

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2013

Department of the Treasury
Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning JUL 1, 2013 and ending JUN 30, 2014

B Check if applicable: C Name of organization THE TECH MUSEUM OF INNOVATION
D Employer identification number 94-2864660
E Telephone number (408) 795-6116
G Gross receipts \$ 19,318,583.
H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
I Tax-exempt status: X 501(c)(3)
J Website: WWW.THETECH.ORG
K Form of organization: X Corporation
L Year of formation: 1983
M State of legal domicile: CA

Part I Summary

Table with 2 columns: Description and Amount. Rows include: 1 Briefly describe the organization's mission or most significant activities: TO INSPIRE THE INNOVATOR IN EVERYONE. 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 40. 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 39. 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 151. 6 Total number of volunteers (estimate if necessary) 6 303. 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 183,412. 7b Net unrelated business taxable income from Form 990-T, line 34 7b -147,356.

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 8 Contributions and grants (Part VIII, line 1h) 11,124,299. 8,569,632. 9 Program service revenue (Part VIII, line 2g) 3,769,831. 6,840,951. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 220,720. 264,190. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -283,302. 83,423. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 14,831,548. 15,758,196. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 500,000. 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) 5,818,076. 7,010,695. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) 1,253,689. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 8,451,064. 8,857,718. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 14,269,140. 16,368,413. 19 Revenue less expenses. Subtract line 18 from line 12 562,408. -610,217.

Table with 3 columns: Description, Beginning of Current Year, End of Year. Rows include: 20 Total assets (Part X, line 16) 61,175,490. 63,034,519. 21 Total liabilities (Part X, line 26) 1,574,168. 1,837,215. 22 Net assets or fund balances. Subtract line 21 from line 20 59,601,322. 61,197,304.

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
TIM RITCHIE, PRESIDENT
Print/Type preparer's name Preparer's signature Date Check if self-employed PTIN
PRERNA JAGADA FRANK, RIMERMAN & CO. LLP 4/24/2015 P01063809
Firm's address Firm's EIN Phone no.
1801 PAGE MILL ROAD PALO ALTO, CA 94304 94-1341042 (650) 845-8100

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: TO INSPIRE THE INNOVATOR IN EVERYONE. THE TECH IS A NON-PROFIT, EXPERIENTIAL LEARNING RESOURCE DESIGNED TO HELP PEOPLE AND COMMUNITIES THRIVE IN A TECHNOLOGICAL AGE. THE TECH DOES THIS WITH EXHIBITS AND PROGRAMS THAT INSPIRE PEOPLE WITH THE POWER OF TECHNOLOGY TO IMPROVE

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 [X] No

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

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

4a (Code:) (Expenses \$ 9,247,955. including grants of \$ 500,000.) (Revenue \$ 5,990,126.) THE TECH ASPIRES TO BRING TOGETHER, IN ITS 132,000 SQUARE FOOT EXHIBITION FACILITY, EXHIBITS AND PROGRAMS THAT INSPIRE THE INNOVATOR IN EVERYONE. WITH MORE THAN 100 INTERACTIVE EXHIBITS, ALONG WITH STANDARDS-BASED EDUCATIONAL IMAX FILMS, THIS SPACE WELCOMES ON AVERAGE MORE THAN 400,000 VISITORS ANNUALLY, INCLUDING MORE THAN 120,000 FROM LOCAL K-12 SCHOOLS, TO ENGAGE IN SCIENCE AND TECHNOLOGY EXPERIENCES. ADDITIONALLY, THE TECH HOSTS TWO ANNUAL SIGNATURE PROGRAMS: (1) THE TECH CHALLENGE, A TEAM ENGINEERING DESIGN COMPETITION IN WHICH MORE THAN 2,000 STUDENTS IN GRADES 4-12 DESIGN, BUILD, DOCUMENT, AND TEST DEVICES THAT SOLVE A REAL-WORLD PROBLEM, AND (2) THE TECH AWARDS, AN INTERNATIONAL PROGRAM THAT HONORS INNOVATORS FROM AROUND THE WORLD WHO ARE APPLYING TECHNOLOGY TO CONFRONT

4b (Code:) (Expenses \$ 1,528,858. including grants of \$) (Revenue \$ 140,625.) THE TECH OFFERS AN ARRAY OF STANDARDS-BASED SCIENCE, TECHNOLOGY, ENGINEERING, AND MATH (STEM) EDUCATION PROGRAMS, WHICH INCLUDES EIGHT HANDS-ON SCIENCE LABS, BILINGUAL WEEKEND WORKSHOPS, AFTER-SCHOOL PROGRAMS, AND THE TECH CHALLENGE PROGRAM. ALL OF THESE PROGRAMS ALIGN WITH NEXT GENERATION SCIENCE STANDARDS AND COMMON CORE STATE STANDARDS. IN ADDITION, THE TECH OFFERS EDUCATIONAL IMAX FILMS THAT SUPPORT CALIFORNIA SCIENCE AND SOCIAL STUDIES CONTENT STANDARDS. APPROXIMATELY 100,000 CALIFORNIA STUDENTS IN GRADES K-12 VISITED THE REGULAR MUSEUM GALLERIES THROUGH OUR FIELD-TRIP PROGRAM. MORE THAN HALF OF THOSE STUDENTS WERE FROM TITLE 1 SCHOOLS. MANY OF THESE TITLE 1 STUDENTS ACCESSED OUR FEE-WAIVED SUPPORT FROM DONORS THAT ALLOWED THEM A DEEP ENGAGEMENT WITH SCIENCE AND TECHNOLOGY THAT OTHERWISE WOULD NOT BE

4c (Code:) (Expenses \$ 1,835,094. including grants of \$) (Revenue \$ 526,788.) MORE THAN 7,000 MEMBERS HELP SUPPORT THE TECH, INCLUDING MORE THAN 300 LOCAL EDUCATORS WHO ARE GRANTED DISCOUNTED MEMBERSHIPS. THE TECH HOSTS A NUMBER OF COMMUNITY CELEBRATIONS AND MORE THAN 200 RECEPTIONS, EVENTS AND PARTIES. THE TECH'S STAFF AND OVER 300 VOLUNTEERS PROVIDE INTERPRETATION SERVICES FOR THE PERMANENT GALLERIES AND TRAVELING EXHIBITS. THEY ALSO ASSIST VISITORS WITH TICKETING, CHOOSING PROGRAMS AND EDUCATIONAL OPPORTUNITIES SUCH AS IMAX FILM PRESENTATIONS.

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

4e Total program service expenses 12,611,907.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
25b			X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II		X
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? <i>If "Yes," complete Schedule L, Part III</i>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
28a			X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c			X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
29		X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
30			X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
31			X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
32			X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
33			X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
34			X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35a			X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
35b			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36			X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
37			X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	
38		X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Main form table with columns for question numbers (1a-14b), Yes/No checkboxes, and numerical input fields. Includes questions about Form 1096, Form W-2G, Form W-3, Form 990-T, Form 8886-T, Form 8282, Form 8899, Form 1098-C, Form 4966, Form 501(c)(7), Form 501(c)(12), Form 4947(a)(1), and Form 501(c)(29).

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 or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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.		
	40		
b	Enter the number of voting members included in line 1a, above, who are independent		
	39		
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?		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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		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?		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?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	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		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?		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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	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	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	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	X	
b	Other officers or key employees of the organization	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?		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?		

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.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **THE ORGANIZATION - (408) 795-6116**
201 SOUTH MARKET STREET, SAN JOSE, CA 95113

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(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) TIM RITCHIE PRESIDENT & CEO/DIRECTOR	40.00	X		X			272,395.	0.	0.	
(2) ANN BOWERS DIRECTOR	3.00	X					0.	0.	0.	
(3) EDWARD CANNIZZARO BOARD TREASURER	2.00	X		X			0.	0.	0.	
(4) DANIEL WARMENHOVEN BOARD VICE CHAIR	2.00	X		X			0.	0.	0.	
(5) ROGER QUINLAN BOARD SECRETARY	1.00	X		X			0.	0.	0.	
(6) MANNY BARBARA DIRECTOR	0.50	X					0.	0.	0.	
(7) JAMES BARRESE DIRECTOR	0.50	X					0.	0.	0.	
(8) HARRY BLOUNT DIRECTOR	0.30	X					0.	0.	0.	
(9) SALLY BOURGOIN DIRECTOR	1.00	X					0.	0.	0.	
(10) CHRIS BOYD DIRECTOR	1.00	X					0.	0.	0.	
(11) CHUCK BOYNTON DIRECTOR	0.40	X					0.	0.	0.	
(12) TERESA BRIGGS DIRECTOR	0.50	X					0.	0.	0.	
(13) BLAIR CHRISTIE DIRECTOR	0.50	X					0.	0.	0.	
(14) DAVID CORTESE DIRECTOR	0.50	X					0.	0.	0.	
(15) DAVID CRAWFORD DIRECTOR	1.00	X					0.	0.	0.	
(16) JAMES DEICHEN DIRECTOR	4.00	X					0.	0.	0.	
(17) CHRISTOPHER DIGIORGIO BOARD CHAIR	4.00	X		X			0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(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) JOSEPH FABRIS DIRECTOR	1.00	X						0.	0.	0.
(19) ROBERT GRIMM DIRECTOR	3.40	X						0.	0.	0.
(20) WILLIAM HEIL DIRECTOR	0.50	X						0.	0.	0.
(21) GERALD HELD DIRECTOR	2.00	X						0.	0.	0.
(22) DAVE HOUSE DIRECTOR	0.30	X						0.	0.	0.
(23) JOE KAVA DIRECTOR	1.00	X						0.	0.	0.
(24) CATHY KIMBALL DIRECTOR	0.50	X						0.	0.	0.
(25) RANDY KREZIN DIRECTOR	0.50	X						0.	0.	0.
(26) DAN 'L LEWIN DIRECTOR	0.50	X						0.	0.	0.
1b Sub-total								272,395.	0.	0.
c Total from continuation sheets to Part VII, Section A								827,776.	0.	19,200.
d Total (add lines 1b and 1c)								1,100,171.	0.	19,200.

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 **7**

	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
RICHARD KING 201 S. MARKET STREET, SAN JOSE, CA 95113	FUNDRAISING-THE TECH AWARDS	249,991.

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

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 (list any hours for related organizations below line)	(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) BILL MAY DIRECTOR	1.00	X					0.	0.	0.	
(28) SMITH MCKEITHEN DIRECTOR	0.50	X					0.	0.	0.	
(29) JAMI NACHTSHEIM DIRECTOR	1.20	X					0.	0.	0.	
(30) OMKARAM NALAMASU DIRECTOR	0.50	X					0.	0.	0.	
(31) STUART PANN DIRECTOR	0.30	X					0.	0.	0.	
(32) DANIEL PEREZ DIRECTOR	1.00	X					0.	0.	0.	
(33) FRANK QUATTRONE DIRECTOR	1.00	X					0.	0.	0.	
(34) PETER RELAN DIRECTOR	0.20	X					0.	0.	0.	
(35) ARCHANA SATHAYE DIRECTOR	0.50	X					0.	0.	0.	
(36) JUDY SWANSON DIRECTOR	0.50	X					0.	0.	0.	
(37) JIM VANIDES DIRECTOR	0.50	X					0.	0.	0.	
(38) JOHN VITALIE DIRECTOR	0.30	X					0.	0.	0.	
(39) KENNETH WASHINGTON DIRECTOR	1.00	X					0.	0.	0.	
(40) STEVE YOUNG DIRECTOR	0.50	X					0.	0.	0.	
(41) HARVARD SUNG CFO	40.00	X	X				109,827.	0.	0.	
(42) VINOD MEHTA DIRECTOR	1.00	X					0.	0.	0.	
(43) LATH CARLSON VP EXHIBITS	40.00			X			170,052.	0.	0.	
(44) MARIA PAPPAS VP DEVELOPMENT	40.00			X			158,932.	0.	0.	
(45) BILL BAILOR VP OPERATIONS	40.00				X		141,566.	0.	4,400.	
(46) DAVID WHITMAN VP TECH AWARDS	40.00				X		128,604.	0.	10,000.	
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (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			
(47) ELIZABETH WILLIAMS FORMER VP MARKETING	40.00						X	118,795.	0.	4,800.
Total to Part VII, Section A, line 1c								827,776.		19,200.

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	2,054,155.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	1,149,750.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	5,365,727.				
	g Noncash contributions included in lines 1a-1f: \$		349,930.				
	h Total. Add lines 1a-1f		8,569,632.				
	Program Service Revenue	2 a ADMISSIONS AND FEES	Business Code 611710	4,342,839.	4,342,839.		
b IMAX TICKET SALES		900099	951,081.	767,669.	183,412.		
c FACILITY RENTAL		900099	632,665.	632,665.			
d VISITORS SERVICES		900099	526,788.	526,788.			
e STORE REVENUE		453220	387,578.	387,578.			
f All other program service revenue							
g Total. Add lines 2a-2f			6,840,951.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		284,725.			284,725.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real					
		(ii) Personal					
		b Less: rental expenses					
		c Rental income or (loss)					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other					
		b Less: cost or other basis and sales expenses		2,998,028.	145,000.		
		c Gain or (loss)		124,465.	-145,000.		
	d Net gain or (loss)			-20,535.		-20,535.	
	8 a Gross income from fundraising events (not including \$ 2,054,155. of contributions reported on line 1c). See Part IV, line 18	a	500,782.				
		b Less: direct expenses	b	417,359.			
c Net income or (loss) from fundraising events			83,423.			83,423.	
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a							
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions.			15,758,196.	6,657,539.	183,412.	347,613.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	125,000.	125,000.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	75,000.	75,000.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	300,000.	300,000.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	836,199.	185,592.	485,555.	165,052.
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	5,175,821.	3,913,846.	776,486.	485,489.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	574,420.	390,294.	122,314.	61,812.
10 Payroll taxes	424,255.	289,833.	88,706.	45,716.
11 Fees for services (non-employees):				
a Management				
b Legal	22,735.		22,735.	
c Accounting	121,020.		121,020.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	43,806.		43,806.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	466,650.	314,303.	21,529.	130,818.
12 Advertising and promotion	556,519.	331,609.	224,519.	391.
13 Office expenses	741,221.	604,910.	86,664.	49,647.
14 Information technology				
15 Royalties	245,946.	243,025.		2,921.
16 Occupancy	1,797,844.	1,540,242.	164,903.	92,699.
17 Travel	266,305.	209,632.	42,040.	14,633.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	29,387.	22,790.	3,458.	3,139.
20 Interest	10,693.	8,293.	1,258.	1,142.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,469,281.	1,373,645.	68,954.	26,682.
23 Insurance				
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 FEES AND SERVICES	1,178,447.	1,011,622.	165,357.	1,468.
b TECH AWARDS	802,301.	802,301.		
c BUILDING AND EQUIPMENT	654,253.	581,837.	38,342.	34,074.
d BANKCARD FEES	122,221.	122,221.		
e All other expenses	329,089.	165,912.	25,171.	138,006.
25 Total functional expenses. Add lines 1 through 24e	16,368,413.	12,611,907.	2,502,817.	1,253,689.
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

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

		(A)		(B)	
		Beginning of year		End of year	
Assets	1 Cash - non-interest-bearing	49,685.	1	69,201.	
	2 Savings and temporary cash investments	2,221,472.	2	5,263,525.	
	3 Pledges and grants receivable, net	12,100,086.	3	9,091,946.	
	4 Accounts receivable, net	1,314,857.	4	50,276.	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Loans and other 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 instr). Complete Part II of Sch L		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	208,857.	9	216,168.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 28,900,545.			
	b Less: accumulated depreciation	10b 21,635,187.	6,465,188.	10c 7,265,358.	
	11 Investments - publicly traded securities		11		
	12 Investments - other securities. See Part IV, line 11	17,625,957.	12	20,001,294.	
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14	20,000.	
	15 Other assets. See Part IV, line 11	21,189,388.	15	21,056,751.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	61,175,490.	16	63,034,519.		
Liabilities	17 Accounts payable and accrued expenses	1,189,071.	17	1,258,562.	
	18 Grants payable		18		
	19 Deferred revenue	385,097.	19	578,653.	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to 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		25		
	26 Total liabilities. Add lines 17 through 25	1,574,168.	26	1,837,215.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	5,799,794.	27	8,148,336.	
	28 Temporarily restricted net assets	41,085,822.	28	40,333,262.	
	29 Permanently restricted net assets	12,715,706.	29	12,715,706.	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	59,601,322.	33	61,197,304.		
34 Total liabilities and net assets/fund balances	61,175,490.	34	63,034,519.		

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	15,758,196.
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,368,413.
3	Revenue less expenses. Subtract line 2 from line 1	3	-610,217.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	59,601,322.
5	Net unrealized gains (losses) on investments	5	2,338,836.
6	Donated services and use of facilities	6	-132,637.
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	61,197,304.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	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?	X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	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		

Form 990 (2013)

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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	8,983,577.	6,996,214.	21,690,550.	11,124,299.	8,569,632.	57,364,272.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...	1,298,939.	1,292,636.	1,285,955.	1,278,871.	1,271,363.	6,427,764.
4 Total. Add lines 1 through 3	10,282,516.	8,288,850.	22,976,505.	12,403,170.	9,840,995.	63,792,036.
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)						25,004,379.
6 Public support. Subtract line 5 from line 4.						38,787,657.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	10,282,516.	8,288,850.	22,976,505.	12,403,170.	9,840,995.	63,792,036.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	318,803.	297,488.	277,593.	261,599.	284,725.	1,440,208.
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.)						
11 Total support. Add lines 7 through 10						65,232,244.
12 Gross receipts from related activities, etc. (see instructions)					12	21,530,379.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	59.46	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	66.99	%
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2013. 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			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2012. 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			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

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

(Complete only if you checked the box on line 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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2013. 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 - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.

Also complete this part for any additional information. (See instructions).

Lined area for supplemental information.

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.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and
its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Name of the organization

THE TECH MUSEUM OF INNOVATION

Employer identification number

94-2864660

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private 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

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 its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization THE TECH MUSEUM OF INNOVATION Employer identification number 94-2864660

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.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate contributions, aggregate grants, aggregate value, and questions about donor advisement.

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

Form for Part II Conservation Easements. Includes checkboxes for purposes of easements, a table for held at the end of the tax year (lines 2a-2d), and questions about monitoring and reporting.

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.

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

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items

(check all that apply):

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

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

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

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" 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 XIII 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 XIII. Check here if the explanation has been provided in Part XIII

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	13,758,673.	12,715,706.	12,715,706.	12,685,706.	12,675,167.
b Contributions				30,000.	10,539.
c Net investment earnings, gains, and losses	1,867,525.	1,042,967.			
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	15,626,198.	13,758,673.	12,715,706.	12,715,706.	12,685,706.

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

- a Board designated or quasi-endowment _____ %
- b Permanent endowment 100.00 %
- c Temporarily restricted endowment _____ %

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		X
(ii) related organizations		X

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		10,246,417.	8,617,773.	1,628,644.
d Equipment		4,717,052.	3,845,051.	872,001.
e Other		13,937,076.	9,172,363.	4,764,713.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				7,265,358.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) EQUITY FUNDS	13,593,794.	END-OF-YEAR MARKET VALUE
(B) VENTURE CAPITAL FUNDS &		
(C) PARTNERSHIPS	1,171,474.	END-OF-YEAR MARKET VALUE
(D) CERTIFICATES OF DEPOSIT	5,236,026.	END-OF-YEAR MARKET VALUE
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	20,001,294.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) CITY OF SAN JOSE LEASE	21,056,751.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	21,056,751.

Part X Other Liabilities.

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

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

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

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	20,808,631.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	2,338,836.
b	Donated services and use of facilities	2b	2,338,046.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	4,676,882.
3	Subtract line 2e from line 1	3	16,131,749.
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	43,806.
b	Other (Describe in Part XIII.)	4b	-417,359.
c	Add lines 4a and 4b	4c	-373,553.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	15,758,196.

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	19,212,649.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	2,470,683.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	2,470,683.
3	Subtract line 2e from line 1	3	16,741,966.
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	43,806.
b	Other (Describe in Part XIII.)	4b	-417,359.
c	Add lines 4a and 4b	4c	-373,553.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	16,368,413.

Part XIII Supplemental Information.

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

PART V, LINE 4:

THE INTENDED USE OF THE TECH'S ENDOWMENT FUNDS ARE TO PROVIDE A DEPENDABLE AND GROWING SOURCE OF FUNDING FOR THE SUPPORT OF OPERATION, SPECIAL PROGRAMS, AND CAPITAL IMPROVEMENT OF THE TECH MUSEUM.

PART X, LINE 2:

THE ORGANIZATION APPLIES THE PROVISIONS SET FORTH IN FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICATION TOPIC 740 TO ACCOUNT FOR UNCERTAINTY IN INCOME TAXES. THE ORGANIZATION ASSESSED ALL INCOME TAX POSITIONS TAKEN WHERE THE STATUTE OF LIMITATIONS REMAINED OPEN. THE ORGANIZATION BELIEVES THAT ITS TAX FILING POSITIONS WILL BE SUSTAINED UPON TAX EXAMINATIONS; THEREFORE, NO LIABILITY

Part XIII Supplemental Information (continued)

FOR UNRECOGNIZED INCOME TAX BENEFITS HAS BEEN RECORDED AT JUNE 30, 2014.
THE ORGANIZATION DOES NOT ANTICIPATE ANY SIGNIFICANT INCREASES OR
DECREASES TO UNRECOGNIZED INCOME TAX BENEFITS DURING THE NEXT 12 MONTHS.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RECLASS OF TECH AWARD EXPENSES -417,359.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

RECLASS OF TECH AWARD EXPENSES -417,359.

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		MEXICO	CASH PRIZE - UNRESTRICTED	75,000	WIRE	0.		USD
		NIGERIA	CASH PRIZE - UNRESTRICTED	25,000	WIRE	0.		USD

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **0**

3 Enter total number of other organizations or entities **2**

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
CASH PRIZE	INDIA	1	75,000.	WIRE	0.		USD
CASH PRIZE	NIGERIA	1	25,000.	WIRE	0.		USD
CASH PRIZE	NETHERLANDS	1	75,000.	WIRE	0.		USD
CASH PRIZE	MEXICO	1	25,000.	WIRE	0.		USD

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713)* Yes No

Schedule F (Form 990) 2013

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

PART I, LINE 2:

THE TECH MAKES ANNUAL AWARDS IN CONJUNCTION WITH ITS ANNUAL GALA. THE PURPOSE OF THE TECH AWARDS IS TO HONOR TECHNOLOGISTS, EDUCATORS, SCIENTISTS AND ENTREPRENEURS WHO USE TECHNOLOGY TO IMPROVE OUR WORLD. EACH NOMINEE ELIGIBLE FOR AN AWARD IS VETTED IN ACCORDANCE WITH THE IRS REGULATIONS AND APPLICABLE GUIDANCE TO ENSURE COMPLIANCE WITH THE RULES AND REGULATIONS FOR MAKING INTERNATIONAL AWARDS.

Multiple horizontal lines for supplemental information.

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	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		THE TECH AWARDS (event type)	(event type)	NONE (total number)	
Revenue	1 Gross receipts	2,554,937.			2,554,937.
	2 Less: Contributions	2,054,155.			2,054,155.
	3 Gross income (line 1 minus line 2)	500,782.			500,782.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	9,529.			9,529.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	407,830.			407,830.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				417,359.
	11 Net income summary. Subtract line 10 from line 3, column (d)				83,423.

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))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)					
8 Net gaming income summary. Subtract line 7 from line 1, column (d)					

9 Enter the state(s) in which the organization 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:

13a		%
13b		%

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

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also 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: RICHARD KING

(I) ADDRESS OF FUNDRAISER: 201 S. MARKET STREET, SAN JOSE, CA 95113

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ **Attach to Form 990.**

OMB No. 1545-0047

2013

**Open to Public
Inspection**

▶ **Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990**

Name of the organization **THE TECH MUSEUM OF INNOVATION** Employer identification number **94-2864660**

Part I **General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
POTENTIAL ENERGY 2150 ALLSTON WAY, SUITE 300 BERKELEY, CA 94702	26-1321043		75,000.	0.			CASH PRIZE TECH AWARDS
D-REV: DESIGN FOR THE OTHER NINETY PERCENT - 695 MINNESOTA ST. - SAN FRANCISCO, CA 94107	26-0642778		25,000.	0.			CASH PRIZE TECH AWARDS
WORLD WIDE WORKSHOP 113 W. 78TH STREET, SUITE #3 NEW YORK, NY 10024	37-1787342		25,000.	0.			CASH PRIZE TECH AWARDS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 0.

3 Enter total number of other organizations listed in the line 1 table ▶ 3.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2013)

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
CASH PRIZE	1	75,000.	0.		

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PART I, LINE 2:

THE TECH MAKES ANNUAL AWARDS IN CONJUNCTION WITH ITS ANNUAL GALA. THE PURPOSE OF THE TECH AWARDS IS TO HONOR TECHNOLOGISTS, EDUCATORS, SCIENTISTS AND ENTREPRENEURS WHO USE TECHNOLOGY TO IMPROVE OUR WORLD. EACH NOMINEE ELIGIBLE FOR AN AWARD IS VETTED IN ACCORDANCE WITH THE IRS REGULATIONS AND APPLICABLE GUIDANCE TO ENSURE COMPLIANCE WITH THE RULES AND REGULATIONS FOR MAKING DOMESTIC AWARDS.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

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

2013

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990

Name of the organization

THE TECH MUSEUM OF INNOVATION

Employer identification number

94-2864660

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.		
<input type="checkbox"/> First-class or charter travel		
<input type="checkbox"/> Travel for companions		
<input type="checkbox"/> Tax indemnification and gross-up payments		
<input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> 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 directors, trustees, and officers, including 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, but explain in Part III.		
<input type="checkbox"/> Compensation committee		
<input type="checkbox"/> Independent compensation consultant		
<input type="checkbox"/> Form 990 of other organizations		
<input checked="" type="checkbox"/> Written employment contract		
<input type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> 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	

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

Schedule J (Form 990) 2013

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 and Title		(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) TIM RITCHIE PRESIDENT & CEO/DIRECTOR	(i)	272,395.	0.	0.	0.	0.	272,395.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) LATH CARLSON VP EXHIBITS	(i)	170,052.	0.	0.	0.	0.	170,052.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MARIA PAPPAS VP DEVELOPMENT	(i)	158,932.	0.	0.	0.	0.	158,932.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ELIZABETH WILLIAMS FORMER VP MARKETING	(i)	118,795.	0.	0.	0.	4,800.	123,595.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

Name of the organization **THE TECH MUSEUM OF INNOVATION** Employer identification number **94-2864660**

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				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (OTHER GOODS)	X	28	159,482.	FMV
26 Other ▶ (FOOD)	X	14	69,352.	FMV
27 Other ▶ (WINE)	X	29	45,153.	FMV
28 Other ▶ (ELECTRONICS)	X	13	28,513.	FMV

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

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 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?		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?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		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. 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.

PART I, OTHER TYPES OF PROPERTY:

TRAVEL

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 8

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 28023.

(D) METHOD OF DETERMINING REVENUE: FMV

ENTERTAINMENT

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 38

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 19307.

(D) METHOD OF DETERMINING REVENUE:

EQUIPMENT

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 100.

(D) METHOD OF DETERMINING REVENUE: FMV

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

THE TECH MUSEUM OF INNOVATION

Employer identification number

94-2864660

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

LIVES AND BUILD BETTER COMMUNITIES.

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

HUMANITY'S MOST URGENT CHALLENGES IN FIVE AWARD CATEGORIES:

ENVIRONMENT, EDUCATION, YOUNG INNOVATOR, HEALTH, AND ECONOMIC

DEVELOPMENT. THIS TECHNOLOGY CAN BE EITHER A NEW INVENTION OR AN

INNOVATIVE USE OF AN EXISTING TECHNOLOGY. THE LAUREATES ARE CELEBRATED

AT AN ANNUAL AWARDS GALA, WHICH HAS BECOME A SIGNIFICANT SILICON VALLEY

EVENT.

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

AVAILABLE TO THEM. NEARLY 50,000 SAW AN EDUCATIONAL IMAX FILM AND

24,000 STUDENTS PARTICIPATED IN 90-MINUTE LABS LED BY TRAINED

INSTRUCTORS. THE TECH REACHES OUT TO A DIVERSE ARRAY OF COMMUNITIES TO

INTRODUCE STUDENTS NOT ONLY TO STEM CONCEPTS, BUT ALSO TO THE THRILL OF

HANDS-ON LEARNING AND REAL-WORLD DESIGN.

FORM 990, PART VI, SECTION B, LINE 11:

THE AUDIT COMMITTEE REVIEWS A DRAFT OF THE RETURNS. ALL BOARD

MEMBERS ARE SENT A FINAL DRAFT OF THE RETURNS PRIOR TO FILING.

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

EACH DIRECTOR, EACH CORPORATE OFFICER, THE HIGHEST RANKING OR

CHIEF MANAGEMENT OFFICIAL, THE HIGHEST RANKING OR CHIEF FINANCIAL OFFICER,

EACH KEY EMPLOYEE OF THE TECH, AND OTHERS THAT THE TECH MUSEUM MAY

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2013)

332211
09-04-13

Name of the organization THE TECH MUSEUM OF INNOVATION	Employer identification number 94-2864660
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IDENTIFY, IS REQUIRED TO SIGN A STATEMENT THAT:

1) AFFIRMS THE PERSON HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY, HAS READ AND UNDERSTOOD THE POLICY, AND HAS AGREED TO COMPLY WITH THE POLICY; AND

2) DISCLOSES THE PERSON'S INTERESTS THAT COULD GIVE RISE TO CONFLICTS OF INTEREST.

ALL SUCH STATEMENTS BY DIRECTORS AND OFFICERS ARE REQUIRED TO BE FILED WITH THE RECORDS THE BOARD OR COMMITTEE; STATEMENTS BY OTHERS SHALL BE RETAINED IN THEIR PERSONNEL FILES.

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

THE EXECUTIVE COMMITTEE APPROVES COMPENSATION FOR THE CEO AND CFO, AND PERIODICALLY CONDUCTS AND OR REVIEWS COMPENSATION COMPARISONS.

FORM 990, PART VI, SECTION C, LINE 18:

THE ORGANIZATION MAKES THESE AVAILABLE TO THE PUBLIC ON THE ORGANIZATION'S WEBSITE OR UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC ON THE ORGANIZATION'S WEBSITE OR UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THE ORGANIZATION'S PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAS NOT CHANGED FROM PRIOR YEARS.