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990-EZ

Short Form **Return of Organization Exempt From Income Tax**

2009

OMB No 1545-1150

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

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

Open to Public

Department of the Treasury Inspection ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service A For the 2009 calendar year, or tax year beginning 2009, and ending , 20 C Name of organization B Check if applicable D Employer identification number Please use IRS Address change 13-3275989 American Friends of Yad Layeled label or Name change Number and street (or P O box, if mail is not delivered to street address) orint o Room/suite E Telephone number Initial return type. 732-370-3413 Terminated Specific City or town, state or country, and ZIP + 4 F Group Exemption Amended return Instruc Lakewood, NJ 08701 Application pending Number > G Accounting Method ☑ Cash ☐ Accrual • Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). Other (specify) ▶ H Check ► ☐ if the organization is not N/A required to attach Schedule B (Form 990, I Website: ▶ J Tax-exempt status (check only one) — ☑ 501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or 990-EZ, or 990-PF) If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) 113314 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 0 Membership dues and assessments . . . 3 4 4 5018 5a Gross amount from sale of assets other than inventory 5a Less: cost or other basis and sales expenses 5b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 0 C 5c Revenue Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here Gross revenue (not including \$ 6a b Less: direct expenses other than fundraising expenses 6b Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . 0 6c Gross sales of inventory, less returns and allowances 7a Less: cost of goods sold 7b 0 C Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c 0 8 Other revenue (describe ► 8 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 118332 9 9 10 Grants and similar amounts paid (attach schedule) 10 119459 Benefits paid to or for members 11 11 O Salaries, other compensation, and employee benefits RECEIVED 12 12 0 Professional fees and other payments to independent contractors . 13 13 0 14 Occupancy, rent, utilities, and maintenance 14 0 15 Printing, publications, postage, and shipping 15 0 16 Other expenses (describe ► Bank Fees 16 78 OGDEN. UT 17 Total expenses. Add lines 10 through 16 . 17 119537 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 (1205)Assets 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 428400 19 20 Š Other changes in net assets or fund balances (attach explanation) 20 0 Net assets or fund balances at end of year. Combine lines 18 through 20 21 427195 Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.) (A) Beginning of year (B) End of year 428400 22 22 Cash, savings, and investments 427195 Land and buildings 23 23 24 Other assets (describe ▶ 24 25 Total assets 428400 25 427195 Total liabilities (describe ▶ 26 Net assets or fund balances (line 27 of column (B) must agree with line 21)

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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Cat No 106421

Form 990-EZ (2009)

427195

428400 27

	Statement of Program Service Accom										
Par	Expenses										
What	(Required for section 501(c)(3) and 501(c)(4)										
	escribe what was achieved in carrying out the organization's exempt purposes. In a clear and concise										
	ner, describe the services provided, the number o	f persons benefited, and o	ther relevant info	rmation for		izations and section a)(1) trusts, optional					
each	program title.				for ot						
28	The organization's purpose is to promote religious a	nd charitable needs within th	e community.								
	This is done by providing assistance to deserving and needy students, and awarding grants to										
	institutions of Jewish learning and charitable causes	······									
,	(Grants \$) If this amount	28a	119459								
29											
		includes foreign grants, che			29a						
30			5CK 11616	<u></u>	250						
30											
				····							
	/Crosts C	unal idaa faralaa araata ah			200						
24		includes foreign grants, che			30a						
31	Other program services (attach schedule) (Grants \$) If this amount	ncludes foreign grants, che			31a						
32	Total program service expenses (add lines 28a t				31a						
	List of Officers, Directors, Trustees, and Key					tions for Part IV)					
ı- aı	List of Officers, Directors, Trustees, and Rey	(b) Title and average	(c) Compensation	(d) Contributio		(e) Expense					
	(a) Name and address	hours per week	(If not paid,	employee benefit	plans &	account and					
A b	ham Shulman	devoted to position	enter -0)	deferred comper	isauon	other allowances					
	erhill Rd.	President - part	0		0	. 0					
	hulman										
	th Street	Vice President - part	0	ļ	0	0					
	b Shulman										
	Monmouth Avenue	part	0		0	0					
100	Worlden Avenue										
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Part	Other information (Note the statement requirements in the instructions for Part V.)				
			Yes	No	
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		~	
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		/	
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.				
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		1	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b			
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36			
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a N/A			4	
b	Did the organization file Form 1120-POL for this year?	37b		~	
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		~	
b	If "Yes," complete Schedule L, Part II and enter the total amount involved				
39	Section 501(c)(7) organizations. Enter:		٠	`	
а	Initiation fees and capital contributions included on line 9	'	, e	*	
	Gross receipts, included on line 9, for public use of club facilities		**	***	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶	4	, ,	4	
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified		å	l	
	person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		>	
C	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on		*		
	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		, ,		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization		, &	,	
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	<u> </u>	· ·	
41	List the states with which a copy of this return is filed. ▶				
42a	The organization's books are in care of ▶ Organization Telephone no. ▶ 7	32-37	0-341	3	
	Located at ► 32 7th Street ZIP + 4 ►	087	701		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority			1	
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No	
	account)?	42b	ļ.,	~	
	If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		1	
	If "Yes," enter the name of the foreign country: ▶	720			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year \Delta 43	· ·	.	▶ ⊔	
			Yes	No	
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		162	140	
	Form 990-EZ	44	<u> </u>	1	
45	is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If		 	-	
	"Yes," Form 990 must be completed instead of Form 990-EZ	45		1	
)-F7	<u> </u>	

Part V	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 an	section 4947(a)(1) 17(a)(1) nonexemp id 51.	nonexem t charitable	pt charitab trusts mus	le trusts only. A st answer questio	ll sec ns 46	tion 3–49b	
	Did the organization engage in direct or indirect						Yes N	<u>o</u> _
	candidates for public office? If "Yes," complete S					46		<u>_</u>
	Did the organization engage in lobbying activities					47		<u>/</u>
	Is the organization a school as described in section		,			48		<u>/</u>
	Did the organization make any transfers to an ex If "Yes," was the related organization a section 5					49a 49b		<u>_</u>
50	Complete this table for the organization's five his employees) who each received more than \$100,000.	ghest compensated	employees	(other than o	officers, directors, t	ruste		ey
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	ge (c)	Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e)	Expense count and	
None				· · · · ·	-			<u> </u>
								_
f	Total number of other employees paid over \$100),000 ▶					•	_
None	(a) Name and address of each independent contractor	paid more than \$100,000		(b) Ty	pe of service	(c) Co	mpensatio	n
					_		.	
d	Total number of other independent contractors e	each receiving over s	\$100,000					
	Under penalties of perjury, I declare that I have examine and belief, it is true, correct, and complete Declaration							ј е
Sign Here	Signature of officer Date Date							
	Eli Shulman - Vice President Type or pnnt name and title		···					
Paid Prepare	Preparer's signature	С	ì	Check if self- employed ▶ ☐	Preparer's identifying num	nber (Se	e instruction	s)
Use On	ly yours if self-employed), address, and ZIP + 4			El Pr	N ►			_
May th	e IRS discuss this return with the preparer shown	n above? See instruc	ctions .		▶ ☐	Yes	☐ No 0-EZ (20	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

following persons?

Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047 2009 Open to Public Inspection

No

11g(i)

11g(ii)

Employer identification number Name of the organization American Friends of Yad Layeled 13 3275989 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi), (Complete Part II) ☑ An organization that normally receives. (1) more than 33⅓ % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33/4 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a 🗌 Type I **b** ☐ Type II **c** ☐ Type III–Functionally integrated d ☐ Type III-Other e Dy checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). f

(iii) A 35% controlled entity of a person described in (i) or (ii) above?									
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))			(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
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									· · · · · · · · · · · · · · · · · · ·
	·								•
									
									
Total									···

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting

organization, check this box

(ii) A family member of a person described in (i) above?

Since August 17, 2006, has the organization accepted any gift or contribution from any of the

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii)

and (iii) below, the governing body of the supported organization?

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. Section B. Total Support (e) 2009 Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (f) Total Amounts from line 4 . . . Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or 10 loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10 . Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 15 % Public support percentage from 2008 Schedule A, Part II, line 14 16a 331/2 % support test - 2009. If the organization did not check the box on line 13, and line 14 is 331/2 % or more, check this box b 331/3 % support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3 % or more, check this 17a 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. b 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ □

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

<u> </u>	(Complete only if you checke	ed the box or	line 9 of Pa	π 1.)								
	tion A. Public Support	(-) 6555	41.0000									
Ça	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total					
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	443007	160936	220612	319032	113314	1256901					
2	Gross receipts from admissions, merchandise											
	sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	0	o	0	0	0	0					
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0					
4	Tax revenues levied for the organization's benefit and either paid to or expended on											
	its behalf	0	0	0	0	0	0					
5	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	o	0					
6	Total. Add lines 1 through 5	443007	160936	220612	319032	113314	1256901					
-	Amounts included on lines 1, 2, and 3											
<i>1</i> a	received from disqualified persons .	0	0	0	0	0	0					
b	Amounts included on lines 2 and 3 received from other than disqualified persons that											
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	o	o	ا ه	0	o	0					
c	Add lines 7a and 7b	0	0	0	0	0	0					
8	Public support (Subtract line 7c from line 6)			* * * *	e\$ 2 4.	`` * {* ♦ 4;	1256901					
Sec	tion B. Total Support		~			<u> </u>						
Ca	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total					
9	Amounts from line 6	443007	160936	220612	319032	113314	1256901					
-	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2014	14782	8783	11065	5018	41662					
b	Unrelated business taxable income (less											
	section 511 taxes) from businesses	_]		_			_					
	acquired after June 30, 1975	0	0	0	0	0	0					
C	Add lines 10a and 10b	2014	14782	8783	11065	5018	41662					
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0					
12	Other income Do not include gain or loss from the sale of capital assets					į						
	(Explain in Part IV)	0	0	0	0	0	0					
13	Total support. (Add lines 9, 10c, 11, and 12.)	445021	175718	229395	330097	118332	1298563					
First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here												
Sec	tion C. Computation of Public Su	pport Percer	ntage									
15	Public support percentage for 2009 (lin			e 13, column	(f))	15	96.7 %					
16	Public support percentage from 2008 S				<u></u>	16	97.2 %_					
Sec	tion D. Computation of Investmen						20					
17	Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) . 17 3.2 %											
18												
19a	33% % support tests—2009. If the org.	anization did n	ot check the be	ox on line 14, a	and line 15 is n	nore than 33% S	%, and line Inization ▶ 🗹					
4-												
b	line 18 is not more than 331/3 %, check this	s box and stop	here. The orga	nızatıon qualifie	s as a publicly	supported orga	nization 🕨 📙					
20_												