

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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)

Department of the Treasury Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements.

A F	or the	2008 calendar year, or tax year beginning $AUG\ 1$ , $2008$ and ending	JUL 31, 20	09
Вс	hack if pplicable	Pitesse C Name of organization use IRS	D Employer ide	ntification number
Г	_Addres			
<b>a</b>	Name	type. D. D. J.	20	-1494208
	Initial rotum	See Number and detect for P.O. how if mail is not delivered to street addre	<sup>1</sup> E Telephone nur	
	Termin ation	instruc-	(8	45) 426-0234
	Amend	City or town, state or country, and Zir + 4	G Gross receipts \$	224,115.
L	Application pendin	MONSEY, NY 10952	H(a) Is this a grou	up return
	,	F Name and address of principal officer: ELITEREN HERBROWITE	for affiliates	
		9 EASTVIEW ROAD, MONSEY, NY 10952  mpt status:		s included? Yes No
		empt status:	H(c) Group exem	•
				4 M State of legal domicile NY
	irt I	Summary		
	1	Briefly describe the organization's mission or most significant activities: TO PROVI	DE FUNDS TO	INDIVIDUALS
Activities & Governance		AND ORGANIZATIONS THAT SUPPORT THE ORTHODOX	JEWISH FAIT	н.
ern	1	Check this box 🕨 📖 if the organization discontinued its operations or disposed of n	nore than 25% of Its a	
Š		Number of voting members of the governing body (Part VI, line 1a)		3 3
×		Number of independent voting members of the governing body (Part VI, line 1b)	•	5 0
ž.		Total number of employees (Part V, line 2a)		6 0
₹.		Total number of volunteers (estimate if necessary)  Total gross unrelated business revenue from Part VIII, line 12, column (C)		7a 0.
Ş		Net unrelated business taxable income from Form 990-T, line 34		7b 0.
	B	TR9 Residence Dusiness taxable income non rom soot, into see	Prior Year	Current Year
_	8		203,86	
Revenue		Contributions and grants (Part VIII, line 1h)  Program service revenue (Part VIII, line 2g)  06 12 1 2012		
eve		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	203,86	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1·3)	248,00	0. 124,843.
		Benefits paid to or for members (Part IX, column (A), line 4)		
8	15	Salarles, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
eus	16a	Professional fundraising fees (Part IX, column (A), line 11e)	CAN 22 22 22 22 22 22 22 22 22 22 22 22 22	
Expenses	Þ	Total fundraising expenses (Part IX, column (D), line 25)	2,44	8. 2,536.
	117	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	250,44	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column Straine 36E UNIT	<46,58	
38		Revenue less expenses. Subtract line 18 from line 12 RECEIVED	Beginning of Yea	
38	20	Total assets (Part X, line 16)	5,27	
89	21	Total liabilities (Part X, line 16)  Total liabilities (Part X, line 26)		
Fund Balanc	22	Net assets or fund balances. Subtract line 21 from line 20	5,27	3. 102,009.
P.	art II	Signature Block		
		Under penalities of penury, I declare that I have examined this return, including accompanying streetliks and statem and complete paragraphic opportunity of the statem and complete paragraphic (other than officer) is based on all information of which preparer has any knowledge.	ents, and to the best of my kn edge	owledge and belief, it is true, correct,
		9101 HeO DV	1 60	-71/12
Sig	n	State of the state	Date	2110
ler	æ	Signature of officer  DITERED HEREVOLUTOR TRAILERE	5610	
		ELIEZER HERSKOWITZ, TRUSTEE  Type or print name and title		
		Propagation Date		reparer's identifying number
Paid	đ	signature Sam Martista 02/08/12	self- employed > [ ]	seė instructions)
	parer's	Firm's name (or LAWRENCE BROWN & CO.	EIN >	
USB	Only	self-employed). 180 PHILLIPS HILL ROAD - SUITE 3A		
		NEW CITY, NY 10956	Phone no	► 845-638-1001
May	y the II	RS discuss this return with the preparer shown above? (see instructions)		X Yes No
8320	001 12-1	8-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate	instructions.	Form <b>990</b> (2008)

5N4 3

Part IV Checklist of	of Required Schedules		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
-	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Х
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	ĺ		
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	<u> </u>	X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	ł	}	
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	ļ	X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11		X
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			Х
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		X
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	140		- 21
ь	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		Х
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			
15	located outside the United States? If "Yes." complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		Х
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		Х
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	<u> </u>	X
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	ļ	X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	ļ	Х
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.		1	١.,
	If "No", go to question 25	24a	<del></del>	X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<b></b>	<del> </del>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
_	any tax-exempt bonds?	24c	ļ	<del> </del>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
208	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
L	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a	200		<del>  ^</del> `
D	pnor year? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified		<del> </del>	<del>                                     </del>
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			Ť
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	1	X
			000	(0000)

Form 990 (2008) LIMUDEI DA'AS, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		1	
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	ļ	X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			1
	If "Yes," complete Schedule R, Part V, line 2	35	ļ	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	İ		
	If "Yes," complete Schedule R, Part V, line 2	36	ļ	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
		Form	agn	(2008)

LIMUDEI DA'AS, INC. 20-1494208 Form 990 (2008) Page 5 Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 0 U.S. Information Returns. Enter -0- if not applicable 1a 0 1b b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 0 2a filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? За 3ь b if "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country: 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 Х **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited 5с Tax Shelter Transaction? X 6a Did the organization solicit any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 7 a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 7a Х 7b b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7c d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7е benefit contract? 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7<u>g</u> 7h h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 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 8 excess business holdings at any time during the year? Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.

**b** Did the organization make a distribution to a donor, donor advisor, or related person?

Section 501(c)(7) organizations. Enter: N/A 10 a Initiation fees and capital contributions included on Part VIII, line 12

a Did the organization make any taxable distributions under section 4966?

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

Section 501(c)(12) organizations. Enter: N/A

Gross income from members or shareholders

b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Fo b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

	10b			
	11a			
	11b			
rm	1041	<b>?</b>	12a	X
	12b	0.		

10a

Form 990 (2008)

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Form 990 (2008) LIMUDE I DA'AS, INC. 20-1494208 Pa

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

Sec	tion A. Governing Body and Management		·	
			Yes	No
	For each "Yes" response to lines 2-7b 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	3		
b	Enter the number of voting members that are independent	<u> </u>		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		_X_
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		_X_
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6_		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		_X_
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Х	
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		<u> X</u>
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	ļ	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14	<u> </u>	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:			
а	The organization's CEO, Executive Director, or top management official?	15a		X
b	Other officers or key employees of the organization?	15b		X
	Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a	ļ	X
b	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		
Sec	tion 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 Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) availab	e for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19		and fina	ancial	
19	Own website Another's website X Upon request	and fina	ancial	
19 20	Own website Another's website X Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, statements available to the public.  State the name, physical address, and telephone number of the person who possesses the books and records of the organization.			
	Own website Another's website X Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, statements available to the public.			

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, 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.

(A) Name and Title	(B) Average hours per	(cl	(C) Position (check all that app		on		e, or key employee. (D)  Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	week	Individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
ELIEZER HERSKOWITZ	4.00							0.	0.	0.
TRUSTEE RABBI YERACHMIEL CENSOR	4.00			-		$\vdash$		<u>.</u>	•	•
TRUSTEE	1.00							0.	0.	0.
BORUCH DOV UNGARISCHER	·								0.	
TRUSTEE	1.00			1	-	╁┈		0.	0.	0.
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	(A)	(B)			(C	<b>)</b>			(D)	(E)	(F) Estimated		
Na	me and title	Average hours			Post all 1		арр	ly)	Reportable compensation from	Reportable compensatio from related		amo	nated unt of ther
		per week	Individual trustee or director	Institutional trustee	Officer	Кеу етріоуее	Highest compensated emolowee	Former	the organization (W-2/1099-MISC)	organization: (W-2/1099-MIS	3	compe fron organ and r	ensation in the nization related izations
											-		
				-		-	ļ					·	<del></del>
				İ				-					
1b Total			<u> </u>	1	1	l	<u> </u>	1	0.		0.		0.
	of individuals (including those from the organization	se in 1a) who re	ecelv	ed r	nore	tha	an \$	100,	000 in reportable		<u> </u>		( res   No
line 1a? If "Ye	ization list any <b>former</b> office es," complete Schedule J for	such individua	1									3	х
and related o	dual listed on line 1a, is the s rganizations greater than \$15 on listed on line 1a receive or	50,000? If "Yes	s," co	ompi	lete	Sch	edu	le J	for such individual			4	Х
the organizati	ion? If "Yes," complete Sche											5	X
	endent Contractors s table for your five highest conn. NONE	compensated in	ndep	end	ent o	cont	tract	ors	that received more than	\$100,000 of cor	npens	ation fro	mc
	(A) Name and busines	ss address						_	(B) Description of	services		(C) Compens	
								_					
					_								
2 Total number from the orga	of independent contractors	(including the	se in	1) w	/ho r	ece	eivec	l mo	re than \$100,000 in cor	npensation	••••		<del></del>
irom the orga	Incation -				-				· · · · · · · · · · · · · · · · · · ·		<u> </u>	Form 9	90 (2008

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete columns (B), (C), and (D)

	All other organizations must comp	siete column (A) but are	not required to compr		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	124,843.	124,843.		***************************************
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
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				- <del></del>
8	Pension plan contributions (include section 401(k)		i		
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal	2,400.		2,400.	
c	Accounting				· · · · · · · · · · · · · · · · · · ·
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
9	Other				
12	Advertising and promotion				<del></del>
13	Office expenses			.,,	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				1
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		<del></del>		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
а	BANK CHARGES	136.		136.	
b					
С					
d					
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	127,379.	124,843.	2,536.	0.
26	Joint Costs. Check here ▶ ☐ 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				

			(A) Beginning of year		( <b>B)</b> End of y	year	
	1	Cash - non-interest-bearing	5,273.	1	102	2,0	09.
	2	Savings and temporary cash investments		2			
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net		4			
	5	Receivables from current and former officers, directors, truste	es, key				
		employees, or other related parties. Complete Part II of Sched		5			
	6	Receivables from other disqualified persons (as defined under				,	
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Co					
		Part II of Schedule L		6			
γı	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
As	9	Prepaid expenses and deferred charges		9			
	10a				erenon		
		Less: accumulated depreciation. Complete					
		Part VI of Schedule D		10c			
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line 11		12			
	13	Investments - program-related. See Part IV, line 11		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equal line 34)	5,273.	16	10:	2,0	09.
	17	Accounts payable and accrued expenses		17			
	18	Grants payable		18			
	19	Deferred revenue		19		•	
	20	Tax-exempt bond liabilities		20			
Š	21	Escrow account liability. Complete Part IV of Schedule D		21			
Liabilities	22	Payables to current and former officers, directors, trustees, ke	ey employees,				
abi		highest compensated employees, and disqualified persons. C	Complete Part II				
		of Schedule L		22			
	23	Secured mortgages and notes payable to unrelated third part	ties	23			
	24	Unsecured notes and loans payable		24			
	25	Other liabilities Complete Part X of Schedule D		25			
	26	Total liabilities. Add lines 17 through 25	0.	26			0.
		Organizations that follow SFAS 117, check here	and complete				
es		lines 27 through 29, and lines 33 and 34.					
al C	27	Unrestricted net assets		27			
3al	28	Temporarily restricted net assets		28			
힏	29	Permanently restricted net assets		29		·····	
Net Assets or Fund Balanc		Organizations that do not follow SFAS 117, check here	► X and				
ō		complete lines 30 through 34.					•
ets	30	Capital stock or trust principal, or current funds	0.	30			0.
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	10		0.
ĕ	32	Retained earnings, endowment, accumulated income, or other		32		2,0	
~	33	Total net assets or fund balances	5,273.	33		2,0 2,0	09.
	34 Total liabilities and net assets/fund balances 5, 273. 34						
Pa	t XI	Financial Statements and Reporting				Vaa	Na
		TT.			,	Yes	No
1		ounting method used to prepare the Form 990: X Cash	Accrual Other			7,	į
		e the organization's financial statements compiled or reviewed l			2a	<u>X</u>	1,
		the organization's financial statements audited by an indepen			2b		X
С		If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,					
_		w, or compilation of its financial statements and selection of an	•		2c		X
Зa		result of a federal award, was the organization required to under	ergo an audit or audits as set forth in the Sing	jie Audit			v
		and OMB Circular A-133?			3a		X
D	IT TYE	es." did the organization undergo the required audit or audits?			3b		1

#### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

**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

Open to Public Inspection

**Employer identification number** Name of the organization 20-1494208 LIMUDEI DA'AS, INC. Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is. (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) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state: 5 l 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) 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 the Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 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. d Type III · Other \_ Type I \_\_ Type II c Type III - Functionally integrated 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). 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? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? 11g(i) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the organizations the organization supports. h (iii) Type of (iv) Is the organization (v) Did you notify the (vi) Is the (i) Name of supported (II) EIN (vii) Amount of organization organization in col in col (I) listed in your organization in col organization support (i) organized in the US? (described on lines 1-9 governing document? (i) of your support? above or IRC section No Yes (see instructions)) Yes No Yes No

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

Schedule A (Form 990 or 990-EZ) 2008

Total

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.) Section A. Public Support (c) 2006(d) 2007 (e) 2008 (f) Total Calendar year (or fiscal year beginning in) (a) 2004 **(b)** 2005 1 Gifts, grants, contributions, and membership fees received. (Do not 214,372. 444,800. 203,860. 224,115. 231,150. 1318297. include any "unusual grants.") 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 214,372. 444,800. 203,860. 224,115. 231,150. 4 Total. Add lines 1 - 3 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) 1318297. 6 Public Support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in)▶ (a) 2004 (b) 2005 (c) 2006(d) 2007 (e) 2008 (f) Total 214,372. 203,860. 224,115. 231,150 444,800. 1318297. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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.) 1318297. 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 100.00 14 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 100.00 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 16a 33 1/3% support 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  $ightharpoons \overline{X}$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 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

Schedule A (Form 990 or 990-EZ) 2008

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Calendar year (or fiscal year teginning in)   (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total or first year teginning fees received. (Do not include any Tunusual grants.)  Gross receipts from admissions, merchandles sold or services person and an unrelated trade or business and an unrelated trade or business and 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 unrelated trade or business furnished by a governmental unit to the organization without charge (a) 2007 (e) 2008 (f) 2007 (e) 2008 (f) Total 3 (e) 2004 (f) 2007 (e) 2008 (f) Total 4 (e) 2004 (f) 2007 (e) 2008 (f) Total 5 (e) 2006 (f) 2007 (e) 2008 (f) 2006 (f) 2007 (e) 2008 (f) 2006 (f) 2006 (f) 2007 (e) 2008 (f) 2006 (f) 2006 (f) 2006 (f) 2006 (f) 2006 (f) 2006 (f) 2006 (f) 2006 (f) 2006 (f) 2006 (f) 2006 (f) 2006 (f) 2006 (f) 2006 (f) 2006		rt 朋   Support Schedule for C tion A. Public Support	rganizations	Described in	Section 509(a	//2/ (Complete only	If you ch	ecked the box	on line 9 of Part i
1 Gafte, grants, contributions, and membership fees received. (Do not include any *unusual grants*) 2 Gross receipts from admissions, merchandrise sold or services performed, or facilities furnished in any activity that is related to the organization's tian-section for the organization's transcription of the program of			(-) 0004	(h) 2005	(-) 0006	(-A 0007	(-)	2000	<b>40</b> Takal
membership fees received. (Do not include any runusual grants 1-) 2. Gross receipts from admissions, membrandles edulor services part formed, 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 brus incess under section 513 4. Tax revenues leved for the organization's benefit and either part to or expended on its behalf 5. The value of services or facilities furnished by a governmental unit to the organization's benefit and either part to or expended on its behalf 6. Total. Add lines 1 - 5. 6. The value of services or facilities furnished by a governmental unit to the organization without charge 6. Total. Add lines 1 - 5. 7. A mounts included on lines 1, 2, and 3. received from disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode than disqualified persons between the mode of the disqualified persons between the mode of the disqualified persons between the mode of the disqualified persons between the mode of the disqualified persons between the mode of the disqualified persons between the mode of the disqualified persons between the mode of the disqualified persons between the mode of the disqualified persons between the mode of the disqualified persons bet		- · · · · · · · · · · · · · · · · · · ·	(a) 2004	(6) 2005	(c) 2006	(a) 2007	(e)	2008	(i) i otai
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merchandisis sold or services performed, refailtes furnished in any activity that its related to the organization is backwampt purpose.  3. Gross receipts from activities that are not an unrelated trace or business under section 513  4. Tax revenues leveld for the organization's benefit and either paid to or expended on its behalf.  5. The value of services or facilities furnished by a governmental unit to the organization without charge.  6. Total. Add lines 1 - 5.  7. A mounts included on lines 1, 2, and 3 received from disqualified persons.  9. Amounts included on lines 1, 2, and 3. Increased the greate of 1 to the stad of lines 8, 10, 11, and 25 for the year of 3,000.  Add lines 7a and 7b.  9. Anounts from line Support  Cellendar year (or fiscall year beginning in)   (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total of Gross income from infrarest, dividends, payments received on securities loans, rents, royalbee and income from infinial recurses 11 taxes 11 taxes 11 taxes 11 taxes 12 taxes 12 taxes 13 taxes 14 tax			<del></del>				╂	_	
are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 - 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons by Amounts microbid persons by Amounts microbid persons by Amounts microbid persons had exceed the grade of the second throughout on lines 2 and 7 brains of the second throughout of throughout of the second throughout of the second throughout of the second th	2	merchandise sold or services per- formed, or facilities furnished in any activity that is related to the							
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traiton's benefit and either paid to or expended on its behalf  5 The value of services or facilities furnished by a governmental unit to the organization without charge  6 Total. Add lines 1 - 5  7 Amounts included on lines 1, 2, and 3 received interest and intere	4	Tax revenues levied for the organ-							
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trom 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	7a								
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	20	Private foundation. If the organization	on ala not check a	a box on line 14, 1	aa, or 190, check t				

# Schedule D (Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

► 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.

2008
Open to Public Inspection

Name of the organization

LIMUDEI DA'AS, INC.

Employer identification number 20-1494208

Schedule D (Form 990) 2008

Par	Organizations Maintaining Donor Advised		s or Accounts. Complete if the
, 64	organization answered "Yes" to Form 990, Part IV, line		of Modelines Complete in the
	organization answered Tee to Ten edg. Tartity mile	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate contributions to (during year)  Aggregate grants from (during year)		
4	Aggregate value at end of year		
_	Did the organization inform all donors and donor advisors in w	urting that the assets held in donor adv	leed funds
5	are the organization's property, subject to the organization's		Yes No
	Did the organization's property, subject to the organization's e Did the organization inform all grantees, donors, and donor ac		
6	for chantable purposes and not for the benefit of the donor or		
Par			
			Tartiv, into 7.
1	Purpose(s) of conservation easements held by the organization	<del></del> 1	storically important land area
	Preservation of land for public use (e.g., recreation or pl	· —	fied historic structure
	Protection of natural habitat	Freservation of Certi	med historic structure
_	Preservation of open space	anistian contribution in the form of a co	appropriate assessment on the last day
2	Complete lines 2a-2d if the organization held a qualified conse	ervation contribution in the form of a co	inservation easement on the last day
	of the tax year.		Held at the End of the Year
_	Tatal assume or of accompanies accompanies		2a
a	Total number of conservation easements		2b
b	Total acreage restricted by conservation easements	2c	
C	Number of conservation easements on a certified historic stru	2d	
d	Number of conservation easements included in (c) acquired a Number of conservation easements modified, transferred, rele		
3	_	eased, extinguished, or terminated by the	ne organization during the taxable
	year	oment is located	
4	Number of states where property subject to conservation eas Does the organization have a written policy regarding the peri		- and
5	enforcement of the conservation easements it holds?	odic monitoring, inspection, violations,	Yes No
	Staff or volunteer hours devoted to monitoring, inspecting, an	nd enforcing easements during the year	
6 →	Amount of expenses incurred in monitoring, inspecting, and e		
7	Does each conservation easement reported on line 2(d) above		
8		e satisfy the requirements of section 17	Yes No
9	and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation	on assements in its revenue and expen-	
9	include, if applicable, the text of the footnote to the organization		
	conservation easements.	on a maneral statements that describe	o the organization o accounting to
Par	till Organizations Maintaining Collections of	Art. Historical Treasures, or	Other Similar Assets.
• •	Complete if the organization answered "Yes" to Form		
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, ed		
	the footnote to its financial statements that describes these if		
ь	If the organization elected, as permitted under SFAS 116, to		ance sheet works of art, historical treasures.
-	or other similar assets held for public exhibition, education, of		
	these items:	resourch in tarking and or position solve	oo, provide me reneming amount renaming to
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical trea	asures or other similar assets for finance	
~	the following amounts required to be reported under SFAS 1		and bration
	Revenues included in Form 990, Part VIII, line 1	to reading to those items.	<b>▶</b> \$
a	Assets included in Form 990, Part X		► \$ ► \$
þ	Assets illicituded ill Folill 830, Fall A		- V

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

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 at that apply):  a Public exhibition  d Loan or exchange programs  b Scholarly research  e Other  c Preservation for future generations  4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part 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?  Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.													
that apply):  a Public exhibition  b Scholarly research  c Preservation for future generations  4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part 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?  Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 990, Part IV, line 9, or the properties of the organization answered "Yes" to Form 99	II												
a Public exhibition b Scholarly research c Preservation for future generations  4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part 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?  Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or an arrangements.													
b Scholarly research e Other  c Preservation for future generations  4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part 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?  Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or other similar assets.													
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Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or													
	No												
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?	No												
of If "Yes," explain the arrangement in Part XIV and complete the following table:													
Amount													
d Additions during the year  e Distributions during the year  1e													
o blantottono do inig tito your													
a Did the organization include an amount on Form 990, Part X, line 21?  b If "Yes," explain the arrangement in Part XIV.													
Part V Endowment Funds. Complete if 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													
b Contributions													
c Investment earnings or losses	***************************************												
d Grants or scholarships													
	***************************************												
e Other expenditures for facilities and programs													
f Administrative expenses	***************************************												
g End of year balance													
2 Provide the estimated percentage of the year end balance held as:													
a Board designated or quasi-endowment >%													
b Permanent endowment ► %													
c Term endowment ▶ %													
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization													
	s No												
(i) unrelated organizations 3a(i)													
(ii) related organizations													
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?													
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 (b) Cost or other (c) Depreciation (d) Book value													
basis (investment) basis (other)													
1a Land													
b Buildings													
c Leasehold improvements													
d Equipment													
e Other													
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c) )	0.												

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

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### Schedule F (Form 990)

### **Statement of Activities Outside the United States**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, line 15, or line 16.

Open to Public Inspection

Nan	ne of the organization					Employer identi	fication number
r. Ti	MUDEI DA'AS,	INC.				20-149420	08
			ctivities Out	side the United States. Comple	ete if the organ		
	to Form 990, Par	t IV, line 14b.					
1	_			is to substantiate the amount of the gr			) जिल
	grantees' eligibility for th	ne grants or assis	stance, and the s	selection criteria used to award the gra	nts or assistai	nce?	Yes X No
2	For grantmakers. Desc	ribe in Part IV th	e organization's	procedures for monitoring the use of g	rant funds out	side the United St	ates.
3	Activities per Region. (U	se Schedule F-1	(Form 990) if ad	ditional space is needed.)		,	
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	is a pro describe	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures in region
	· · · · · · · · · · · · · · · · · · ·						-
						.,	
							<u> </u>
Tota	als <b>•</b>						

LIMUDEI DA'AS, INC.

Schedule F (Form 990) 2008

Use Schedule F-1 (Form 990) if additional space is needed.

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Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any 20-1494208 recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000

Page 2

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)
			SUPPORT OF THE RELIGIOUS AND EDUCATIONAL	0 70 7	PAYMENT BY	c		
		ALDULE EAST	TASTITUTION ENGAGED	149,045, CRECK	Luper			
2 Enter total number of organizations section 501(c)(3) equivalency letter	organizations that arvialency letter	e recognized as charitie	Enter total number of organizations that are recognized as charties by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	which the grante	e or counsel has pro	wided a		

SEE PART IV FOR COLUMN (D) DESCRIPTIONS 24

Schedule F (Form 990) 2008

3 Enter total number of other organizations or entities

LIMUDEI DA'AS, INC.

Schedule F (Form 990) 2008

Part # Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

Schedule F (Form 990) 2008 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance

25

Schedule F (Form 990) 2008 LIMUDEI DA'AS, INC.	20-1494208	Page 4
Part IV Supplemental Information		
Complete this part to provide the information required by Part I, line 2, and any other additional information	ion.	
PART II, COLUMN (D):		
REGION: MIDDLE EAST		
(D) PURPOSE OF GRANT: SUPPORT OF THE RELIGIOUS AND EDUCATI	ONAL	
INSTITUTION ENGAGED IN BRINGING PERSONS CLOSER TO THE ORTH	ODOX JEWISH	
FAITH.		
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### SCHEDULE O (Form 990)

**Supplemental Information to Form 990** 

(Form 990)

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

2008
Open to Public Inspection

Name of the organization

Employer identification number 20-1494208

			LJ	MUDEI	DA	'AS	, INC	•					<del> </del>	20-	-1494	1208	
FORM	990,	PART	VI,	SECT	ION	Ι Α,	LINE	10:	A S	UMMA	RY	OF A	LL '	TRANS	ACTIO	ONS IS	
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