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Form 990 Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047
	The organization may have to use a copy of this return to satisfy state reporting requirements	2008 Open to Public Inspection

A For the 2008				calendar year, or tax year beginning 07-01-2008				and ending 06-30-2009			
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Termination ☐ Amended return ☐ Application pending		Please use IRS label or print or type. See Specific Instructions.	C Name of organization Jewish Community Federation of Greater Rochester NY Inc Doing Business As						D Employer identification number 16-0868942		
			Number and street (or P O box if mail is not delivered to street address) Room/suite 441 East Avenue						E Telephone number (585) 461-0490		
			City or town, state or country, and ZIP + 4 Rochester, NY 14607						G Gross receipts \$ 5,852,345		
			F Name and address of Principal Officer Lawrence Fine 441 East Avenue Rochester, NY 14607						H(a) Is this a group return for affiliates? ☐ Yes ☒ No		
I Tax-exempt status ☒ 501(c) (3) (Insert no) ☐ 4947(a)(1) or ☐ 527								H(b) Are all affiliates included? ☐ Yes ☐ No (If "No," attach a list See instructions)			
J Web site: www.jewishrochester.org								H(c) Group Exemption Number			
K Type of organization ☒ Corporation ☐ trust ☐ association ☐ other								L Year of Formation 1961		M State of legal domicile NY	

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities Fundraising, planning and community relations serving the Jewish Community of Rochester, NY		
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	90
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	89
	5	Total number of employees (Part V, line 2a)	5	24
	6	Total number of volunteers (estimate if necessary)	6	200
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0
Revenue			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	9,122,407	5,239,938
	9	Program service revenue (Part VIII, line 2g)	28,501	28,418
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	689,658	465,323
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	451,116	97,119
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10,291,682	5,830,798
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	4,818,060	4,568,927
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,437,652	1,629,197
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	(Total fundraising expenses, Part IX, column (D), line 25 <u>407,953</u>)		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	1,221,392	1,122,499
	18	Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A))	7,477,104	7,320,623
	19	Revenue less expenses Subtract line 18 from line 12	2,814,578	-1,489,825
	Net Assets or Fund Balances			Beginning of Year
20		Total assets (Part X, line 16)	31,780,765	24,138,144
21		Total liabilities (Part X, line 26)	4,500,820	4,004,196
22		Net assets or fund balances Subtract line 21 from line 20	27,279,945	20,133,948

Part II Signature Block

Please Sign Here	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				
	*****		2010-05-17		
	Signature of officer		Date		
	Lawrence Fine Executive Director Type or print name and title				
Paid Preparer's Use Only	Preparer's signature ▶ Timothy P Thaney CPA		Date 2010-05-13	Check if self-employed ▶ ☐	Preparer's PTIN (See Gen Inst)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ DeJoy Knauf & Blood LLP 39 State Street Suite 600 Rochester, NY 14614				EIN ▶
					Phone no ▶ (585) 546-1840

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

Part III

Statement of Program Service Accomplishments (See the instructions.)

1

Briefly describe the organization’s mission

See Additional Data Table

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

☒

No

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting or make significant changes in how it conducts any program services?

Yes

☒

No

If “Yes,” describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization’s three largest program services by expenses

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 4,568,927 including grants of \$) (Revenue \$)

Distributions to beneficiaries - Annual allocations to qualified Jewish organizations

4b

(Code) (Expenses \$ 355,763 including grants of \$) (Revenue \$)

Educational services - Professional development programs & courses for teachers, Midrash H S in Rochester for Jewish students and educational programs for community on the Holocaust

4c

(Code) (Expenses \$ 175,106 including grants of \$) (Revenue \$)

Foundation development - Programs to assist in the development and growth of Jewish organizations

(Code) (Expenses \$ 812,226 including grants of \$) (Revenue \$)

4d

Other program services (Describe in Schedule O)

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

4e

Total program service expenses \$ 5,912,022

Must equal Part IX, Line 25, column (B).

Part IV

Checklist of Required Schedules

		Yes	No	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1	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		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
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	Yes	
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 V 	10	Yes	
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? If "Yes," complete Schedule F, Part II	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? If "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		No
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		
a 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)? <i>If "Yes," complete Schedule L, Part IV</i>		No
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		No
c 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? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> 	Yes	
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> 		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> 		No
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>		No
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? <i>If "Yes," complete Schedule R, Part I</i> 		No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> 	Yes	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> 		No
36 501(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> 		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? <i>If "Yes," complete Schedule R, Part VI</i> 		No

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a15		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a24	Yes	
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? . . . Note: <i>If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.</i>	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country <u>CJ</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .	5a		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, <i>Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction</i> ?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	7a	Yes	
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e	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		No
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 year?	8		No
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		No
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		

Part VI

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

Section A. Governing Body and Management

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

90

1b

Enter the number of voting members that are independent

1b

89

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

Yes

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

No

4

Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?

4

No

5

Did the organization become aware during the year of a material diversion of the organization's assets?

5

No

6

Does the organization have members or stockholders?

6

No

7a

Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?

7a

No

7b

Are any decisions of the governing body subject to approval by members, stockholders, or other persons?

7b

No

8

Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following

8a

the governing body?

8a

Yes

8b

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

No

9b

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

Yes

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

No

Section B. Policies

12a

Does the organization have a written conflict of interest policy? If "No", go to line 13

12a

Yes

12b

Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

12b

Yes

12c

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

13

Does the organization have a written whistleblower policy?

13

Yes

14

Does the organization have a written document retention and destruction policy?

14

Yes

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

15a

The organization's CEO, Executive Director, or top management official?

15a

Yes

15b

Other officers or key employees of the organization?

15b

No

Describe the process in Schedule O

16a

Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

16a

No

16b

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

Section C. Disclosure

17

List the States with which a copy of this Form 990 is required to be filed

NY

18

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 ☐ another's 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.
Jeanine Vendetta
441 East Avenue
Rochester, NY 14607
(585) 461-0490

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

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

Form 990 (2008)

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
1b Total								544,350	0	76,783

		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	No
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? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization		
(A) Name and business address	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization		0

Part VIII

Statement of Revenue

				(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a						
	b	Membership dues							
			1b						
	c	Fundraising events							
			1c						
	d	Related organizations . . .	1d	840,587					
	e	Government grants (contributions)	1e						
	f	All other contributions, gifts, grants, and similar amounts not included above		4,399,351					
			1f						
g	Noncash contributions included in lines 1a-1f \$								
h	Total (Add lines 1a-1f)			5,239,938					
Program Service Revenue	2a	Tuition and Grant Inco	Business Code						
			611,600	28,418	28,418				
	b								
	c								
	d								
	e								
	f	All other program service revenue							
	g	Total. Add lines 2a-2f							
		➤ \$ 28,418							
Other Revenue	3	Investment income (including dividends, interest other similar amounts)							
				486,870			486,870		
	4	Income from investment of tax-exempt bond proceeds							
	5	Royalties							
	6a	Gross Rents	(i) Real	(ii) Personal					
			39,125						
			39,125						
	b	Less rental expenses			39,125			39,125	
	c	Rental income or (loss)							
	d	Net rental income or (loss)							
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
			21,547						
			-21,547						
	b	Less cost or other basis and sales expenses			-21,547			-21,547	
	c	Gain or (loss)							
	d	Net gain or (loss)							
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000							
	b	Less direct expenses . . .	.b						
	c	Net income or (loss) from fundraising events							
	9a	Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000							
b	Less direct expenses . . .	.b							
c	Net income or (loss) from gaming activities								
10a	Gross sales of inventory, less returns and allowances . .								
b	Less cost of goods sold . . .	.b							
c	Net income or (loss) from sales of inventory								
	Miscellaneous Revenue	Business Code							
11a	SOFTWARE DISCOUNT	900,099	57,994	57,994					
b									
c									
d	All other revenue								
e	Total. Add lines 11a-11d								
	\$ 57,994								
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			5,830,798	86,412	0	504,448		

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 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	4,568,927	4,568,927		
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
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	336,745	84,186	117,861	134,698
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	1,009,326	670,145	287,006	52,175
7	Other salaries and wages			287,006	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	195,204	109,032	43,358	42,814
10	Payroll taxes	87,922	47,170	16,226	24,526
11	Fees for services (non-employees)				
a	Management				
b	Legal				
c	Accounting	31,960	25,568	6,392	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	97,919		97,919	
17	Travel	25,162	4,093	21,069	
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	82,046	12,359	64,538	5,149
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)				
a	Programs and Events	338,658	190,611	30,373	117,674
b	National Dues Expense	194,810		194,810	
c	Foundation Fee	109,841	109,841		
d	Bad Debt Expense	90,783		90,783	
e	miscellaneous	33,210	3,259	19,948	10,003
f	All other expenses	118,110	86,831	10,365	20,914
25	Total functional expenses. Add lines 1 through 24f	7,320,623	5,912,022	1,000,648	407,953
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				

Part X **Balance Sheet**

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing	386,242	1	1,026,669
	2	Savings and temporary cash investments	554,544	2	850,355
	3	Pledges and grants receivable, net	3,832,396	3	3,222,763
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i>		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i>		6	
	7	Notes and loans receivable, net	40,698	7	39,948
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	26,483	9	66,738
	10a	Land, buildings, and equipment cost basis			
		10a	2,151,257		
	b	Less accumulated depreciation <i>Complete Part VI of Schedule D</i>			
		10b	1,235,675		
			967,052	10c	915,582
	11	Investments—publicly traded securities	18,860,322	11	12,666,859
	12	Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i>	5,981,009	12	4,305,693
13	Investments—program-related See Part IV, line 11 <i>Complete Part VIII of Schedule D</i>		13		
14	Intangible assets		14		
15	Other assets See Part IV, line 11 <i>Complete Part IX of Schedule D</i>	1,132,019	15	1,043,537	
16	Total assets. Add lines 1 through 15 (must equal line 34)	31,780,765	16	24,138,144	
Liabilities	17	Accounts payable and accrued expenses	335,206	17	150,203
	18	Grants payable	3,780,149	18	3,482,038
	19	Deferred revenue		19	141,715
	20	Tax-exempt bond liabilities		20	
	21	Escrow account liability <i>Complete Part IV of Schedule D</i>		21	
	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i>		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable		24	
	25	Other liabilities <i>Complete Part X of Schedule D</i>	385,465	25	230,240
	26	Total liabilities. Add lines 17 through 25	4,500,820	26	4,004,196
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	18,769,292	27	13,789,410
	28	Temporarily restricted net assets	5,446,269	28	4,034,494
	29	Permanently restricted net assets	3,064,384	29	2,310,044
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	27,279,945	33	20,133,948
	34	Total liabilities and net assets/fund balances	31,780,765	34	24,138,144

Part XI **Financial Statements and Reporting**

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ cash ☒ accrual ☐ other			
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	
c	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		No
b	If "Yes," did the organization undergo the required audit or audits?	3b		

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.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization Jewish Community Federation of Greater Rochester NY Inc	Employer identification number 16-0868942
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Part I Reason for Public Charity Status (to be completed by all organizations) (See Instructions)

The organization is not a private foundation because it is (Please check only **one** organization)

1	☐	A church, convention of churches, or association of churches described in Section 170(b)(1)(A)(i).
2	☐	A school described in Section 170(b)(1)(A)(ii). (Attach Schedule E)
3	☐	A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H)
4	☐	A medical research organization operated in conjunction with a hospital described in Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
5	☐	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in Section 170(b)(1)(A)(iv). (Complete Part II)
6	☐	A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(v).
7	☒	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in Section 170(b)(1)(A)(vi) (Complete Part II)
8	☐	A community trust described in Section 170(b)(1)(A)(vi) (Complete Part II)
9	☐	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See Section 509(a)(2). (Complete Part III)
10	☐	An organization organized and operated exclusively to test for public safety See Section 509(a)(4). (See instructions)
11	☐	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See Section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a ☐ Type I b ☐ Type II c ☐ Type III - Functionally Integrated d ☐ Type III - Other
e	☐	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f	☐	If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
g	☐	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? (ii) a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above?
h	☐	Provide the following information about the organizations the organization supports

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

Public Support						
Calendar 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 ")	5,717,606	7,768,426	12,189,774	9,122,407	5,239,938	40,038,151
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						
4 Total. Add line 1-3	5,717,606	7,768,426	12,189,774	9,122,407	5,239,938	40,038,151
5 The portion of total contribution by each 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						40,038,151

Total Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	5,717,606	266,161	12,189,774	9,122,407	5,239,938	40,038,151
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	160,969	266,161	386,287	486,310	486,870	1,786,597
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)	66,516	75,665	99,510	39,020	97,119	377,830
11 Total Support (Add lines 7 through 10)						42,202,578
12 Gross receipts from related activities, etc (See instructions)					12	
13 First Five Years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						☒

Computation of Public Support Percentage		
14 Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f))	14	94.870 %
15 Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f	15	95.820 %
16a 33 1/3% Test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☒	
b 33 1/3% Test - 2007. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☐	
17a 10% Facts and Circumstances Test - 2008. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	☐	
b 10% Facts and Circumstances Test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	☐	
18 Private Foundation. If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions	☐	

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total Add lines 1-5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts included on lines 2 and 3 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						
cTotal of lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						

Total Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13Total Support (Add lines 9, 10c, 11 and 12)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Computation of Public Support Percentage			
15	Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	15	
16	Public Support Percentage for 2007 Schedule A, Part IV -A, line 27g	16	

Computation of Investment Income Percentage			
17	Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f))	17	
18	Investment Income Percentage from 2007 Schedule A, Part IV -A, line 27h	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		
b	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		
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. 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 D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2008

Open to Public Inspection

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.

Name of the organization Jewish Community Federation of Greater Rochester NY Inc	Employer identification number 16-0868942
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	97
2	Aggregate Contributions to (during year)	
3	Aggregate Grants from (during year)	
4	Aggregate value at end of year	8,548,594
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Yes No	

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

1	Purpose(s) of conservation easements held by the organization (check all that apply) ☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Preservation of an historically importantly land area ☐ Protection of natural habitat ☐ Preservation of certified historic structure ☐ Preservation of open space										
2	Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year										
	<table><tr><td></td><td>Held at the End of the Year</td></tr><tr><td>a</td><td>Total number of conservation easements</td></tr><tr><td>b</td><td>Total acreage restricted by conservation easements</td></tr><tr><td>c</td><td>Number of conservation easements on a certified historic structure included in (a)</td></tr><tr><td>d</td><td>Number of conservation easements included in (c) acquired after 8/17/06</td></tr></table>		Held at the End of the Year	a	Total number of conservation easements	b	Total acreage restricted by conservation easements	c	Number of conservation easements on a certified historic structure included in (a)	d	Number of conservation easements included in (c) acquired after 8/17/06
	Held at the End of the Year										
a	Total number of conservation easements										
b	Total acreage restricted by conservation easements										
c	Number of conservation easements on a certified historic structure included in (a)										
d	Number of conservation easements included in (c) acquired after 8/17/06										
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ►										
4	Number of states where property subject to conservation easement is located ►										
5	Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Yes No										
6	Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year ►										
7	Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ► \$										
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? Yes No										
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization’s financial statements that describes the organization’s accounting for conservation easements										

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
	(i) Revenues included in Form 990, Part VIII, line 1
	(ii) Assets included in Form 990, Part X
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items
a	Revenues included in Form 990, Part VIII, line 1
b	Assets included in Form 990, Part X

Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes ☐ No

Part IV

Trust, 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 why in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes ☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance	8,539,302			
b	Contributions	201,743			
c	Investment earnings or losses	-1,871,827			
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses	524,680			
g	End of year balance	6,344,538			

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶ 36 000 %

c

Term endowment ▶ 64 000 %

3a

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

(i)

unrelated organizations

(ii)

related organizations

3a(i)

Yes

No

3a(ii)

No

b

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

3b

4

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

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		136,500		136,500
b Buildings		1,623,299	1,130,741	492,558
c Leasehold improvements				
d Equipment		391,458	104,934	286,524
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				915,582

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other Israel Bonds	800,500	C
Other hedge funds	3,505,193	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) ▶	4,305,693	

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		

(a) Description	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15.)	

(a) Description of Liability	(b) Amount
Federal Income Taxes	
Amounts Held for Others	230,240
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	230,240

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	15,830,798
2	Total expenses (Form 990, Part IX, column (A), line 25)	27,320,623
3	Excess or (deficit) for the year Subtract line 2 from line 1	3-1,489,825
4	Net unrealized gains (losses) on investments	4-5,649,037
5	Donated services and use of facilities	5
6	Investment expenses	6-7,135
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	8
9	Total adjustments (net) Add lines 4 - 8	9-5,656,172
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10-7,145,997

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	190,776
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments2a-5,649,239	
b	Donated services and use of facilities2b	
c	Recoveries of prior year grants2c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d2e-5,649,239	
3	Subtract line 2e from line 135,740,015	
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 7b4a	
b	Other (Describe in Part XIV)4b90,783	
c	Add lines 4a and 4b4c90,783	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)55,830,798	

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	17,236,773
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities2a-202	
b	Prior year adjustments2b	
c	Losses reported on Form 990, Part IX, line 252c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d2e-202	
3	Subtract line 2e from line 137,236,975	
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 7b4a-7,135	
b	Other (Describe in Part XIV)4b90,783	
c	Add lines 4a and 4b4c83,648	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)57,320,623	

Part XIVSupplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation
Part XII, Line 4 b - Other Adjustments		Loss on pledge receivable 90783
Part XIII, Line 4 b - Other Adjustments		Loss on pledge receivable 90783
		Part XII, Line 4 b - Loss on pledge receivable Part XIII, Line 4 b - Loss on pledge receivable

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
Jewish Community Federation of Greater
Rochester NY Inc

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

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

OMB No 1545-0047

2008

Open to Public
Inspection

Employer identification number
16-0868942

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" on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 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
See Additional Data Table							

- 2

Enter total number of section 501(c)(3) and government organizations

34
- 3

Enter total number of other organizations

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)Amount of cash grant	(d)Amount of non-cash assistance	(e) Method of valuation (book, FMV , appraisal, other)	(f)Description of non-cash assistance

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

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 Grants are given to tax exempt organizations in the United States after careful review of their activities by members of the board and certain committee members

Software ID:
Software Version:
EIN: 16-0868942
Name: Jewish Community Federation of Greater
Rochester NY Inc

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Associated Jewish Charities 7607 Old York Road Melrose Park, PA 19027	52-6024192		96,481				General purposes
Auerbach Central Agency 604 Harper Drive Jenkintown, PA 19046	13-1628141		12,000				For the OROT program
Cancer Wellness Spa of Greater Rochester 240 Kilbourn Road Rochester, NY 14618	20-5542461		6,500				For general purposes
Chabad Lubavitch 1037 Winton Road South Rochester, NY 14618	11-2608573		6,318				For general purposes and to help pay for funeral expenses for an indigent woman
Cornell University 203 Day Hall Ithaca, NY 14853	15-0532082		6,200				For general purposes
Degel Israel Cemetary 427 Harris Drive Watertown, NY 13601	16-0868942		35,000				For perpetual care of the cemetary
Foundation Jewish Community 441 East Avenue Rochester, NY 14607			20,433				For general purposes
Garth Fagan Dance 50 Chestnut Street Rochester, NY 14604	23-7276763		5,000				For general purposes
Geva Theater 75 Woodbury Boulevard Rochester, NY 14607	23-7202906		7,600				For general purposes
Hillel Community Day School 191 Fairfield Drive Rochester, NY 14620	16-0743038		9,179				For general purposes

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Hillel of Rochester Area College600 Wilson Boulevard Rochester, NY 14627	43-1977667		37,800				For general purposes
Jewish Community Center1200 Edgewood Avenue Rochester, NY 14618	16-0743060		64,850				For general purposes, to support a book festival, and to support a camp on Seneca Lake
Jewish Community Federation441 East Avenue Rochester, NY 14607	16-0868942		14,599				For general purposes
Jewish Family Service441 East Avenue rochester, NY 14607	16-0743059		60,961				For general purposes
Jewish Home Foundation2021 Winton Road South Rochester, NY 14618	16-0743058		17,272				For general purposes
Memorial Art Gallery500 University Avenue rochester, NY 14607	16-0743209		10,000				For general purposes
Metropolitan Life Insurance Company13045 Tesson Ferry Road St Louis, MO 63128	13-5581829		8,975				For general purposes
Multiple Scleroris Research Institute3550 General Atomics Court San Diego, CA 92121	33-0319501		5,000				For laboratory development
National Museum of American1000 Jefferson Drive washington, DC 20560	53-0206027		5,000				For general purposes
National Ramah Commission3080 Broadway new york, NY 10027	13-6161110		7,000				For support of Camp Ramah

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
New Orleans Hillel912 Broadway new orleans, LA 70118	72-6031116		5,594				For general purposes
Rochester Area Community Foundation500 East Avenue rochester, NY 14607	23-7250641		26,292				For general purposes
Rochester General Hospital Foundation1299 Portland Avenue rochester, NY 14621	16-1455909		12,600				For general purposes and support of the Lipson Cancer & Blood Center
Rochester Oratorio Society1050 east avenue rochester, NY 14607	16-6052456		15,000				For marketing and development ventures
Rochester Philharmonic Orchestra108 East Avenue rochester, NY 14604	16-0765613		16,050				For general purposes
Temple Beth El139 winton road south rochester, NY 14610	16-0773643		130,178				For general purposes
Temple B'rith Kodesh2131 elmwood avenue rochester, NY 14618	16-0743199		11,060				For general purposes
Temple Sinai363 Penfield Road rochester, NY 14625	16-0846079		6,800				For general purposes
The Nature Conservatory1048 University Avenue rochester, NY 14607	53-0242652		25,000				For a migratory bird project
UJA Federation441 East Avenue rochester, NY 14607	16-0868942		1,394,555				For general campaign

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
United Israel Appeal Inc Wall street station PO Box 157 new york, NY 10268	13-1760102		5,500				For the annual campaign
United Way75 College Avenue Rochester, NY 14607	16-1015782		13,232				For the annual campaign
University of Rochester 300 Wilson Boulevard Rochester, NY 14627	16-0743209		22,125				For the tuition-free "Sara Fund"
WXXI280 state street rochester, NY 14603	16-0838086		14,850				For general purposes

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2008

Open to Public Inspection

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.

Name of the organization Jewish Community Federation of Greater Rochester NY Inc	Employer identification number 16-0868942
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Part I

Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	
3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☒ Compensation committee ☐ Independent compensation consultant ☒ Form 990 of other organizations ☐ Written employment contract ☐ Compensation survey or study ☒ Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a		
a Receive a severance payment or change of control payment?	4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.		
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	No
b Any related organization?	5b	No
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	No
b Any related organization?	6b	No
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	No
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 Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No

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 compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
Mr Lawrence Fine	(i)	251,992				37,553	289,545	
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Non-Cash Contributions

To be completed by organizations that answered
"Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Jewish Community Federation of Greater
Rochester NY Inc

Employer identification number

16-0868942

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
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	X	1	119,580	Fair market value
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other)				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (describe _____)				
26 Other (describe _____)				
27 Other (describe _____)				
28 Other (describe _____)				
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	

	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?		No
b If "Yes", describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?		No
b If "Yes", describe in Part II		
33 If the organization did not report revenues in Column (c) for a type of property for which Column (a) is checked, describe in Part II		

[illegible]

SCHEDULE O
(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.**

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

Jewish Community Federation of Greater Rochester NY Inc

Employer identification number

16-0868942

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	Planning and budgeting - Social research and planning fact finding and intra-agency cooperation and coordination Expenses \$ 812226 including grants of \$ 0 Revenue \$ 0

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	Center for Holocaust aw areness

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	Community relations

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	Human resource development

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	Women's division

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	IsrAEI

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	Young leadership division P2K

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		Certain directors of the board are members of the same family and others are employees of the same company

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		THE FORM 990 IS REVIEWED BY SELECT MEMBERS OF THE FINANCE COMMITTEE AND MADE AVAILABLE TO BOARD MEMBERS PRIOR TO ITS FILING

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		a CONFLICT OF INTEREST statement IS PREPARED ANNUALLY BY EACH MEMBER AND REVIEWED BY THE PRESIDENT OF THE BOARD and the executive director

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		Compensation of the executive director is determined by a special subcommittee of the executive committee and the personnel committee chairperson meeting on an annual basis

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		INFORMATION REGARDING THE JEWISH COMMUNITY FEDERATION IS AVAILABLE UPON REQUEST at THE ADMINISTRATIVE OFFICES

Identifier	Return Reference	Explanation
part viii, statement of revenue	line 7a gross amount of sales of assets other than inventory	amount reflected in line 7b is net realized gain and loss on sale of investments from multiple transactions Gross numbers are not readily available for this reporting purpose

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ 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.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
Jewish Community Federation of Greater Rochester NY Inc

Employer identification number
16-0868942

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 Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
See Additional Data Table					

Part III

Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income(related, investment, unrelated)	(F) Share of total income	(G) Share of end-of- year assets	(H) Disproporionate allocations?		(I) Code V—UBI amount on Box 20 of K-1	(J) General or managing partner?	
							Yes	No		Yes	No

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership

Part V

Transactions with Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds		
(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1) The Binik-Lewinger Supporting Foundation	C	100,000
(2) The Braitman Supporting Foundation	C	57,000
(3) The Futerman Supporting Foundation	C	178,225
(4) The Brodksy Grossman Supporting Foundation	C	100,000
(5) The Kozel Supporting Foundation	C	55,000
(6)		

Schedule R (Form 990) 2008

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.

[illegible]

Software ID:

Software Version:

EIN: 16-0868942

Name: Jewish Community Federation of Greater Rochester NY Inc

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal Domicile (State or Foreign Country)	(D) Exempt Code section	(E) Public charity status (if 501(c)(3))	(F) Direct Controlling Entity
Michael S Rosen Foundation 441 East Ave rochester, NY14617 16-1489035	Grantmaking	NY	501(c)(3)	11a	Jewish Community Federation of Greater Rochester
Simon and Josephine Braitman Family Supporting Foundation 441 East Ave rochester, NY14617 16-1613897	grantmaking	NY	501(c)(3)	11a	jewish Community Federation of Greater Rochester
Binik-Lewinger Supporting Foundation 441 East Ave rochester, NY14617 16-1331066	grantmaking	NY	501(c)(3)	11a	jewish Community Federation of Greater Rochester
Jewish War Veterans of USA Memorial Foundation 441 East Ave rochester, NY14617 16-1363822	grantmaking	NY	501(c)(3)	11a	jewish Community Federation of Greater Rochester
The Gutkin Family Foundation 441 East Ave rochester, NY14617 16-1493549	grantmaking	NY	501(c)(3)	11a	jewish Community Federation of Greater Rochester
Ann Lib and Bernard Kozel Family Foundation 441 East Ave rochester, NY14617 16-1511792	grantmaking	NY	501(c)(3)	11a	jewish Community Federation of Greater Rochester
Brodsky Grossman Supporting Foundation Inc 441 East Ave rochester, NY14617 16-1511860	grantmaking	NY	501(c)(3)	11a	jewish Community Federation of Greater Rochester
Futerman Supporting Foundation Inc 441 East Ave rochester, NY14617 16-1512426	grantmaking	NY	501(c)(3)	11a	jewish Community Federation of Greater Rochester
Cortland & Ella Brovitz Foundation 441 East Ave rochester, NY14617 20-5392391	grantmaking	NY	501(c)(3)	11a	jewish Community Federation of Greater Rochester
Sharon and Neil Norry Family 441 East Ave rochester, NY14617 20-5948486	grantmaking	NY	501(c)(3)	11a	jewish Community Federation of Greater Rochester
Sara and Morton Brodsky Family Foundation 441 East Ave rochester, NY14617 22-3265035	grantmaking	NY	501(c)(3)	11a	jewish Community Federation of Greater Rochester

Additional Data

Software ID:

Software Version:

EIN: 16-0868942

Name: Jewish Community Federation of Greater Rochester NY Inc

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W- 2/1099MISC)	(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				
DR PETER ADELSTEIN , BOARD OF GOVERNORS	50	X						0	0	0	
Mrs Etta Atkin , BOARD OF GOVERNORS	50	X						0	0	0	
Mr Reuben Auspitz , Director	50	X						0	0	0	
Ms Marilyn Berman , director	50	X						0	0	0	
Dr Ricki Birnbaum , Director	50	X						0	0	0	
Mrs Roberta Borg , BOARD OF GOVERNORS	50	X						0	0	0	
Mr Simon Braitman , BOARD OF GOVERNORS	50	X						0	0	0	
Mr Eric S Brandt , director	50	X						0	0	0	
Mr Daan Braveman , Director	50	X						0	0	0	
Mrs Beth Bruner , Director	50	X						0	0	0	
Mr David Clar , Director	50	X						0	0	0	
Ms Donna Cohen , Director	50	X						0	0	0	
Ms Leslie Crane , VICE PRESIDENT	50	X						0	0	0	
Mr Jerry Elman , director	50	X						0	0	0	
Mr Jack Erdle , BOARD OF GOVERNORS	50	X						0	0	0	
Mr Harold Feinbloom , BOARD OF GOVERNORS	50	X						0	0	0	
Mr David Feldman , director	50	X						0	0	0	
Mrs Blanche Fenster , Secretary	50	X		X				0	0	0	
Rabbi Matthew Field , Director	50	X						0	0	0	
Dr Jacob Finkelstein , Director	50	X						0	0	0	
Mr Asher Flaum , Director	50	X						0	0	0	
Dr Deborah Friedman , Assistant Secretary	50	X						0	0	0	
Mr Ronald Furman , Director	50	X						0	0	0	
Ms Daphne Futerman , director	50	X						0	0	0	
Mr Eli N Futerman , director	50	X						0	0	0	
Mr Steven Gersz , Director	50	X						0	0	0	
Mr Laurence Glazer , Director	50	X						0	0	0	
Ms Rachel Glazer , Director	50	X						0	0	0	
Dr Daniel Glowinsky , director	50	X						0	0	0	
Mr Paul Goldberg , BOARD OF GOVERNORS	50	X						0	0	0	

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W- 2/1099MISC)	(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				
Mr Jerry Goldman , VICE PRESIDENT	50	X		X				0	0	0	
Mr John L Goldman , BOARD OF GOVERNORS	50	X						0	0	0	
Mr Richard Goldstein , Assistant Treasurer	50	X		X				0	0	0	
Mr Burton Gordon , BOARD OF GOVERNORS	50	X						0	0	0	
Mr Robert Gordon , BOARD OF GOVERNORS	50	X						0	0	0	
Mr F Kenneth Greene , Director	50	X						0	0	0	
Ms Eileen B Grossman , BOARD OF GOVERNORS	50	X						0	0	0	
Mr Howard J Grossman , Director	50	X						0	0	0	
Mr Michael D Grossman , VICE PRESIDENT	50	X		X				0	0	0	
Mrs Rochelle Gutkin , BOARD OF GOVERNORS	50	X						0	0	0	
Mr Marc Haas , Director	50	X						0	0	0	
Mr Frank Hagelberg , Director	50	X						0	0	0	
Ms Helen Hecker , BOARD OF GOVERNORS	50	X						0	0	0	
Mr Warren Heilbronner , BOARD OF GOVERNORS	50	X						0	0	0	
Ms Carol Hirsh , Director	50	X						0	0	0	
Ms Harriette Howitt , director	50	X						0	0	0	
Ms Wendy Howitt , Director	50	X						0	0	0	
Mr Dennis Kessler , President	50	X		X				0	0	0	
Mr Alan Kinel , Director	50	X						0	0	0	
Mr David Klein , director	50	X						0	0	0	
Mr Burton Kleinman , Director	50	X						0	0	0	
Mr Arnold Klinsky , director	50	X						0	0	0	
Mrs Mona Friedman Kolko , Director	50	X						0	0	0	
Mr Howard Konar , VICE PRESIDENT	50	X		X				0	0	0	
Mrs Sheila Konar , Director	50	X						0	0	0	
Mr William B Konar , BOARD OF GOVERNORS	50	X						0	0	0	
Ms Susan Kramarsky , Director	50	X						0	0	0	
Mr Merwyn M Kroll , BOARD OF GOVERNORS	50	X						0	0	0	
Mrs Deborah GLandsman , Director	50	X		X				0	0	0	
Mr Elliott Landsman , BOARD OF GOVERNORS	50	X						0	0	0	

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099MISC)	(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			
Mr William Levine , BOARD OF GOVERNORS	50	X						0	0	0
Dr Steven Levinson , Director	50	X						0	0	0
Mr David Luxenberg , VICE PRESIDENT	50	X						0	0	0
Mr Richard Markus , director	50	X						0	0	0
Mr Charles Mills , Director	50	X						0	0	0
Mr Lee Moss , Director	50	X						0	0	0
Mr Bruce Newman , Director	50	X						0	0	0
Mr Lewis Norry , Treasurer	50	X		X				0	0	0
Mr Beryl Nusbaum , BOARD OF GOVERNORS	50	X						0	0	0
Ms Carolyn Nussbaum , Director	50	X						0	0	0
Ms Barbara Orenstein Pr , Director	50	X						0	0	0
Mr Ruvin Prokupets , Director	50	X						0	0	0
Mr Nathan Robfogel , BOARD OF GOVERNORS	50	X						0	0	0
Mr Jerald Rotenberg , BOARD OF GOVERNORS	50	X						0	0	0
Mr Irving Ruderman , BOARD OF GOVERNORS	50	X						0	0	0
Mr Steven Schwartz , Director	50	X						0	0	0
Dr Morris Shapiro , BOARD OF GOVERNORS	50	X						0	0	0
Mr Justin Vigdor , Director	50	X						0	0	0
Mr Ronald Von Perlstein , Director	50	X						0	0	0
Dr Eric Weinberg , Director	50	X						0	0	0
Mr Seymour Weinstein , BOARD OF GOVERNORS	50	X						0	0	0
Ms Linda Cornell Weinst , BOARD OF GOVERNORS	50	X						0	0	0
Dr Ronald Wexler , Director	50	X						0	0	0
Ms Lorraine P Wolch , director	50	X						0	0	0
Mr Marvin Wolk , Director	50	X						0	0	0
Mrs BJ Yudelson , VICE PRESIDENT	50	X						0	0	0
Dr Maurice Zauderer , director	50	X						0	0	0
Ms Deborah Zeger , Director	50	X						0	0	0
Mr Jay birnbaum , BOARD OF GOVERNORS	50	X						0	0	0
Mr Lawrence Fine , EXECUTIVE DIRECTOR	37 50			X				251,992	0	37,553

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099MISC)	(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			
Jeanine Vendetta , Chief Financial Officer	37 50			X				81,315	0	12,554
Jay Podolsky , Assistant Executive Dire	37 50					X		108,796	0	12,830
Judith Azoff , Assistant Executive Dire	37 50					X		102,247	0	13,846

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

THE MISSION OF THE JEWISH COMMUNITY FEDERATION OF GREATER ROCHESTER IS TO ENRICH THE QUALITY OF LIFE FOR JEWS IN ROCHESTER, ISRAEL AND AROUND THE WORLD. THE FEDERATION MEETS THIS GOAL THROUGH FINANCIAL RESOURCE DEVELOPMENT, PLANNING, EDUCATION, COMMUNITY RELATIONS, AND VOLUNTEER RECRUITMENT AND TRAINING. THE FEDERATION CONVENES IN AGENCIES, SYNAGOGUES, AND ORGANIZATIONS TO ADDRESS ISSUES OF COMMON CONCERN. TOGETHER, WE TRANSFORM JEWISH TRADITION AND VALUES INTO ACTION.