

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



Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 2008

Open to Public Inspection

		[r, or tax year beginning 09-01-2 C Name of organization	ous and ending US-31-200	צו	D Employer ide	entification number
_	neck if ap dress cha		Please use IRS	MINNEAPOLIS JEWISH FEDERATION			41-069386	
	me chan	inge i	abel or print or	Doing Business As			E Telephone nu	
_	ime cnan itial returi	1	type. See Specific				(952) 593-	2600
_		1	Instruc-	Number and street (or P O box if n 13100 WAYZATA BOULEVARD No 20		ess) Room/suite	G Gross receip	ts \$ 25,365,828
_	mination		tions.					
_	nended re			City or town, state or country, and MINNETONKA, MN 55305	ZIP + 4			
Ap	plication	pending				1		
				ne and address of Principal Offic A FOGELSON	cer		s a group return	
			13100	WAYZATA BOULEVARD No 20	00	affilia	tes?	⊤Yes ▼ No
				TONKA, MN 55305		H(b) Are all	l affiliates include	ed?
[18	ax-exem	pt status	501(c)	(3) ◀ (insert no)	or 52/			See instructions)
J W	eb site	e: ► WWW	/ JEWISH	MINNEAPOLIS ORG		H(c) Grou	p Exemption Nu	mber 🟲
V Tur	oo of ora	anization [Corporati	on trust association other		Voor of Fo	rmation 1943 M	State of legal domicile
X I Y F	be or orga	anization j	• Согрогас	on tusti association other F		L real of ro	MI	-
Pa	rt I	Summ	ary					
	1	Briefly de	scribe the	e organization's mission or mos	t significant activities			
ņ	'	WE BUIL	D СОММ	UNITY, CARE FOR THE WELFA	RE OF JEWS EVERYWHERI	E, & MAXIMIZ	E PARTICIPAT	ION IN JEWISH LIFE
<u>9</u>								
Ξ								
Governance	2	Check th	ıs box 🖵	ıf the organızatıon dıscontınued	its operations or disposed o	of more than 2	5% of its asset	S
	3	Number	of voting n	nembers of the governing body	(Part VI, line 1a)		3 _	31
ණ ග	4	Number	ofindepen	dent voting members of the gov	erning body (Part VI, line 1	b)	. 4 _	31
₽ E	5	Total nun	nber of en	nployees (Part V , line 2a) .			5 _	54
Activities	6	Total nun	nber of vo	lunteers (estimate if necessary)		6 _	783
ă.	7a	Total gro	ss unrelat	ted business revenue from Part	VIII, line 12, column (C)		7a _	0
	ь	Net unrel	ated busi	ness taxable income from Form	990-T, line 34		7b	0
<u>o</u>						Prio	or Year	Current Year
	8			grants (Part VIII, line 1h) .			19,354,969	16,271,782
	9			revenue (Part VIII, line 2g) .			122,075	162,653
Ravenu	10			ne (Part VIII, column (A), lines			3,546,701	-6,056,751
ш.	11		-	art VIII, column (A), lines 5, 60			93,413	119,240
	12	Total re 12)	venue—a	dd Iines 8 through 11 (must equ	ıal Part VIII, column (A), lır	ie	23,117,158	10,496,924
	13	•	and sımıla	r amounts paid (Part IX, colum	n (A), lines 1-3)		17,035,422	11,751,187
	14			r for members (Part IX, column				0
	15	Salaries	, other co	mpensation, employee benefits	(Part IX, column (A), lines	5-		
Expenses		10)					3,246,016	2,426,575
₹	16a			raising fees (Part IX, column (A			21,840	0
五	b			penses, Part IX, column (D), line 25 $\frac{1}{1}$				
	17			Part IX, column (A), lines 11a-			2,747,786	1,286,733
	18			add lines 13–17 (must equal P			23,051,064	15,464,495
. 07	19	Revenue	e less exp	enses Subtract line 18 from lir	ne 12		66,094	-4,967,571
Net Assets or Fund Balances						Beginni	ng of Year	End of Year
94	20	Total as	sets (Par	t X, line 16)			94,273,411	83,623,487
4 B	21	Total lıa	ibilities (P	art X, line 26)			30,235,413	25,118,036
žŽ	22	Net ass	ets or fun	d balances Subtract line 21 fro	m line 20		64,037,998	58,505,451
Pa	rt II	Signa	ture Blo	ock				
				rjury, I declare that I have examined to correct, and complete Declaration of p				
Dles	ase	*****		correct, and complete Declaration of p	reparer (other than officer) is base	1		er has any knowledge
Sigi		IB	<u>*</u> ure of office	r			-07-08	
Her		PAIII S	STEPHENSO!	N CHIEF FINANCIAL OFFICER				
			or print nam					
		Preparer's			Date	Check If	Preparer's PTIN	(See Gen Inst)
^o aid	ı	signature				self- empolyed •		,
	' parer's	Firm's nai	me (or your	rs & LARSONALLEN LLP		omponyou r		
-	Only	ıf self-em	ployed),	· • · · · · · · · · · · · · · · · · · ·	= 200		EIN 🕨	
	•	audress, a	and ZIP + 4		300		Phone no 🕨 (6	512) 376-4500
.4		<u> </u>		MINNEAPOLIS, MN 55402	2 (6		1	Ves ENO
vi a iv	Tha IDC		This ratio	rn wiith the preparer chewa abou	a / /5 aa inctriictions \			ur van I Na

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

1	Briefly describe the organizat	tion's mission			
See A	dditional Data Table				
2	Did the organization unde the prior Form 990 or 99		ogram services during t	the year which were not listed on	┌ Yes ┌ No
	If "Yes," describe these r	new services on Schedu	e O		
3	Did the organization ceas	se conducting or make s	ıgnıfıcant changes ın ho	ow it conducts any program	┌ Yes ┌ No
	If "Yes," describe these o	hanges on Schedule O			
4) organizations and 494	7(a)(1) trusts are requ	's three largest program services ired to report the amount of grant: e reported	
4a	MINNEAPOLIS AREA AS WELL THROUGH ANNUAL AND DIRE	ATION IS A FEDERATED FUNI AS JEWS NATIONALLY, IN ISE CCTED CAMPAIGNS TO PROVI JEWISH COMMUNITY GRANT	AEL, AND OTHER NEEDY JEV DE MONIES FOR BENEFICIAR S ARE MADE TO VARIOUS CH	of \$ 11,751,187) (Revenue : RAMS THAT BENEFIT APPROXIMATELY 33 VS IN OTHER PARTS OF THE WORLD THI Y AGENCIES TO BUILD NEW AND UPGRAE HARITIES THROUGHOUT THE UNITED STA	,000 JEWS IN THE GREATER E FEDERATION RAISES FUNDS DE EXISTING INFRASTRUCTURES IN
4b	(Code) (Expenses \$	including grants	of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants	of \$) (Revenue \$)
4d	Other program services (Expenses \$	•	O) grants of \$) (Revenue \$)
4e	Total program service e	xpenses \$ 12	.,461,977 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		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	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		Νο
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	Yes	
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		Νο
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Νο
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		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If</i> "Yes," complete Schedule F, Part III	16		Νο
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		Νο
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
ь	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		
	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	24u 25a		N o
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
8	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		No
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νο
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? If "Yes," complete Schedule L, Part IV.	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		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>	32		No
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
4	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	Yes	
5	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	Yes	
6	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No

Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal				
	of U.S. Information Returns. Enter -0- if not applicable				
	1a	48			
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0			
_	Did the organization comply with backup withholding rules for reportable payments to vendors and report	able			
·	gaming (gambling) winnings to prize winners?		1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
	Statements filed for the calendar year ending with or within the year covered by this return	54			
ь	If at least one is reported in 2a, did the organization file all required federal employment tax returns?				
_	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.		2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered b	y this	_		NI -
	return?	• • –	3a		N o
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial				
	account)?		4a		Νο
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 a	nd			
_	Financial Accounts.		_		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .		5a		N o
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transacti	on,	5b		N o
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Pro Tax Shelter Transaction?	hibited	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	_	6a		N o
	If "Yes," did the organization include with every solicitation an express statement that such contribution	s or diffs	- Ja		110
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				_
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?		7a	Yes	
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 re	equired to			
	file Form 8282?		7с		No
d	If "Yes," indicate the number of Forms 8282 filed during the year				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a pers	onal			
	benefit contract?		7e		Νο
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 a		76		
8	required?	• •	7h		
J	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization	ion, have			
	excess business holdings at any time during the		8		Νο
9	year?		1		
	Did the organization make any taxable distributions under section 4966?		9a		Νο
	Did the organization make a distribution to a donor, donor advisor, or related person?	·.	9b		No
10	Section 501(c)(7) organizations. Enter	-			
	Initiation fees and capital contributions included on Part VIII, line 12 10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club				
	facilities				
11	Section 501(c)(12) organizations Enter				
	Gross income from members or shareholders				
-	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources				
	against amounts due or received from them)............ <mark>11b</mark>				
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	Γ			
	year 120				

6

11

Section A. Governing Body and Management

No

Νo

Νo

Νo

Yes

Yes

Yes

Yes

Yes

2

3

4

5

6

7a

7Ь

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

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	3:
b Enter the number of voting members that are independent	1b	3:

Did any officer, director, trustee, or key employee have a family relationship of a business relationship with any
other officer, director, trustee, or key employee?
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?	
Did the organization make any significant changes to its organizational documents since the prior Form 990	W

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

Does the organization have members or stockholders?	
Does the organization have members, stockholders, or other persons who may elect one or more members of the	
governing hody?	1

b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? .
	Did the organization contemporaneously document the meetings held or written actions undertaken during the

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

а	the governing body?																				
ь	each committee with	auth	orit	v to	ac	t on	bel	nalf	of t	he c	ove	ernır	na b	odv'	٠.						

	Does the organization have local chapters, branches, or affiliates?													
b	If "Yes," does the organization have written policies and procedures	go	verr	ning	the	act	ıvıtı	ıes	of s	uch	c ha	pte	rs,	

affiliates, and branches to ensure their operations are consistent with those of the organization?
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

	•	,	, ,	3	
Is there any officer, director or t	rustee, d	or key	employe	ee listed in Part VII, Section A, who cannot be reached a	t
the organization's mailing addres	ss? If "Y	es," p	rovide th	he names and addresses in Schedule O	

	V	
8a	Yes	
8b	Yes	
9a		Νo
9b		
10		Νο
11		No

Section B. Policies

		Yes	No
Does the organization have a written conflict of interest policy? If "No", go to line 13	12a	Yes	
Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
Does the organization have a written whistleblower policy?	13	Yes	
Does the organization have a written document retention and destruction policy?	14	Yes	
Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
The organization's CEO, Executive Director, or top management official?	15a	Yes	
Other officers or key employees of the organization?	15b		Νo
Describe the process in Schedule O			
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Does the organization have a written conflict of interest policy? If "No", go to line 13 . Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed MN
- 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
 - L9 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization PAUL STEPHENSON CFO OF MINNEAPOLIS
 13100 WAYZATA BOULEVARD No 200
 MINNETONKA MN 55305

MINNETONKA, MN 55305 (952) 417-2311

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

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

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

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

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

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

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

Part VII	Continue	a
rait vii	Continue	u

				(tion that a			all			(E)		(F)	
	(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	or	Estima mount o compens from t ganizati relat organiza	f other sation the on and
											\pm		
											+		
1b	Total							>	769,49	9	0		78,271
1b 2	Total	ng those in 1							,		0		78,271
	Total number of individuals (includir	ng those in 1							,		0	Yes	78,271 No
	Total number of individuals (includir compensation from the organization Did the organization list any former	ng those in 1 -4 officer, direc	a) who	recei	ved	moi	re tha	n \$1	00,000 in reportab	le		Yes	No
3	Total number of individuals (including compensation from the organization Did the organization list any former on line 1a? If "Yes," complete Schedu	ng those in 1 ▶4 officer, direc	a) who	recei ruste	ved	ey e	emplo	n \$1	or highest compens	sated employee	3	Yes	
2	Total number of individuals (including compensation from the organization Did the organization list any former on line 1a? If "Yes," complete Scheduter For any individual listed online 1a, is organization and related organization.	ng those in 1 4 officer, directive J for such sthe sum of	a) who	recei ruste <i>ual</i> .	ved e, k omp	ey e	emplo	yee,	or highest compens	sated employee from the	3		No
3	Total number of individuals (including compensation from the organization but the organization list any former on line 1a? If "Yes," complete Scheduler organization and related organization individual	officer, directive J for such sthe sum of ns greater the sum of ns greater the sum of th	a) who	ruste	e, k	ey e	emplo ation es," c	yee, and ompi	or highest compens	sated employee from the		Yes	No
3	Total number of individuals (including compensation from the organization Did the organization list any former on line 1a? If "Yes," complete Scheduter For any individual listed online 1a, is organization and related organization.	officer, directive J for such sthe sum of ns greater the surective or accre	a) who	ruste ual ble c	e, k	ey e ens	emplo ation esation esa," c many	yee, and ompi	or highest compens other compensation ete Schedule J for su elated organization	sated employee in from the ich for services	3		No
3 4 5	Total number of individuals (including compensation from the organization) Did the organization list any former on line 1a? If "Yes," complete Scheduler organization and related organization individual	officer, directive J for such sthe sum of ns greater the sum of ns	a) who	ruste ual ble c	e, k	ey e ens	emplo ation esation esa," c many	yee, and ompi	or highest compens other compensation ete Schedule J for su elated organization	sated employee in from the ich for services	3		No No
3 4 5	Total number of individuals (including compensation from the organization Did the organization list any former on line 1a? If "Yes," complete Schedus For any individual listed online 1a, is organization and related organization individual	officer, directle J for such sthe sum of ns greater the sum of ns greater the sum of ns greater the sum of the	a) who	ruste ual ble c 0,00 e pensa	omp 0?)	ey e eens fro fro	emplo ation fes,"c ation many	yee, and omph	or highest compens or highest compens other compensation ete Schedule J for su elated organization	sated employee n from the ch for services	3		No No
3 4 5	Total number of individuals (including compensation from the organization Did the organization list any former on line 1a? If "Yes," complete Schedus For any individual listed online 1a, is organization and related organization individual	officer, directle J for such sthe sum of ns greater the sum of ns greater the sum of ns greater the sum of the	a) who	ruste ual ble c 0,00 e pensa	omp 0?)	ey e eens fro fro	emplo ation fes,"c ation many	yee, and omph	or highest compens or highest compens other compensation ete Schedule J for su elated organization	sated employee n from the ch for services	3	Yes	No No
3 4 5	Total number of individuals (including compensation from the organization but the organization list any former on line 1a? If "Yes," complete Schedus For any individual listed online 1a, is organization and related organization individual	officer, directle J for such sthe sum of ns greater the sum of ns greater the sum of ns greater the sum of the	a) who tor or t individu reporta nan \$15 ue comp Schedule	ruste ual ble c 0,00 e pensa	omp 0?)	ey e eens fro fro	emplo ation fes,"c ation many	yee, and omph	or highest compens or highest compens other compensation ete Schedule J for su elated organization sthat received mo	sated employee in from the lich for services re than	3		No No
3 4 5	Total number of individuals (including compensation from the organization but the organization list any former on line 1a? If "Yes," complete Schedus For any individual listed online 1a, is organization and related organization individual	officer, directle J for such sthe sum of ns greater the sum of ns greater the sum of ns greater the sum of the	a) who tor or t individu reporta nan \$15 ue comp Schedule	ruste ual ble c 0,00 e pensa	omp 0?)	ey e eens fro fro	emplo ation fes,"c ation many	yee, and omph	or highest compens or highest compens other compensation ete Schedule J for su elated organization sthat received mo	sated employee in from the ich for services re than	3	Yes	No No
3 4 5	Total number of individuals (including compensation from the organization but the organization list any former on line 1a? If "Yes," complete Schedus For any individual listed online 1a, is organization and related organization individual	officer, directle J for such sthe sum of ns greater the sum of ns greater the sum of ns greater the sum of the	a) who tor or t individu reporta nan \$15 ue comp Schedule	ruste ual ble c 0,00 e pensa	omp 0?)	ey e eens fro fro	emplo ation fes,"c ation many	yee, and omph	or highest compens or highest compens other compensation ete Schedule J for su elated organization sthat received mo	sated employee in from the ich for services re than	3	Yes	No No

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
	1a	Federated can	npaigns 1a	6,981				, ,
ants	ь	Membership d	ues					
₽ĕ	С	Fundraising ev	/ents					
±s ≡ a	d	Related organ	1c izations 1d	111,000				
S, G ⊞	e		nts (contributions) 1e					
Contributions, gifts, grants and other similar amounts	f	All other contribut similar amounts r	tions, gifts, grants, and not included above	16,153,801	İ			
### ### ### ##########################	g	Noncash cont	1f rıbutıons ıncluded ın					
a Co		lines 1a-1f \$	932,698					
	h	Total (Add lin	es 1a-1f)		16,271,782			
æ				Business Code				
me	2a	mission income		900,099	86,893	86,893		
æ	Ь	administrative fee	es	561,000	75,760	75,760		
935	c d							
38	e							
E	f	All other progr	ram service revenue					
Program Serwce Revenue	_							
Δ	g	Total. Add line ▶ \$ 162,653	es 2a-2f					
	3		come (including divi	dends, interest				
		other sımılar a	imounts)		860,582			860,582
	4	Income from inve	estment of tax-exempt be	ond proceeds				
	5	Royalties .						
			(ı) Real	(11) Personal				
	6a	Gross Rents						
	ь	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental inc	ome or (loss)					
			(i) Securities	(II) O ther				
	7a	Gross amount from sales of	7,951,571					
		assets other than inventory		. =				
	ь	Less cost or other basis and	14,867,363	1,541				
	с	sales expenses Gain or (loss)	-6,915,792	-1,541				
	d	Net gaın or (lo		•	-6,917,333			-6,917,333
	8a		from fundraising					
		events (not in	cluding					
Ë			ns reported on line					
Other Revenue		1c) See Part Attach Schedul	IV , line 18 <i>e G if total exceeds</i>					
æ		<i>\$15,000</i>	а					
her	ь		xpensesb					
ᅙ	С	Net income or	(loss) from fundrais	ing events ▶				
	9a	Gross income	from gaming part IV , line 19					
		Complete Sche	dule G ıf total					
		exceeds \$15,00	a					
	ь	Less directe	xpensesb					
	С	Net income or	(loss) from gaming a	activities •				
	10a	Gross sales o	finventory, less lowances .	-				
			a					
	Ь	Less cost of	goods sold b (loss) from sales of	ınventorv►				
	С	Miscellaneou		Business Code				
	11a		OUS REVENUE	900,099	119,240			119,240
	b							
	С							
	d	All other reve	nue					
	e	Total. Add line	es 11a-11d					
	12	Total Revenue	. Add lines 1h, 2g, 3	\$ 119,240 , 4, 5, 6d, 7d,	10,496,924	162,653	0	-5,937,511
		8c,						

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re).
Do ı	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	11,751,187	11,751,187		
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	847,769	125,016	230,783	491,970
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	1,118,687	430,922		319,970
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	29,101	12,848	10,122	6,131
9	Other employee benefits	266,355	83,431	88,917	94,007
10	Payroll taxes	164,663	47,480	50,785	66,398
11	Fees for services (non-employees)				
а	Management				
b	Legal	33,341		33,341	
c	Accounting	65,858		65,858	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	23,922		23,922	
12	Advertising and promotion	123,436		60,623	62,813
13	Office expenses	100,656	234	72,444	27,978
14	Information technology				
15	Royalties				
16	Occupancy	83,079		83,079	
17	Travel	170,986	130	22,957	147,899
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings	191,570	10,567	22,215	158,788
20	Interest	33,494		33,494	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	71,763		48,081	23,682
23	Insurance	48,547		48,547	
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	PRO GRAM MANA GEMENT	144,749	162	126,488	18,099
b	BAD DEBT EXPENSE	144,275		144,275	
c	EQUIPMENT & REPAIRS	50,672		44,828	5,844
d	MISCELLANEOUS	385		370	15
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	15,464,495	12,461,977	1,578,924	1,423,594
26	Joint Costs. Check if 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	Shoot

					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			6,563,072	1	3,136,176
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			11,691,837	3	11,605,894
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors, trustees other related parties Complete Part II of Schedule L		iployees or	5,000	5	
	6	Receivables from other disqualified persons (as defined under se persons described in section 4958(c)(3)(B) Complete Part II of S	ction 49			6	
	7	Notes and loans receivable, net		7			
	8	Inventories for sale or use				8	
22	9	Prepaid expenses and deferred charges				9	
ssets	10a	Land, buildings, and equipment cost basis					
⋖	L	Lace page mulated depresenting Complete Part VI of	10a	888,028			
	Ь	Less accumulated depreciation Complete Part VI of Schedule D	10ь	655,665	269,641	10c	232,363
	11	Investments—publicly traded securities			51,258,402	11	55,415,410
	12	Investments—other securities See Part IV, line 11 Complete Pa		20,609,777	12	8,561,086	
	13	Investments—program-related See Part IV, line 11 Complete Part IV, line IV,		1,834,342	13	3,023,139	
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D	2,041,340	15	1,649,419		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			94,273,411	16	83,623,487
	17	Accounts payable and accrued expenses .		363,235	17	163,191	
	18	Grants payable	13,084,892	18	11,190,576		
	19	Deferred revenue	236,253	19	222,159		
	20	Tax-exempt bond liabilities				20	
eS	21	Escrow account liability Complete Part IV of Schedule D			13,954,283	21	11,115,728
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
ä		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable				24	
	25	Other liabilities Complete Part X of Schedule D			2,596,750	25	2,426,382
	26	Total liabilities. Add lines 17 through 25			30,235,413	26	25,118,036
- 9		Organizations that follow SFAS 117, check here ▶ ✓ and complethrough 29, and lines 33 and 34.	ete line	s 27			
Balance	27	Unrestricted net assets			40,850,889	27	39,031,551
80	28	Temporarily restricted net assets			17,513,017	28	14,456,886
豆	29	Permanently restricted net assets			5,674,092	29	5,017,014
r Fund		Organizations that do not follow SFAS 117, check here ► ☐ and lines 30 through 34.	ete				
S OF	30	Capital stock or trust principal, or current funds	•			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .				31	
ΔS	32	Retained earnings, endowment, accumulated income, or other fur				32	
Net	33	Total net assets or fund balances			64,037,998	33	58,505,451
Z	34	Total liabilities and net assets/fund balances			94,273,411	34	83,623,487
	1				L		
Pa	rt XI	Financial Statements and Reporting					

Dowl VI	Financial	Ctatamanta	and Reporting
7.11.5	l Financiai	Statements	and Reporting

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

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

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)

DLN: 93493194011020

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury

Public Charity Status and Public Support

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

Open to Public

Inspection

Internal Revenue Service Name of the organization MINNEAPOLIS JEWISH FEDERATION

Employer identification number

41-0693866

1	Γ	A church, c	onvention of ch	nurches, or association of ch	urches de	scribed ir	Section 1	L70(b)(1)((A)(i).			
2	Γ	A school de	escribed in Sect	ti on 170(b)(1)(A)(ii). (Attac	ch Schedu	ıle E)						
3	Γ	A hospital	or a cooperative	e hospital service organizati	on descri	bed in Sec	tion 170(L	o)(1)(A)(i	ii). (Attac	h Schedul	e H)	
4	Г	A medical i	esearch organi	zation operated in conjuncti	on with a	hospital de	escribed ii	Section	170(b)(1)	(A)(iii). E	nter the	
		hospital's r	name, city, and	state								
5	Г	An organiza	ation operated f	or the benefit of a college or	universit	y owned o	r operated	by a gove	rnmental	unıt desci	ribed in	
				(Complete Part II)			•					
6	Г			overnment or governmental	unıt desci	ıbed ın Se	ction 170	(b)(1)(A)	(v).			
7	~			ally receives a substantial p						n the gene	ral publi	С
				o)(1)(A)(vi) (Complete Par								
8	\sqcap	A communi	ty trust describ	ped in Section 170(b)(1)(A)	(vi) (Com	nplete Part	tII)					
9	Г	An organiza	An organization that normally receives (1) more than 331/3% 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 331/3% of										
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses										
		acquired by	the organization	on after June 30, 1975 See	Section 5	09(a)(2).	(Complete	e Part III)			
10	Γ	An organiza	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See Se	ct ion 509((a)(4). (Se	ee instruct	tions)	
11	Γ	An organiza	atıon organızed	and operated exclusively fo	r the bene	fit of, to p	erform the	functions	of, or to o	arry out t	he purpo	ses of
				orted organizations describe				•		Section 5	09(a)(3)	.Check
		a T		type of supporting organiza Type II c		- Functior			n d	□ Type	III - Ot	her
e	Г			rtıfy that the organization is								
	•	•	- '	agers and other than one or							-	
_		section 50	. , . ,					_	_			
f		If the organ		d a written determination fro	m the IRS	that it is	a Type I,	TypeIIo	r I ype III	supportin	g organi:	zation,
g				as the organization accepte	d any gift	or contribi	ution from	any of the	<u></u>			'
_		following pe	ersons?									
				r indirectly controls, either a			th persons	describe	d ın (ıı)		Yes	No
				ng body of the the supported		tion?				11g		<u> </u>
				erson described in (i) above						11g(_	├
				ty of a person described in (11g(iii)	
h		Provide the	following inform	mation about the organizatio	ns the org	janization	supports					
	/:\ NI	ame of	(ii) EIN	(iii) Tune of organization	/is. \ T	s the	/w Did v	ou notify	/v:\ T	s the	/wii\ ^ =	nount of
		orted	(II) LIN	(iii) Type of organization (described on lines 1-9	l	s the ation in		nization	I	s the ation in	1 '	ort?
		nization		`above or IRC section	, ,	listed in	_) of your		rganızed	''	
				(See Instructions))		verning	supp	ort?	ın the	US?		
						ment?				l		
					Yes	No	Yes	No	Yes	No		
Гotа	ıl.											
	-							l .		1	ı	

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.)

	Complete only if you clied	Ked tile DOX OI	1 IIIIE 3, 7, 01	o or Fart I.)				
	iblic Support		(1) 2225	() 2005	/ D 2007		2002	(6) T · ·
	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and	17,366,194	22,302,893	20,982,053	19,354,969		16,293,772	96,299,881
	membership fees received (Do not include any "unusual grants")	17,300,194	22,302,693	20,962,033	19,334,909		10,293,772	90,299,001
2	Tax revenues levied for the organization's						+	
2	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	17,366,194	22,302,893	20,982,053	19,354,969		16,293,772	96,299,881
5	The portion of total contribution by each							
	person (other than a government unit or							
	publicly supported organization) included							14,304,485
	on line 1 that exceed 2% of the amount							2.,00.,.00
	shown on line 11, column							
	(f)							
6	Public Support subtract line 5 from line							81,995,396
_	4							
	otal Support							
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007		2008	(f) Total
7	A mounts from line 4	17,366,194	809,596	20,982,053	19,354,969	-	16,293,772	96,299,881
8	Gross income from interest, dividends,							
	payments received on securities loans,	555,345	809,596	1,090,274	833,617		860,582	4,149,414
	rents, royalties and income from similar sources							
9	Net income from unrelated business						+	
9	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	64,651	75,074	87,723	115,221		97,250	439,919
	Part IV)							
11	Total Support (Add lines 7 through 10)							100,889,214
12	Gross receipts from related activities, etc	(See instruction	s)			12		751,724
13	First Five Years. If the Form 990 is for the	organization's fir	st. second. third	d. fourth. or fifth	tax vear as a 5	01(c)(3)	-
	organization, check this box and stop here	J	, ,	, ,	,	. , ,		▶ ┌
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	column (f) dıvıd	ed by line 11 co	lumn (f))		14		81.270 %
15	Public Support Percentage for 2007 Sched	ule A . Part IV - A	. line 26f			15		91.030 %
	33 1/3% Test - 2008. If the organization did			nd line 14 is 22	1/20/- or more		thic box	721030 70
104	and stop here. The organization qualifies as				1/3% of filore,	CHECK	tills box	▶ ▽
h	33 1/3% Test - 2007. If the organization did		-		5 is 33 1/3% o	r more	check thi	•
_	box and stop here. The organization qualifies			•	.5 15 55 1,570 0	1 111010	, check till	ĭ ▶□
17a	10% Facts and Circumstances Test - 2008.				3.16a.or16b a	and line	e 14 is 10	
	more, and if the organization meets the "fac	-						
	organization meets the "facts and circumst							► □
b	10% Facts and Circumstances Test - 2007.							s 10% or
	more, and if the organization meets the "fac	ts and circumst	ances" test, che	ck this box and	stop here. Exp	laın ın	Part IV ho	
	the organization meets the "facts and circu							► □
18	Private Foundation. If the organization did	not check the bo	x on line 13, 16	a, 16b, 17a or :	17b, check this	box a	nd see	- -
	instructions							▶ ┌

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
c	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after 30 June, 1975		+				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or loss						
	from the sale of capital assets						
	(Explain in Part IV)						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶ □
	monutation of Dublic Compant Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (ne 13 column /f	<u> </u>	17	
	-			-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2008

▶□

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

Schedule A (Form 990 or 990-EZ) 2008

Software ID: Software Version:

EIN: 41-0693866

Name: MINNEAPOLIS JEWISH FEDERATION

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa											
		Posit t	(C tion (hat a	chec		I			/E\	(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Forner	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
Cındı Tarshıs Appelman , DIRECTOR	1 00	Х						0	0	0	
Amy Baratz , DIRECTOR	1 00	Х						0	0	0	
Bob Barrows , DIRECTOR	1 00	Х						0	0	0	
Michael Barry , DIRECTOR	1 00	Х						0	0	0	
Mike Berman , DIRECTOR	1 00	Х						0	0	0	
A aron Biber , DIRECTOR	1 00	Х						0	0	0	
Genya Buslovich , DIRECTOR	1 00	Х						0	0	0	
Doreen Frankel , DIRECTOR	1 00	Х						0	0	0	
Heidi Geller , DIRECTOR	1 00	X						0	0	0	
Rabbı Sımeon Glaser , DIRECTOR	1 00	X						0	0	0	
Steve Gottlieb , DIRECTOR	1 00	X						0	0	0	
Jake Hurwitz , DIRECTOR	1 00	X						0	0	0	
Ann Rockler Jackson , DIRECTOR	1 00	X						0	0	0	
Bruce Kahn , DIRECTOR	1 00	Х						0	0	0	
Robert Kelen , SECRETARY	1 00	X		Х				0	0	0	
Lında Ketover , DIRECTOR	1 00	X						0	0	0	
Dan Kutoff , DIRECTOR	1 00	Х						0	0	0	
Susan Krantz Lazar , DIRECTOR	1 00	Х						0	0	0	
Darren Lederfine , DIRECTOR	1 00	Х						0	0	0	
Beth Kieffer Leonard , PAST PRESIDENT	1 00	×		х				0	0	0	
Sandra Lynn , DIRECTOR	1 00	X						0	0	0	
Krıs MacDonald , PRESIDENT	20 00	Х		Х				0	0	0	
Gil Mann , DIRECTOR	1 00	Х						0	0	0	
Robin Neidorf , DIRECTOR	1 00	Х						0	0	0	
David Orbuch , TREASURER	1 00	Х		Х				0	0	0	
Lısa Ratner , DIRECTOR	1 00	X						0	0	0	
Jerry Ribnick , PRESIDENT-ELECT	15 00	Х		Х				0	0	0	
Jerel Shapıro , DIRECTOR	1 00	Х						0	0	0	
Sara Sımpser , DIRECTOR	1 00	X						0	0	0	
Richard Spiegel , DIRECTOR	1 00	X				<u> </u>		0	0	0	

Form 990, Part VII - Section Aaa

		Posi t	(C tion (hat a	chec		I			(=)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
Steve Snyder , DIRECTOR	1 00	Х						0	0	0
Amy Weiss , DIRECTOR	1 00	Х						0	0	0
Howard Zack , DIRECTOR	1 00	Х						0	0	0
Joshua M Fogelson , CEO	37 00			Х				335,659	0	25,285
Karen A Hoppe , CFO	37 00			Х				95,856	0	4,793
Sally Forbes Friedman , FOUNDATION DIRECTOR	37 50					x		118,712	0	16,840
Morton Naiman , CAMPAIGN DIRECTOR	37 50					Х		110,760	0	18,774
Brian G Herstig , COO	37 00					Х		108,512	0	12,579

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

THE MINNEAPOLIS JEWISH FEDERATION BUILDS COMMUNITY, CARES FOR THE WELFARE OF JEWS EVERYWHERE, AND MAXIMIZES PARTICIPATION IN JEWISH LIFE. THE ORGANIZATION IS A FEDERATED FUNDRAISER IN THE MINNEAPOLIS, MINNESOTA JEWISH COMMUNITY. THE ORGANIZATION ALLOCATES MONIES TO OVERSEAS NEEDS, NATIONAL AGENCIES, AND LOCAL BENEFICIARY ORGANIZATIONS. IN ADDITION, THE ORGANIZATION INCLUDES THE JEWISH COMMUNITY FOUNDATION, WHICH MAINTAINS MONIES IN ENDOWMENTS AND OTHER RESTRICTED FUNDS, INCLUDING DONOR ADVISED FUNDS, FOR ALLOCATIONS TO CHARITABLE CAUSES.

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

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

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

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

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

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

If the organization answered "Yes." to Form 990, Part IV, Line 5 (Proxy Tax)

	ame of the organization			Employer iden	tıfıcatıon number				
MITL	NNEAPOLIS JEWISH FEDERATION			41-0693866					
a r		by all organizations exemptee the instructions for Schedule			527				
L	Provide a description of the or	ganızatıon's dırect and ındırect polı	tical campaign act	tivities in Part IV					
2	Political expenditures				\$				
	V olunteer hours								
aı	rt I-B To be completed I for Schedule C for d	by all organizations exempt letails.)	t under sectio	n 501(c)(3). (See the	instructions				
L	Enter the amount of any excis	nter the amount of any excise tax incurred by the organization under section 4955							
2	Enter the amount of any excis	n 4955	\$						
3	If the organization incurred in	If the organization incurred in a section 4955 tax, did it file Form 4720 for this year?							
la	Was a correction made?	as a correction made?							
ь	If "Yes," describe in Part IV								
ar		by all organizations exempt s for Schedule C for details.)	t under sectio	n 501(c), except sect	ion 501(c)(3).				
L	Enter the amount directly exp	ended by the filing organization for s	section 527 exem	ot function activities	\$				
2	Enter the amount of the filing of 527 exempt funtion activities	organızatıon's ınternal funds contrıb	uted to other orga	nizations for section	\$				
3	Total of direct and indirect exe 1120-POL, line 17b	empt function expenditures Add line	es 1 and 2 and en	ter here and on Form	\$				
ŀ	Did the filing organization file	Form 1120-POL for this year?			┌ Yes ┌ No				
5	were made Enter the amount political contributions receive	nd Employer Identification Number paid and indicate if the amount was d and promptly and directly delivere action committee (PAC) If addition	paid from the filing ed to a separate po	g organization's own interna olitical organization, such a	l funds or were s a separate				
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's internal funds If none, enter - 0 -	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter - 0 -				
_				+					
		1	1	i	1				

d Grassroots non-taxable amount

f Grassroots lobbying expenditures

e Grassroots ceiling amount (150% of line d, column (e))

P	art II-A To be completed by (election under sec						768
	Check If the filing organization	belongs to an affili	ated group				
<u>B</u>	Check If the filing organization Limits on Lo (The term "expenditure	bbying Expend	litures—		oly	(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influe	nce public opinion	(grass roots lob	bying)			
ь	Total lobbying expenditures to influe	nce a legislative b	ody (direct lobby	yıng)			
c	Total lobbying expenditures (add line						
d	Other exempt purpose expenditures						
e	Total exempt purpose expenditures	(add lines 1c and 1	Ld)				
f	Lobbying nontaxable amount Enters columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000	e following table taxable amount on line 1e					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% o	of the excess over \$				
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% o	of the excess over \$				
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000						
	Over \$17,000,000	\$1,000,000					
	Grassroots nontaxable amount (ente	er 25% of line 1f)					
h	Subtract line 1g from line 1a Enter	0- ıflıne g ıs more	than line a				
i	Subtract line 1f from line 1c Enter-	0- ıflıne fıs more t	than line c				
j	If there is an amount other than zero section 4911 tax for this year?	on either line 1h c	or line 11, did the	organization file	Form 4720 rep	orting	┌ Yes ┌ No
	(Some organizations tha columns below.		on 501(h) el	ection do not	: have to cor		he five
	Lobb	ying Expendit	ures During	4-Year Avera	ging Period		
	Calendar year (or fisca beginning in)	l year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
_2a	Lobbying non-taxable amount						
	Lobbying ceiling amount (150% of line 2a, column(e))						
	: Total lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2008

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

			a)	(b)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		No		
b	Paid staff or management (include compensation in expenses reported on lines c through i)?		Νo		
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		Νo		
e	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?	Yes		75,703	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		Νo		
i	Other activities If "Yes," describe in Part IV		Νo		
j	Total lines 1c through 1:			75,703	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
b	If "Yes" enter the amount of any tax incurred under section 4912				
c	If "Yes" enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

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

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

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

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current Year	2a \$	
b	Carryover from last year	2b \$	
c	Total	2c \$	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3 \$	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4 \$	
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5 \$	

Part IV Supplemental Information

Dues, assessments and similar amounts from members

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

Ident if ier	Return Reference	Explanation
· · · · · · · · · · · · · · · · · · ·	A ctivities	the Federation paid \$75,703 to the Jewish Community Relations Council for a Government Relations Position for lobbying on behalf of the Jewish Community as a whole

1 \$

Part IV Supplemental Information					
Ident if ier	Return Reference	Explanation			

Schedule C (Form 990 or 990EZ) 2008

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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

Supplemental Financial Statements

Employer identification number Name of the organization MINNEAPOLIS JEWISH FEDERATION 41-0693866 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 715 0 Total number at end of year 4,415,716 Aggregate Contributions to (during year) 0 0 3 Aggregate Grants from (during year) 4,216,523 63,176,788 Aggregate value at end of year 0 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ┌ No √ Yes funds are the organization's property, subject to the organization's exclusive legal control? 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 □ No impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 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 Preservation of certified historic structure Protection of natural habitat Preservation of open space 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 Held at the End of the Year 2a Total number of conservation easements h 2b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year 🕨 7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 🕨 \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? 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.

- 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
- 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

For Paperwork Reduction Act Notice, see the Intructions for Form 990

(ii) Assets included in Form 990, Part X

► \$

- 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
- Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2008

Par	Organizations Maintaining Co	llections of Art,	Hist	ori	<u>cal Treasur</u>	res, or Othe	r Similar Asse	ts (co	ontınued)
3	Using the organization's accession and other items (check all that apply)	records, check any o	of the	e foll	owing that are	a sıgnıfıcant u	se of its collection	1	
а	Public exhibition		d	\sqcap	Loan or exch	ange programs			
b	Scholarly research		e	Γ	Other				
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how	thev	/ further the or	rganization's ex	cempt purpose in		
•	Part XIV	medicans and explain			, raremor end or	gamzation o			
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t							Yes	Г№
Par	Trust, Escrow and Custodial A Part IV, line 9, or reported an am	Arrangements. C	omp	olete	e if the organ				90,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other intermed	ıary f	for c	ontributions oi	r other assets		Yes	√ No
b	If "Yes," explain why in Part XIV and comple	te the following table							
							A mou	ınt	
c	Beginning balance					1c			
d	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fo	rm 990, Part X, line :	21?				F	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV								
Pa	rt V Endowment Funds. Complete								
		(a)Current Year	(b)	Prior	Year (c)Two	o Years Back (d)	Three Years Back (e)Four Y	ears Back
1a	Beginning of year balance	15,146,809							
Ь	Contributions	754,520							
С	Investment earnings or losses	-3,588,528							
d	Grants or scholarships	750.040							
е	Other expenditures for facilities and programs	758,010							
f	Administrative expenses								
g	End of year balance	11,554,791							
2	Provide the estimated percentage of the yea	r end balance held as							
а	Board designated or quasi-endowment	56 580 %							
ь	Permanent endowment ► 43 420 %								
c	Term endowment ▶								
За	Are there endowment funds not in the posses	ssion of the organizat	ıon th	hat a	re held and ac	lmınıstered for	the		
	organization by							Yes	No
	(i) unrelated organizations						3a(i)		Νo
	(ii) related organizations						. 3a(ii)		No
	If "Yes" to 3a(II), are the related organization	·					3b		<u> </u>
4	Describe in Part XIV the intended uses of the					ساء کا ایست ۱۰			
Par	t VI Investments—Land, Buildings	<u>, and Equipment</u>	τ. 56			1			
	Description of investment) Cost or other sis (investment)	(b)Cost or other basis (other)	(c) Depreciation	(d) B	ook value
	Land						7		
	Buildings			_		446,424	295,365		151,059
				1		1	1		
	Leasehold improvements						-		
c	Leasenoid improvements		•			441,604	360,300		81,304
c d e	·		•			·	360,300		81,304

Investments—Other Securities. See	Form 990, Part X, line 12.	
(a) Description of security or cateory (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
		Cost of end-of-year market value
inancial derivatives and other financial products	1 252 501	
Closely-held equity interests	1,363,581	
ther ALTERNATIVE INVESTMENTS	7,197,505	
otal. (Column (b) should equal Form 990, Part X, col (B) line 12)	8,561,086	
	, ,	
art VIII Investments—Program Related. See	e Form 990, Part X, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation
(L) Description of my seament type	(2,200), 12,20	Cost or end-of-year market value
otal. (Column (b) should equal Form 990, Part X, col (B) line 13)	2.15	
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip		(b) Book value
(a) Descrip	7.1011	(b) book value
otal. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)	
Part X Other Liabilities. See Form 990, Part X		
(a) Description of Liability	(b) A mount	
ederal Income Taxes		
BLIGATIONS UNDER SPLIT-INTEREST		
GREEMENTS	543,243	
UE TO ANNUAL CAMPAIGN	1,425,121	
THER LIABILITIES	458,018	
	.33,313	
otal. (Column (b) should equal Form 990, Part X, col (B) line 25)	2,426,382	

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	ts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
	Reconciliation of Expenses per Audited Financial Statements With Expenses		Return
1	Total expenses and losses per audited financial statements	1	
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
Ь	Prior year adjustments		
с	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		
е -	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
a L	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)	4.5	
C E	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part 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

Return Reference	Explanation				
	THE FEDERATION HOLDS FUNDS FOR WHICH DONORS HAVE SPECIFIED THE ULTIMATE BENEFICIARY, BUT FOR WHICH THE DISTRIBUTIONS HAVE NOT YET BEEN MADE				
Description of Intended Use of Endowment Funds	ENDOWMENT FUNDS ARE USED TO PROVIDE AND ENHANCE JEWISH LIFE IN THE GREATER MINNEAPOLIS AREA AND OVERSEAS				
	Description of Intended Use of				

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

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

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

OMB No 1545-0047

DLN: 93493194011020

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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

Open to Public Inspect ion

Schedule I (Form 990) 2008

						Employer identif	Employer identification number		
MINNEAPOLIS JEWISH FEDER	RATION					41-0693866			
Part I General Inform	mation on Gra	nts and Assistanc	e			•			
Does the organization ma the selection criteria used Describe in Part IV the organization	d to award the gra rganızatıon's proc	nts or assistance? edures for monitoring th	ne use of grant funds in t	he United States					
Form 990, Part I Part IV and Scho	IV, line 21 for a edule I-1 if add	ny recipient that rec itional space is	eived more than \$5,0	000. Check this box	tes. Complete if the or	eived more than \$5,			
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
See Additional Data Table									
2 Enter total number of sec	tion 501(c)(3) an	d government	I				70		
organizations							• 0		
	ci organizations :	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>			

Cat No 50055P

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	2.
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

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

See Additional Data Table

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S		Schedule I, Part I, Line 2 AT THE TIME A GRANT IS MADE, THE FEDERATION DESIGNATES THE INTENDED USE OF THE FUNDS THE FEDERATION CONDUCTS NO FURTHER MONITORING OF THE FUNDS

Software ID: Software Version:

EIN: 41-0693866

Name: MINNEAPOLIS JEWISH FEDERATION

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

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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Abbott Northwestern Hospital Foundation800 EAST 28TH STREET MINNEAPOLIS, MN 55407	04-3643816	501(c)(3)	6,000				Health - Special Programming		
Adath Jeshurun Congregation 10500 Hillside Lane W MINNETONKA,MN 55305	41-0693940	501(c)(3)	37,904				Religious Institutions - General Operating Support & Special Programming		
AISH - Minnesota2609 QUENTIN AVENUE SOUTH ST LOUIS PARK, MN 55416	20-5474141	501(c)(3)	21,000				Jewish Education - General Operating Support		
Alexander Muss High School in Israel Inc78 Randall Avenue ROCKVILLE CENTRE,NY 11570	59-0173782	501(c)(3)	28,100				Israel Experience - Scholarships		
Alzheimers Disease & Related Disorders Assoc MN & ND4550 West 77th 200 EDINA,MN 55435	41-1361624	501(c)(3)	9,500				Health - Special Programming		
American Friends of The Jerusalem Kollel198 Glen Avenue South LAKEWOOD, NJ 08701	20-1320557	501(c)(3)	6,000				Education		
American Jewish Joint Distribution Committee Inc PO Box 530 NEW YORK, NY 10017	13-1656634	501(c)(3)	44,500				Social Services - General Operating Support		
American Refugee Committee InternationalPO Box 1450 NW 5618 MINNEAPOLIS, MN 554855618	36-3241033	501(c)(3)	6,600				Social Services - General Operating Support		
Amos & Celia Heilicher Minneapolis Jewish Day School4330 SOUTH Cedar Lake Road ST LOUIS PARK,MN 55416	41-1522634	501(c)(3)	437,958				Jewish Ed Day School - General Operating Support, Scholarships & Special Programming		
BAIS YAAKOV HIGH SCHOOL4221 SUNSET BOULEVARD ST LOUIS PARK,MN 55416	41-1794713	501(c)(3)	28,886				EDUCATION AND GENERAL OPERATING SUPPORT		

Form 990,Schedule I,	Part II, Gran	ts and Other As	ssistance to Gov	ernments and O	rganizations in	the United States	3
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BARRY FAMILY CAMPUS 4330 SOUTH Cedar Lake Road ST LOUIS PARK, MN 55416	20-2381049	501(C)(3)	125,000				GENERAL OPERATING SUPPORT
Bet Shalom Congregation 13613 Orchard Road MINNETONKA, MN 55305	41-1409280	501(c)(3)	249,994				Religious Institutions - General Operating Support & Special Programming
Beth El Synagogue5224 WEST 26TH STREET MINNEAPOLIS, MN 55416	41-0711587	501(c)(3)	56,830				Religious Institutions - General Operating Support, Scholarships & Special Programming
B'nai B'rith Youth Organization Inc DC5185 MacArthur Blvd 640 WASHINGTON, DC 20006	31-1794932	501(c)(3)	48,823				Informal Jewish Education - Scholarships & GENERAL OPERATING SUPPORT
Camp Ramah65 E Wacker Place 1200 CHICAGO,IL 60601	36-3866094	501(c)(3)	6,300				Camp Scholarships
Camp Ramah Inc3080 Broadway NEW YORK, NY 10027	13-6161110	501(c)(3)	5,900				Israel Experience - Scholarships
Children's Health Care Foundation2910 Centre Pointe Drive ROSEVILLE, MN 55113	41-1814223	501(c)(3)	163,500				Children with Health Problems - General Operating Support & Special Programming
Corner House-Interagency Child Abuse Evaluation Center2502 10th Avenue South MINNEAPOLIS, MN 55404	41-1640731	501(c)(3)	7,250				Mental Health - Special Programming
Family and Children's Service414 8th Street South MINNEAPOLIS, MN 55404	41-0693858	501(c)(3)	6,000				Social Services - General Operating Support & Special Programming
Friends of Yad LKashish- Lifeline for the OldPO Box 494 ENGLEWOOD, NJ 07631	76-0734439	501(c)(3)	15,000				Elderly Programs - General Operating Support

Form 990,Schedule I,	Part II, Gran	ts and Other As	sistance to Gov	ernments and O	rganizations in	the United States	3
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Greater Twin Cities United Way404 South Eighth Street MINNEAPOLIS, MN 55404	41-1973442	501(c)(3)	52,500				General Field of Interest - General Operating Support
Gustavus Adolphus College800 WEST COLLEGE AVENUE ST PETER,MN 560821498	41-0695524	501(c)(3)	22,474				Scholarships
Hadassah5905 Golden Valley Road 237 GOLDEN VALLEY, MN 55422	13-1656651	501(c)(3)	8,600				Health - General Operating Support
Harold Grinspoon Foundation380 Union Street SUITE 200 WEST SPRINGFIELD, MA 01089	04-6685725	501(c)(3)	21,720				Early Childhood Education Services - Special Programming
Harvard College Fund124 Mount Auburn Street CAMBRIDGE, MA 021385795	04-2103580	501(c)(3)	14,400				Higher Education - Special Programming
Herzl Camp7204 WEST 27TH STREET 226 ST LOUIS PARK,MN 55426	41-6009136	501(c)(3)	18,483				Informal Jewish Education - General Operating Support & Scholarships
HILLEL1521 UNIVERSITY AVENUE SE MINNEAPOLIS, MN 55416	41-6038613	501(c)(3)	118,108				HIGHER EDUCATION AND GENERAL OPERATING SUPPORT
JCRC of Minnesota and the Dakotas12 NORTH 12TH STREET SUITE 480 MINNEAPOLIS, MN 55403	41-0826434	501(c)(3)	328,587				General Operating Support, Special Programming and lobbying
Jewish Agency for Israel North American Council 633 Third Avenue 21ST FLOOR NEW YORK, NY 10017	23-0053483	501(c)(3)	201,000				Social Services - Scholarships, Special Programming & OVERSEAS SUPPORT
Jewish Community Federation of Cleveland 1750 Euclid Avenue CLEVELAND, OH 44115	34-0714445	501(c)(3)	20,000				Social Services - General Operating Support

Form 990,Schedule I,	Part II, Grar	nts and Other As	sistance to Gov	ernments and O	rganizations in	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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance								
Jewish Family and Children's Service13100 WAYZATA BLVD 400 MINNETONKA, MN 55305	41-0693860	501(c)(3)	1,515,286				Social Services - General Operating Support								
Jewish Federation of Collier County2500 Vanderbilt Beach Road 2201 NAPLES, FL 34109	59-2151725	501(c)(3)	20,000				GENERAL OPERATING SUPPORT								
Jewish Federation of Greater Phoenix12701 North Scottsdale Road SUITE 201 SCOTTSDALE, AZ 85254	86-0096784	501(c)(3)	30,000				General Field of Interest - General Operating Support								
Jewish Federation of Southern Arizona3822 E River Road 100 TUCSON,AZ 85718	86-0096795	501(c)(3)	25,000				General Field of Interest - General Operating Support								
Jewish Historical Society of the Upper Midwest 4330 SOUTH Cedar Lake Road ST LOUIS PARK, MN 55416	36-3337514	501(c)(3)	15,076				Jewish Education - General Operating Support								
Jewish Vocational Services13100 Wayzata Blvd 300 MINNETONKA, MN 55305	41-0693860	501(c)(3)	13,325				Higher Education - Scholarships & General Operating Support								
JOINT DISTRIBUTION COMMITTEE711 THIRD AVENUE NEW YORK, NY 10017	13-1656634	501(c)(3)	2,093,516				GENERAL OPERATING SUPPORT, PARTNERSHIP ISRAEL, HUNGER RELIEF, RENAISSANCE, CHILDREN'S INITIATIVE AND SPECIAL PROGRAMMING								
Mazon Inc a Jewish Response to Hunger 10495 Santa Monica Blvd 100 LOS ANGELES, CA 900255249		501(c)(3)	6,700				Food & Meals - General Operating Support								
Mental Health Collective 3548 BRYANT AVENUE SOUTH MINNEAPOLIS, MN 55408	41-1946275	501(c)(3)	7,500				Mental Health - General Operating Support								
Minnesota Community Foundation55 Fifth Street East SUITE 600 ST PAUL, MN 55101		501(c)(3)	8,904				General Field of Interest - Endowments								

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of (b) EIN (c) IRC Code (d) Amount of cash (e) Amount of non-(f) Method of (a) Description of (h) Purpose of grant organization section arant cash valuation (book. non-cash or assistance ıf applicable FMV, appraisal, or government assistance assistance other) Minnesota Jewish Theater 41-1789509 5.500 Arts & Culture -501(c)(3) CompanyPO Box 16155 General Operating ST PAUL.MN 55116 Support Minnesota Public Radio 41-0953924 14,800 Arts & Culture -501(c)(3) 480 Cedar Street General Operating ST PAUL, MN 55101 Support & Special Programming Minnesotans Against 35-2162870 501(c)(3) 32,500 Social Services -TerrorismPO Box 368 General Operating HOPKINS, MN Support 553430368 41-0675915 7.300 Social Services -National Council of Jewish 501(c)(3) Women13100 Wavzata General Operating Blvd Support & Special MINNETONKA, MN Programming 55305 Social Services -Nechama - Jewish 41-1849408 501(c)(3) 104,000 Disaster Response 4330 General Operating South Cedar Lake Road Support ST LOUIS PARK, MN 55416 NephCure Foundation15 38-3569922 10,000 Children with Health 501(c)(3) WATERLOO AVENUE Problems - General BERWYN, PA 19312 Operating Support 13-3503156 Ohr Somavach 501(c)(3) 38,600 Israel Experience -International Inc1399 General Operating Coney Island Avenue Support & Scholarship BROOKLYN, NY 11230 41-1681317 8,750 Social Services -Open Arms of Minnesota 501(c)(3) Inc1414 Franklin Avenue General Operating Support East MINNEAPOLIS, MN 55404 Outward Bound Inc 100 04-2375956 501(c)(3) 5,250 Environmental Mystery Point Road Education - General GARRISON, NY 10524 Operating Support PEF Israel Endowment 13-6104086 501(c)(3) 6,688 General Field of Funds Inc317 Madison Interest - Special Avenue 607 Programming NEW YORK, NY 10017

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code (d) A mount of cash (e) A mount of non-(f) Method of (q) Description of (h) Purpose of grant valuation (book, or assistance organization section arant cash non-cash FMV, appraisal, ıf applicable or government assistance assistance other) 41-0833543 906.747 Sabes Jewish Community 501(c)(3) Social Services -General Operating Center4330 SOUTH Cedar Lake Road Support. Scholarships & ST LOUIS PARK, MN 55416 Special Programming SHA'ARIM4820 41-1917521 GENERAL 501(c)(3) 103.496 MINNETONKA BLVD 300 OPERATING ST LOUIS PARK, MN SUPPORT AND 55416 **EDUCATION** Sharei Chesed Synagogue 41-6027517 501(c)(3) 5,400 Religious 1712 Hopkins Crossroads Institutions -MINNETONKA, MN General Operating 55305 Support SHIR TIKVAH5000 41-1632627 501(c)(3) 50,156 GENERAL OPERATING GIRARD AVENUE SOUTH MINNEAPOLIS, MN SUPPORT AND RELIGIOUS 55419 Sholom Community 41-1837022 501(c)(3) 70,656 General Adult Care -Alliance3620 Phillips Elderly Programs, Special Programming Parkway South ST LOUIS PARK, MN & GENERAL 55426 OPERATING SUPPORT Sholom East1554 Midway | 41-0695462 501(c)(3) 100,000 General Adult Care -General Operating Parkway ST PAUL, MN 55108 Support Sholom Foundation 3610 36-3411361 501(c)(3) 64.750 General Adult Care -General Operating Phillips Parkway ST LOUIS PARK, MN Support 55426 51-0188692 Child Care - General STEP-St Louis Park 501(c)(3) 5,650 Operating Support & Emergency Program2239 Edgewood Avenue South Special Programming ST LOUIS PARK, MN 55426 Talmud Torah of 41-0714419 501(c)(3) Jewish Ed 400,532 Minneapolis 4330 SOUTH Supplementary -Cedar Lake Road General Operating ST LOUIS PARK, MN Support & Special 55416 Programming 41-0705807 Temple Israel2324 501(c)(3) 263,290 Religious **EMERSON AVENUE** Institutions -MINNEAPOLIS, MN General Operating 55405 Support & Special Programming

Form 990,Schedule I,	Part II, Gran	nts and Other As	sistance to Gove	ernments and Or	ganizations in t	the United States	5
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Blake School110 Blake Road HOPKINS,MN 55343	23-7243247	501(c)(3)	17,500				Education - General Operating Support & Special Programming
The Israel Project2020 K Street NW Suite 7600 WA SHINGTON, DC 200061828	37-1472882	501(c)(3)	6,000				Social Services - General Operating Support
Torah Academy of Minneapolis2800 Joppa Avenue South ST LOUIS PARK, MN 55416	41-6007486	501(c)(3)	299,300				Jewish Ed Day School - General Operating Support, Scholarships & Special Programming
United Jewish CommunitiesPO Box 30 CHELSEA STATION NEW YORK, NY 10113	13-1624240	501(c)(3)	2,628,376				General Field of Interest - Special Programming and overseas support
United Lubavitcher Yeshivoth841 Ocean Parkway BROOKLYN,NY 112302715	11-1797198	501(c)(3)	7,500				Israel Experience - Scholarships
United Synagogue of Conservative Judaism820 2nd Avenue 10TH FLOOR NEW YORK,NY 10017	13-1659707	501(c)(3)	18,150				Higher Education - Scholarships & General Operating Support
University of Minnesota - CLA External Relations 225 Johnson Hall 101 PLEASANT STREET SE MINNEAPOLIS, MN 55455	41-6042488	501(c)(3)	33,333				Education - General Operating Support
University of Minnesota FoundationPO BOX 70870 ST PAUL, MN 551703854	41-6042488	501(c)(3)	93,583				Higher Education - General Operating Support
Walker Art Center1750 Hennepin Avenue MINNEAPOLIS, MN 55403	41-0693929	501(c)(3)	39,500				Arts & Culture - General Operating Support
Washington Institute for Near East Policy1828 L Street 1050 WASHINGTON, DC 20036	52-1376034	501(c)(3)	9,500				GENERAL FIELD OF INTEREST - GENERAL OPERATING SUPPORT

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493194011020

OMB No 1545-0047

Schedule J (Form 990)

Compensation Information

2008

Inspection

Open to Public

Department of the Treasury Internal Revenue Service

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 MINNEAPOLIS JEWISH FEDERATION **Employer identification number**

41-0693866

Pa	TEL Questions Regarding Compensati	on				
					Yes	Νo
1a	Check the appropriate box(es) if the organization p 990, Part VII, Section A, line 1a Complete Part I		ny of the following to or for a person listed in Form ride any relevant information regarding these items			
	First class or charter travel		Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a provision of all the expenses described above? If			1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executi			2		
3	Indicate which, if any, of the following the organiza organization's CEO/Executive Director Check all					
	Compensation committee	<u> </u>	Written employment contract			
	Independent compensation consultant	<u> </u>	Compensation survey or study			
	Form 990 of other organizations	⊽	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990), Part VII	, Section A, line 1a			
а	Receive a severance payment or change of contro	l payment	?	4a		Νo
b	Participate in, or receive payment from, a supplem	nental non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-	-based co	mpensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and	provide th	e 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 compensation contingent on the revenues of	A, line 1a,	did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νο
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section a compensation contingent on the net earnings of	A, line 1a,	did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νο
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section apayments not described in lines 5 and 6? If "Yes,"		· · · · · · · · · · · · · · · · · · ·	7		No
8	Were any amounts reported in Form 990, Part VII subject to the initial contract exception described in Part III	, .	·	8		N o

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)(1)-(111) 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-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits (B)(ı)-(D)		reported in prior Form 990 or Form 990-EZ
Joshua M Fogelson (I)			107,732	11,396	13,889	360,944	
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							

Part III Supplemental Information

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

Ident if ier	Ret urn Ref erence	Explanation
	Part I, Line 4a	The CEO participated in a 457(F) nonqualified deferred compensation plan during the fiscal year ended August 31, 2009 At August 31, 2009, \$150,000 was vested under the agreement. Vested amounts will be paid in ten annual installments beginning 60 days prior to the employee's 65th birthday

Schedule J (Form 990) 2008

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

DLN: 93493194011020

OMB No 1545-0047

Open to Public Inspection

Non-Cash Contributions

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

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

Name of the organization MINNEAPOLIS JEWISH FEDERATION

Employer identification number 41-0693866

Pa	Types of Property							
		(a) Check ıf	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line	(d) Method of de reven	etermi	nıng	
		applicable		, 1g				
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 .	Х	100	932,698	EXCHANGE TRADI	NGPR	RICE	
10	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
13	Q ualified 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 which the organization complete Acknowledgement	d Form 828		er for contributions for	29			0
	<u> </u>	-					Yes	No
30a	During the year, did the organizations at				l			
	least three years from the date		contribution, and which is	not required to be used for e	exempt purposes			
	for the entire holding period? .					30a		No
b	If "Yes", describe the arrangem	ent in Part 1	I					
31	Does the organization have a gi					31	Yes	
32a	Does the organization hire or us contributions?	e third part	es or related organizations	to solicit, process, or sell r	non-cash	32a		Νo
b	If "Yes", describe in Part II							
33	If the organization did not report checked, describe in Part II	t revenues i	n Column (c) for a type of p	roperty for which Column (a	ı) ıs			

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.				
Identifier	ReturnReference	Explanation		
240111111	Notal III Colored	Explanation		
	1	1		

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

DLN: 93493194011020

SCHEDULE 0

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for

responses to specific questions for the Form 990 or to provide any additional information.

'

2008

OMB No 1545-0047

pen to Public Inspection

Name of the organization
MINNEAPOLIS JEWISH FEDERATION

Employer identification number

41-0693866

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 1		THE FEDERATION HAS AN EXECUTIVE COMMITTEE, COMPRISED ENTIRELY OF VOTING MEMBERS OF THE BOARD OF DIRECTORS, WITH POWER TO TRANSACT ALL REGULAR BUSINESS OF THE FEDERATION DURING THE PERIOD BETWEEN MEETINGS OF THE BOARD OF DIRECTORS, SUBJECT TO ANY PRIOR LIMITATION IMPOSED BY THE BOARD OF DIRECTORS AND SUBJECT TO THE ULTIMATE DIRECTION AND CONTROL OF THE BOARD AUTHORITY OVER THE FOLLOWING MATTERS IS RETAINED BY THE BOARD OF DIRECTORS AND IS NOT DELEGATED TO THE EXECUTIVE COMMITTEE 1 THE DISTRIBUTION OF THE PROCEEDS OF THE FEDERATION'S ANNUAL CAMPAIGN AMONG THE FEDERATION'S BENEFICIARY AGENCIES AND OTHER RECIPIENTS, 2 THE ELECTION OF THOSE OFFICERS OF THE FEDERATION WHO ARE CHOSEN BY THE BOARD, 3 ANY DECISION TO ENTER INTO A MERGER OR CONSOLIDATION WITH ANOTHER ENTITY TO SELL, LEASE, TRANSFER OR OTHERWISE DISPOSE OF ALL OR SUBSTANTIALLY ALL OF THE FEDERATION'S PROPERTY AND ASSETS, 4 ANY AMENDMENT TO THE BYLAWS OR ARTICLES OF INCORPORATION OF THE FEDERATION, 5 ANY ELECTION TO FILL A VACANCY AMONG THE DIRECTORS

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		JAKE HURWITZ AND DOREEN FRANKEL - FAMILY RELATIONSHIP JERRY RIBNICK AND GIL MANN - FAMILY RELATIONSHIP JAKE HURWITZ, DOREEN FRANKEL AND DARREN LEDERFINE - BUSINESS RELATIONSHIP

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 4		THE FEDERATION'S BY LAWS WERE AMENDED IN JANUARY 2009 TO ELIMINATE THE ASSEMBLY OF DELEGATES THE ASSEMBLY WAS A FORUM FOR 1 DISCUSSING MAJOR ISSUES, 2 PROVIDING BROAD COMMUNITY INPUT AND DISSEMINATING INFORMATION, AND 3 FOSTERING AN UNDERSTANDING OF THE FEDERATION'S ACTIVITIES WITHIN THE COMMUNITY

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		THE FEDERATION'S MEMBERS CONSIST OF ANY INDIVIDUAL WHO IS AT LEAST 18 YEARS OLD AND WHO HAS PLEDGED OR CONTRIBUTED AT LEAST \$10 TO THE MOST RECENTLY COMPLETED ANNUAL GENERAL CAMPAIGN

ldentifier	Return Reference	Explanation
		SELECTION OF THE FOLLOWING DIRECTORS REQUIRE THE APPROVAL OF THE MEMBERS 1 ONE RABBINIC
Form 990,		REPRESENTATIVE SELECTED BY THE NOMINATING COMMITTEE, 2 ONE SYNAGOGUE PRESIDENT REPRESENTATIVE SELECTED BY THE NOMINATING COMMITTEE, 3 ONE REPRESENTATIVE OF THE BOARD
Part VI,		CHAIRS OR PRESIDENTS OF THE PARTNER AGENCIES SELECTED BY THE NOMINATING COMMITTEE, 4 ONE
Section A,		REPRESENTATIVE OF THE CHIEF EXECUTIVE OFFICERS OF THE PARTNER AGENCIES SELECTED BY THE
line 7a		NOMINATING COMMITTEE, 5 FIVE DIRECTORS-AT-LARGE SELECTED BY THE NOMINATING COMMITTEE, 6 UP
		TO THREE CAMPAIGN REPRESENTATIVES SELECTED BY THE PRESIDENT, AND 7 UP TO FIVE PRESIDENTIAL
		APPOINTMENTS SELECTED BY THE PRESIDENT,

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		The Form 990 was reviewed by the organization's Director of Finance and its Chief Financial Officer. It was then reviewed and approved by the Finance Committee of the organization. The finance committee is made up of independent members of the board of directors.

ldentifier	Return Reference	Explanation	
Form 990, Part VI, Section B, line 12c		The organization's conflict of interest policy applies to all Board members. Individuals are required to fully disclose the specific nature of any interest or involvement that may result in a conflict. Unless otherwise approved by the Board, an individual with a conflict is required to refrain from participating in consideration of the transaction. Board members are requested to complete an annual disclosure form	

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		The compensation of the chief executive officer is set by written agreement and evaluated periodically by the Compensation Committee of the organization. The Compensation Committee, which consists of two independent board members, met three times during the fiscal year. The Committee evaluated the compensation of the chief executive officer taking into account (among other matters) the compensation data published locally for the top 100 non-profit corporations, compensation data for similar sized. Jew ish Federations in other communities and the current economic situation. Compensation of other officers is set by the chief executive officer. Compensation is benchmarked against compensation data for similar sized. Jew ish Federations in other communities, which is review ed by the chief executive officer with the Treasurer, an independent board member.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		The organization's annual report is available on its wiebsite its audited financial statements and governing documents are made available upon request

ldentifier	Return Reference	Explanation
Schedule A, Part II, Line 10	Explanation for Other Income	MISCELLANEOUS INCOME FROM VARIOUS SOURCES REVENUES FROM FUNDRAISING EVENT ATTENDEES

ldentifier	Return Reference	Explanation
FORM 990, PART IV, LINE 12 AND FORM 990, PART XI, LINE 2B	AUDITED	In accordance with the IRS instructions to Form 990, the Minneapolis Jewish Federation is answering "No" to Form 990, Part IV, Line 12 and to Form 990, Part XI, Line 2B because its financial statements were audited on a consolidated basis. The organization did prepare financial statements in accordance with generally accepted accounting principles ("GAAP") for the year ended August 31, 2009, and these financial statements were audited on a consolidated basis by an independent accounting firm Additionally, the organization has a committee, made up of independent Board members, that is responsible for selection of the independent audit, oversight of the audit and approval of the audited consolidated financial statements.

ldentifier	Return Reference	Explanation
FORM 990, PART VII, SECTION A	ALLOCATION OF TIME BETWEEN RELATED ORGANIZATIONS	JOSHUA FOGELSON, KAREN HOPPE AND BRIAN HERSTIG ARE EMPLOYED BY THE MINNEAPOLIS JEWISH FEDERATION EACH SERVES BOTH THE FEDERATION AND THE JEWISH COMMUNITY BUILDING CORPORATION, A RELATED ORGANIZATION, FOR APPROXIMATELY 37 5 HOURS A WEEK, AS FOLLOWS MINNEAPOLIS JEWISH FEDERATION 37 0 HOURS JEWISH COMMUNITY BUILDING CORPORATION 0 5 HOURS JEREL SHAPIRO SERVES AS A BOARD MEMBER OF BOTH THE MINNEAPOLIS JEWISH FEDERATION AND THE JEWISH COMMUNITY BUILDING CORPORATION JEREL SERVES FOR APPROXIMATELY 2 0 HOURS A WEEK, AS FOLLOWS MINNEAPOLIS JEWISH FEDERATION 1 0 HOURS JEWISH COMMUNITY BUILDING CORPORATION 1 0 HOURS

DLN: 93493194011020

OMB No 1545-0047

Open to Public Inspection

Related Organizations and Unrelated Partnerships

Department of the Treasury

(Form 990)

SCHEDULE R

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.

Internal Revenue Service Name of the organization **Employer identification number** MINNEAPOLIS JEWISH FEDERATION 41-0693866 Part I Identification of Disregarded Entities (A)
Name, address, and EIN of disregarded entity (B) (E) Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity **Identification of Related Tax-Exempt Organizations** Name, address, and EIN of related organization Legal domicile (state Primary activity Exempt Code section Public charity status Direct controlling or foreign country) (if section 501(c)(3)) entity JEWISH COMMUNITY BUILDING CORPORATION REAL ESTATE HOLDING 13100 WAYZATA BOULEVARD 200 MN 501(C)(25) N/A N/A COMPANY MINNETONKA, MN55305 41-1933056 KELEN FAMILY FOUNDATION SUPPORT MINNEAPOLIS 4900 IDS TOWER 80 SOUTH 8TH STREET MN 501(C)(3) 11 - TYPE 3 OTHER N/A JEWISH FEDERATION MINNEAPOLIS, MN55402 41-1854293 EFFRESS-MILLER FAMILY FOUNDATION SUPPORT MINNEAPOLIS 8545 AVENIDA DE LAS ONDAS MN 501(C)(3) 11 - TYPE 3 OTHER N/A JEWISH FEDERATION LA JOLLA, CA92037 41-1781993 THE JUDITH AND MICHAEL BERMAN FOUNDATION

SUPPORT MINNEAPOLIS

SUPPORT MINNEAPOLIS

JEWISH FEDERATION

JEWISH FEDERATION

13100 WAYZATA BOULEVARD 200

OREN AND SHARRON STEINFELDT FOUNDATION

MINNETONKA, MN55305

26-0181739

240 BRIDLE LANE

HOPKINS, MN55305 13-4228266

MN

MN

501(C)(3)

501(C)(3)

11 - TYPE 1

11 - TYPE 1

N/A

N/A

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

Part V Transactions with Related Organizations	S
--	---

Part	V Transactions with Related Organizations							
N	lote. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No				
LDur	ing the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?							
a F	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No				
b (Gift, grant, or capital contribution to other organization(s)	1b		No				
c 0	Gift, grant, or capital contribution from other organization(s)	1c	Yes					
d L	d Loans or loan guarantees to or for other organization(s)							
e Loans or loan guarantees by other organization(s)								
f S	Sale of assets to other organization(s)	1f		No				
g F	g Purchase of assets from other organization(s)							
h E	h Exchange of assets							
i Lease of facilities, equipment, or other assets to other organization(s)								
j L	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)								
I P	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 F	Reimbursement paid to other organization for expenses	10		No				
p F	Reimbursement paid by other organization for expenses	1р		No				
q	_	1q		No				
r O	Other transfer of cash or property from other organization(s)	1r		No				
	f 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) Transaction Name of other organization(s) (C) Amount Involved							
(1)	JEWISH COMMUNITY BUILDING CORPORATION	-	100 900					

	(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1)	JEWISH COMMUNITY BUILDING CORPORATION	J	190,800
(2)	OREN AND SHARRON STEINFELDT FOUNDATION	С	50,000
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership

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

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