 50	09(a)(4). (See i	nstruction	s)							
11	굣	An organization organized and operated exclusively for the benefit of, to perfori	n the functio	ns of, or to carr	y out the p	ourpos	es 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 1 a			– Type III	0+4							
_	굣	By checking this box, I certify that the organization is not controlled directly of	_	•	′ '								
е	Į.	other than foundation managers and other than one or more publicly supported	•	•	•	•							
		section 509(a)(2)	J			. , .	,						
f		If the organization received a written determination from the IRS that it is a Ty	pe I, Type II	or Type III su	pporting o	rganız	ation,						
		check this box Since August 17, 2006, has the organization accepted any gift or contribution	from any of	·ho			ı						
g		following persons?	nom any or	ille									
		(i) a person who directly or indirectly controls, either alone or together with pe	rsons descri	bed ın (ıı)		Yes	No						
		and (III) below, the governing body of the the supported organization?			11g(i)		Νo						
		(ii) a family member of a person described in (i) above?			11g(ii)		Νo						
		(iii) a 35% controlled entity of a person described in (i) or (ii) above?			11g(iii)		Νo						
h		Provide the following information about the organizations the organization supp	orts										

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (See Instructions))	organız col (i) your go	organization in col (i) listed in in col (i) of your col		the organization in col (i) of your		s the ation in organized US?	(vii) A mount of support?
			Yes	No	Yes	No	Yes	No	
SAN JOSE STATE UNIVERSITY	770414438	2	Yes		Yes		Yes		0
Total									

Part II	Support Schedule for Organizations Described in IRC 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.)

Pι	ıblic Support		, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on							
_	its behalf The value of services or facilities					 		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	· (f)							
6	Public Support subtract line 5 from line							
	4							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts from line 4							
8	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties and income from similar							
_	sources							
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							
10	from the sale of capital assets (Explain in							
	Part IV)							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instructio	ns)		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and stop here		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	▶ □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15	Public Support Percentage for 2007 School	dule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.		this box	
	and stop here. The organization qualifies a				,			▶ □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				▶ □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							► □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	Private Foundation. If the organization did	not check the b	oux on line 13, 1	oa, 160, 1/a or	1/D, check this	oox an	u see	▶ □
	ınstructions							F-1

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	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 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
c	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts 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 30 June, 1975		+				
С	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	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶ □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumm (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (ne 13 column /f	<u> </u>	17	
				-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. 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 **33 1/3% Tests - 2007.** 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

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

Schedule A (Form 990 or 990-EZ) 2008

▶□

Part IV	Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)
	Facts and Circumstances Test

Schedule A (Form 990 or 990-EZ) 2008

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities)

- ◆ Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990EZ, Part VI, line 47 (Lobbying Activities)

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

	ne of the organization JOSE STATE UNIVERSITY RESEARCH	FOUNDATION		Employer ider	ntification numb	er
				94-6017638		
Part		by all organizations exem ee the instructions for Schedul		n 501(c) and section	527	
1	Provide a description of the o	rganization's direct and indirect po	litical campaign act	civities in Part IV		
2	Political expenditures				\$	
3	Volunteer hours					
Part	To be completed for Schedule C for o	by all organizations exempletails.)	ot under sectio	n 501(c)(3). (See the	instructions	
1	Enter the amount of any excis	se tax incurred by the organization	under section 4955	;	\$	
2	Enter the amount of any excis	se tax incurred by organization mar	nagers under sectio	n 4955	\$	
3	If the organization incurred in a section 4955 tax, did it file Form 4720 for this year?				☐ Yes	☐ No
4a	Was a correction made?				☐ Yes	☐ No
b	If "Yes," describe in Part IV					
Part		by all organizations exem s for Schedule C for details.)	ot under section	n 501(c), except sect	tion 501(c)(3).
1	Enter the amount directly exp	ended by the filing organization for	section 527 exemp	ot function activities	\$	
2	Enter the amount of the filing 527 exempt funtion activities	organization's internal funds contr	buted to other orga	nizations for section	\$	
3	Total of direct and indirect ex 1120-POL, line 17b	empt function expenditures Add li	nes 1 and 2 and ent	er here and on Form	\$	
4	Did the filing organization file	Form 1120-POL for this year?			☐ Yes	┌ No
5	were made Enter the amount political contributions receive	and Employer Identification Numbe paid and indicate if the amount wa ed and promptly and directly delive action committee (PAC) If addition	s paid from the filing red to a separate po	g organization's own interna olitical organization, such a	l funds or were s a separate	ments
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's internal funds If none, enter -0-	(e) A mount of contributions and promp directly delived separate proganization enter -	received tly and ered to a olitical If none,

50	nedule C (Form 550 of 550 EZ) 2000						raye Z
Р	art II-A To be completed by (election under sec						768
	Check / If the filing organization			ctions for Sche	dule C for deta	1115. /	
B	Check If the filing organization	checked box A an	d "limited contro	l" provisions app	ly		T
	Limits on Lo (The term "expenditure	bbying Expendes" means amounts		.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influe	nce public opinion	(grass roots lob	bying)			
b	Total lobbying expenditures to influe	ence a legislative b	ody (direct lobby	ring)			
c	Total lobbying expenditures (add line	es 1a and 1b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures	(add lines 1c and	1 d)				
f	columns—		ne following table	ın both			
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nor 20% of the amount		is:			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15%	of the excess over \$	500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10%	of the excess over \$	1,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% o	f the excess over \$1	,500,000			
	Over \$17,000,000	\$1,000,000					
	Grassroots nontaxable amount (ente	er 25% of line 1f)					
h	Subtract line 1g from line 1a Enter	-0- ıf lıne g ıs more	than line a				
i	Subtract line 1f from line 1c Enter -	0- ıflıne fıs more	than line c				
j	If there is an amount other than zero section 4911 tax for this year?	on either line 1h o	or line 11, did the	organization file	Form 4720 repo	ting	┌ Yes ┌ No
	(Some organizations tha columns below. 9		on 501(h) el	ection do not	have to com		ne five
	Lobb	ying Expendit	ures During	4-Year Avera	ging Period		
	Calendar year (or fisca	l year	(3) 2005	(b) 2006	(c) 2007	(4) 2008	(a) Total

	Lobbying Expendit	ures During 4	1-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line d, column (e))					
f	Grassroots lobbying expenditures					

Part II-B	To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form
	5768 (election under section 501(h)). (See the instructions for Schedule C for details.)

		(a) (b		(b)
		Yes	No	A mount
L	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?		Νo	
b	Paid staff or management (include compensation in expenses reported on lines c through i)?		Νo	
c	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
e	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		Νo	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		134,661
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		Νo	
i	Other activities If "Yes," describe in Part IV		Νo	
j	Total lines 1c through			134,661
	1)			
2a	Did the activities in line $f 1$ cause the organization to be not described in section $f 501(c)(3)$?		Νo	
b	If "Yes" enter the amount of any tax incurred under section 4912			
c	If "Yes" enter the amount of any tax incurred by organization managers under section 4912		[
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		[
\	ATTLA To be completed by all aggregations are much under costion 501/c)///		E04/-	\(\(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). (See the instructions for Schedule C for details.)

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." (See the instructions for Schedule C for details.)

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
а	Current Year	2a \$
b	Carryover from last year	2b \$
c	Total	2c \$
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3 \$
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	
	expenditure next year?	4 \$

Part IV Supplemental Information

Dues, assessments and similar amounts from members

Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1, Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
Part II-B, Line 11	Explanation of Other Lobbying Activities	DURING FISCAL YEAR 2008, ONE TRIP TO WASHINGTON, D C WAS MADE FOR THE PRIMARY PURPOSE OF MEETING WITH AND INFORMING THE LEGISLATORS OF THE INSTITUTIONAL PRIORITIES AND SPECIFIC PROJECTS OF THE SAN JOSE STATE UNIVERSITY RESEARCH FOUNDATION AND SAN JOSE STATE UNIVERSITY, FOR WHICH WE WERE SEEKING FUNDING THROUGH THE LEGISLATIVE PROCESS A FOUNDATION BOARD MEMEBER AND REPRESENTATIVES OF OUR LOBBYING FIRM MET WITH A TOTAL OF 3 OF OUR UNITED STATES LEGISLATORS AND THEIR STAFF THESE MEETINGS WERE INTRODUCTORY IN NATURE AND DID NOT IDENTIFY SPECIFIC BILLS OR LEGISLATION

1 \$

5 \$

Part IV Supplemental I	nformation	
Ident if ier	Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2008

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Supplemental Financial Statements

Employer identification number Name of the organization SAN JOSE STATE UNIVERSITY RESEARCH FOUNDATION 94-6017638

Pa	organizations Maintaining Donor Actions organization answered "Yes" to Form 99		unds or Accounts. Complete if the
	organization answered Tes to Form 55	(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 advi	sors in writing that the assets held in don	oradvised
	funds are the organization's property, subject to the		☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben impermissible private benefit?	efit of the donor or donor advisor or other	☐ Yes ☐ No
Pa	t II Conservation Easements. Complete		o Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space	on or pleasure)	historically importantly land area
2	Complete lines 2a-2d if the organization held a quali on the last day of the tax year	ified conservation contribution in the form	of a conservation easement
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easement	s	2b
с	Number of conservation easements on a certified hi	storic structure included in (a)	2c
d	Number of conservation easements included in (c) a	acquired after 8/17/06	2d
3	Number of conservation easements modified, transfe	erred, released, extinguished, or terminate	d by the organization during
	the taxable year 🕨		
4	Number of states where property subject to conserva	ation easement is located b	
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	g the periodic monitoring, inspection, viola	ations, and Yes No
6	Staff or volunteer hours devoted to monitoring, inspe	cting and enforcing easements during the	year ►
7	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing easements during the ye	ear ► \$
8	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	(d) above satisfy the requirements of sec	tion Yes No
9	In Part XIV, describe how the organization reports contained balance sheet, and include, if applicable, the text of the organization's accounting for conservation easen	the footnote to the organization's financial nents	statements that describes
Par	Complete if the organization answered '		or Other Similar Assets.
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	ch in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research ii	
	(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, histofollowing amounts required to be reported under SFA		or financial gain, provide the
а	Revenues included in Form 990, Part VIII, line 1		► \$
b	Assets included in Form 990, Part X		► \$

Part	IIII Organizations Maintaining Co	llections of Art, His	tori	cal Treasu	res, or Othe	r Similar Ass	ets (co	ntınued)
3	Using the organization's accession and other items (check all that apply)	r records, check any of th	ne fol	lowing that ar	e a sıgnıfıcant u	se of its collectio	n	
а	Public exhibition	d	Γ	Loan or exc	hange programs			
b	Scholarly research	e	Γ	Other				
c	Preservation for future generations							
4	Provide a description of the organization's co Part XIV	ollections and explain how	w the	y further the o	organization's ex	empt purpose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t					ular	Yes	Г No
Par		Arrangements. Com	plet	e if the orga		ered "Yes" to F	orm 9	90,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ıntermedıary	for c	ontributions (or other assets		Yes	☐ No
b	If "Yes," explain why in Part XIV and comple	te the following table						
						A mo	unt	
С	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 Fo	orm 990, Part X, line 21?				Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	1						
Par	t V Endowment Funds. Complete							
		(a)Current Year (b)	Prior `	Year (c) Tw	o Years Back (d)	Three Years Back (e)Four Ye	ears Back
1a	Beginning of year balance							
b	Contributions							
c	Investment earnings or losses							
d	Grants or scholarships							
e	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the year	r end balance held as						
а	Board designated or quasi-endowment 🕨							
b	Permanent endowment 🕨							
c	Term endowment ►							
3a	Are there endowment funds not in the posses organization by	ssion of the organization	thata	are held and a	dmınıstered for	the 	Yes	No
	(i) unrelated organizations		•			3a(i)	1	
_	(ii) related organizations					3a(ii)	1	
	If "Yes" to 3a(II), are the related organization					3b		
4	Describe in Part XIV the intended uses of the							
Раг	VI Investments—Land, Buildings	s, and Equipment. S						
	Description of investment) Cost or other is (investment)	(b)Cost or other basis (other)	(c) Depreciation	(d) Bo	ok value
1a L	and				5,176,528			5,176,528
b B	Guildings							
c L	easehold improvements				5,169,179	1,271,775		3,897,404
d E	quipment				2,461,551	2,461,551		0
e (ther							
Total	. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, column (B)	, line	10(c).)				9,073,932
						Schedule D (Form 9	90) 2008

Part VIII Investments—Other Securities. See	Form 990, Part X, line 1	2.	
(a) Description of security or cateory (including name of security)	(b) Book value		d of valuation - year market value
Financial derivatives and other financial products		Cost of end-of	- year market value
Closely-held equity interests			
Other			
 			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. Se			d of valuation
(a) Description of investment type	(b) Book value		a or valuation -year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) ▶			
Part IX Other Assets. See Form 990, Part X, I			
(a) Descri	ption		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line	15)	<u> </u>	
Part X Other Liabilities. See Form 990, Part 3		<u> </u>	
(a) Description of Liability	(b) A mount		
Federal Income Taxes			
POST RETIREMENT BENEFITS OBLIGATION	13,131,395		
PAYABLE TO EXTERNAL AGENCIES	1,830,901		
OPERATING LEASE-SCHEDULED RENT INCREASES	1,126,554		
SECURITY DEPOSITS	400,000		
UNEARNED RENT	94,349		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	16,583,199		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	65,623,906
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	66,670,203
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-1,046,297
4	Net unrealized gains (losses) on investments	4	-2,124,571
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-67,705
9	Total adjustments (net) Add lines 4 - 8	9	-2,192,276
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-3,238,573
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		
1	Total revenue, gains, and other support per audited financial statements	1	63,499,335
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	-2,124,571
3	Subtract line 2e from line 1	3	65,623,906
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	(
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	65,623,906
	Reconciliation of Expenses per Audited Financial Statements With Expenses		
1	Total expenses and losses per audited financial statements	1	66,642,439
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
Ь	Prior year adjustments		
C 	Losses reported on Form 990, Part IX, line 25		
a] ,	
е 3	Add lines 2a through 2d	2e 3	66,642,439
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		00,042,435
	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
a b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	27,764
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	66,670,203
			00,070,202

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

Ident if ier	Return Reference	Explanation
Part XI, Line 8 - Other Adjustments		TRANSFER OF NET ASSETS TO TOWER FOUNDATION
Part XIII, Line 4b - Other Adjustments		TRANSFER TO SAN JOSE STATE UNIVERSITY AND TOWER FOUNDATION 27764

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493133042380

OMB No 1545-0047

Employer identification number

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

Open to Public Inspect ion

SAN JUSE STATE UNIVERSIT	IT RESEARCH FU		94-6017638				
Part I General Infor	mation on Grai	nts and Assistance	e			'	
 Does the organization mathematics the selection criteria use Describe in Part IV the organization 	d to award the gran	nts or assistance?					┌ Yes ┌ ┌
Form 990, Part Part IV and Sch	IV, line 21 for ar edule I-1 if addi	ny recipient that rece tional space is	eived more than \$5,0	00. Check this box	tes. Complete if the confirmation one recipient rec	eived more than \$5,	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
2 Enter total number of seconganizations3 Enter total number of oth					•		
For Panerwork Peduction Act Not							hadula I (Form 990) 2008

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990,	Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Scholarships, Grants and Stipends	1038	3,123,078			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 A formal review of the recipient and requirements is conducted to determine eligibility
1		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493133042380

Employer identification number

OMB No 1545-0047

Schedule J

(Form 990)

Department of the Treasury

Name of the organization

ın Part III

Internal Revenue Service

Compensation Information

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

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

2008 No 1545-0047

Open to Public Inspection

SAN	JOSE STATE UNIVERSITY RESEARCH FOUNDATION				
		94-6017638			
Pa	rt I Questions Regarding Compensation	n			т
				Yes	No
1a		vided any of the following to or for a person listed in Form I 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 idemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a wi provision of all the expenses described above? If "N		1b		
2	Did the organization require substantiation prior to rofficers, directors, trustees, and the CEO/Executive	· · · · · · · · · · · · · · · · · · ·	2		
3	Indicate which, if any, of the following the organizationganization's CEO/Executive Director Check all the Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations				
	•				
4	During the year, did any person listed in Form 990,	Part VII, Section A, line 1a			
а	Receive a severance payment or change of control p	payment?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide the applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must co	omplete lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a, did the organization pay or accrue any			
а	The organization?		5a		Νo
ь	Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of				
а	The organization?		6a		No
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," o		7		No
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in	paid or accured pursuant to a contract that was n Regs section 53 4958-4(a)(3)? If "Yes," describe			

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-	MISC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Rose Lee	(I) (II)	227,544		200		49,618	277,362	139,22
Susan Meyers	(I) (II)	158,928		184		35,040	194,152	98,01
Michael Parish	(I) (II)	156,228		200		37,868	194,296	96,35
Carmen Sigler	(I) (II)	229,571		209		49,562	279,342	138,11
Pam Stacks	(I) (II)	148,740		200		31,060	180,000	89,48
Jon Whitmore	(I) (II)	299,615		11,459		64,350	375,424	
Mary Sidney	(I) (II)	162,922				32,703	195,625	97,089
Richard Tomey	(I) (II)	271,570				984	272,554	130,96
Rod Diridon	(I) (II)	195,009	_			20,210	215,219	112,28
Vernol Battiste	(I) (II)	166,345				17,886	184,231	97,978
Charles Erickson	(ı) (ıı)	162,150				13,117	175,267	
Thomas Pdrevot	(I) (II)	154,979				18,294	173,273	
	(i)							
	(ii)							
	(i)							
	(ii)						1	

Part III Supplemental Information

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

Ident if ier	Return Reference	Explanat ion
-		
	•	

(F) Compensation

Software ID: Software Version:

EIN: 94-6017638

Name: SAN JOSE STATE UNIVERSITY RESEARCH FOUNDATION

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name

(B) Breakdown of W-2 and/or 1099-MISC compensation

(C) Deferred

(D) Nontaxable

(E) Reserved

(D) Nontaxable

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred	(D) Nontaxable	(E) Total of columns 	(F) Compensation
		(i) Base Compensation (ii) Bonus & (iii) Other compensation (iii) Other compensation		benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ		
Rose Lee	(ı) (ıı)	227,544		200		49,618	277,362	139,227
Susan Meyers	(ı) (ıı)	158,928		184		35,040	194,152	98,018
Michael Parish	(ı) (ıı)	156,228		200		37,868	194,296	96,354
Carmen Sigler	(ı) (ıı)	229,571		209		49,562	279,342	138,116
Pam Stacks	(ı) (ıı)	148,740		200		31,060	180,000	89,482
Jon Whitmore	(ı) (ıı)	299,615		11,459		64,350	375,424	
Mary Sidney	(ı) (ıı)	162,922				32,703	195,625	97,089
Richard Tomey	(ı) (ıı)	271,570				984	272,554	130,963
Rod Diridon	(ı) (ıı)	195,009				20,210	215,219	112,281
Vernol Battiste	(ı) (ıı)	166,345				17,886	184,231	97,978
Charles Erickson	(ı) (ıı)	162,150				13,117	175,267	
	(ı) (ıı)	154,979				18,294	173,273	

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008

Open to Public Inspection

Name of the organization SAN JOSE STATE UNIVERSITY RESEARCH FOUNDATION **Employer identification number**

94-6017638

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		The Form 990 is prepared by an independent public accounting firm based on audited financial statements and with the assistance of the organization's finance and accounting staff. The final draft of the 990 is reviewed by the Director of Finance and Accounting prior to filing.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		In September of each year the Conflict of Interest Policy is distributed to the Board Members and key members of the staff. They are completed by each person then reviewed by the COO for compliance

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		The Chief Operating Officer's total compensation is reviewed on an annual basis by the San Jose State University Research Foundation Board of Director's Executive Committee, in accordance with the San Jose State University Managers (MPP) and Confidential Employee's performance and salary review process. The Research Foundation's Human Resources Department process for determining compensation for Central Office employees consists of a total rewards analysis which includes, but not limited to, job matching, organizational leveling, internal and external competitive salary and total compensation assessments, as well as reward and recognition programs. Total position and compensation analyses for Central Office employees are generally conducted on an annual basis. The SJSU Research Foundation Human Resources department obtains its position and salary benchmark data from AON /Radford US Benchmark salary survey, the California State Chancellor's Office, and the California Auxiliary Organization Association (AOA)

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		Financial statements by-laws, conflict of interest policy amd similar documents are available to the public upon request. We frequently supply those documents with our grant applications and by individual requests.

ldentifier	Return Reference	Explanation			
Form 990 Part IX, line 2c		Need Explanation			

DLN: 93493133042380

SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships

2008

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service ► Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.

► See separate instructions.

SAN JOSE STATE UNIVERSITY RESEARCH FOUNDATION				94-6017638	
Part I Identification of Disregarded Entities					
(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizat	ions				
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code sectio	n Public charity sta (if section 501(c)	(F) atus Direct controlling (3)) entity
San Jose State University					
One Washington Square San Jose, CA95192 77-0414038	Educational Institution	CA	501(c)(3)	2	N/A

(A) Name, address, and EIN of related organization		(B) nary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	incom	(E) lominant le(related, lestment, related)	Share	(F) e of total income	(G) Share of end-of- year assets	(H) Disproprtionat allocations?		(I) Code V—UBI amount on Box 20 of K-1	Gene mana part	agıng
										Yes	No		Yes	No
Part IV Identification of R	Related	l Organizations	Taxable as	a Corporation	ı or Tr	ust								
(A) Name, address, and EIN of related organ		(B) Primary activity		(C) Legal domicile (state or foreign country)		(D) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	(G) hare of l-of-yea assets	(H) Percentage r ownership		

(5)

(6)

Part V	Transactions with	Related	Organizations

	Note. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No			
1 D	During the tax year, did the orgranization engage in any of the following transactions with one or more rela	ted organizations listed in Parts II-IV	?						
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a		No			
ь	Gift, grant, or capital contribution to other organization(s)			1b		No			
c	Gift, grant, or capital contribution from other organization(s)			1c		No			
d	Loans or loan guarantees to or for other organization(s)			1d		No			
e	Loans or loan guarantees by other organization(s)			1e		No			
f	Sale of assets to other organization(s)			1f		No			
g	g Purchase of assets from other organization(s)								
h	n Exchange of assets			1h		No			
i	Lease of facilities, equipment, or other assets to other organization(s)			1i	Yes				
j	Lease of facilities, equipment, or other assets from other organization(s)			1j		No			
k	Performance of services or membership or fundraising solicitations for other organization(s)			1k		No			
ı	Performance of services or membership or fundraising solicitations by other organization(s)			11		No			
m	n Sharing of facilities, equipment, mailing lists, or other assets			1m		No			
n	n Sharing of paid employees			1n		No			
0	Reimbursement paid to other organization for expenses			10		No			
р	Reimbursement paid by other organization for expenses			1р		No			
q	Other transfer of cash or property to other organization(s)			1q		No			
r	Other transfer of cash or property from other organization(s)			1r		No			
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete th	nis line, including covered relationships	and transaction thresholds						
	(A)	(B)	(C)						
	Name of other organization(s)	Transaction type(a-r)	Amount Involved						
(1)) San Jose State University	I			733,71	5			
(2))								
(3)									
(4)									

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

									_	
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproprtionate allocations?		(G) Code V—UBI amount on Box 20 of K-1	(H) General o managing partner?)
			Yes	No		Yes	No		Yes	No
			•	•		•		Cabadul	D / Form	

Additional Data

Software ID: Software Version:

EIN: 94-6017638

Name: SAN JOSE STATE UNIVERSITY RESEARCH FOUNDATION

Form 990, Part VII - Section Aaa

		(C) Position (check all that apply)							(E)	(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Prector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
Terry Austin , Board Member	1 00	Х						0	0	0	
Jim Eller , board Member	1 00	X						0	0	0	
Jim Harvey , Researcher	1 00	Χ						710	103,908	29,289	
Francis Howard , board Member	1 00	Х						0	50,273	18,382	
Rose Lee , board Member	1 00	Χ		Х				0	227,744	49,618	
Susan Meyers , board Member	1 00	Χ						0	159,112	35,040	
Roy Okuda , board Member	1 00	X						0	93,756	21,813	
Rich O kumoto , board Member	1 00	Х						0	7,472	0	
Michael Parish , board Member	1 00	Х						0	156,428	37,868	
Bill Rhodes , board Member	1 00	Х						0	0	0	
Carmen Sigler , board Member	1 00	Χ						0	229,780	49,562	
Pam Stacks , board Member	1 00	Х						0	148,940	31,060	
Sally Veregge , board Member	1 00	Х						0	110,552	23,785	
Jon Whitmore , board Member	1 00	Х		Х				0	311,074	64,350	
Mary Sidney , Chief Operating Officer	40 00				Х			162,922	0	32,703	
Richard Tomey , Project Director	40 00					Х		271,570	0	984	
Rod Diridon , Project Director	40 00					Х		195,009	0	20,210	
Vernol Battiste , Project Director	40 00					Х		166,345	0	17,886	
Charles Erickson , Deputy COO	40 00					Х		162,150	0	13,117	
Thomas Pdrevot , Director	40 00					Х		154,979	0	18,294	

Form 990, Part III, Line 1 - Briefly describe the organization's mission:

The San Jose State University Research Organization is an Auxiliary Organization of the San Jose State University and the California State University System. The Foundation's mission is to advance the welfare of the University and assist in fulfilling its objectives, supplement programs and activities of the University, and to promote and assist the educational services of the University.