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Part II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
A S S E T S	1	Cash – non-interest-bearing	34,392.	49,702.	49,702.
	2	Savings and temporary cash investments	2,432,020.	1,835,155.	1,835,155.
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable			
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7	Other notes and loans receivable (attach sch)			
		Less allowance for doubtful accounts			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges	115,450.	221,492.	221,492.
	10a	Investments – U S and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule)			
	c	Investments – corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment. basis	3,225,698.		
		Less accumulated depreciation (attach schedule)	158,682.	3,079,089.	3,067,016.
	15	Other assets (describe			
	16	Total assets (to be completed by all filers – see instructions Also, see page 1, item I)	5,660,951.	5,173,365.	5,173,365.
L I A B I L I T E S	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, & other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)			
N F E U N D A S B S A S E L T A S C O E R S	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.		<input type="checkbox"/>		
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.		<input checked="" type="checkbox"/>		
	27	Capital stock, trust principal, or current funds	5,660,951.	5,173,365.	
	28	Paid-in or capital surplus, or land, building, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see the instructions)	5,660,951.	5,173,365.	
	31	Total liabilities and net assets/fund balances (see the instructions)	5,660,951.	5,173,365.	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	5,660,951.
2	Enter amount from Part I, line 27a	2	-516,098.
3	Other increases not included in line 2 (itemize) ► See Other Increases Stmt	3	28,512.
4	Add lines 1, 2, and 3	4	5,173,365.
5	Decreases not included in line 2 (itemize) ►	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	5,173,365.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)			(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
a					
b					
c					
d					
e					
(e) Gross sales price		(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(i) Gains (Column (h)) gain minus column (k), but not less than -0- or Losses (from column (h))	
(i) Fair Market Value as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any		
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7			2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	If gain, also enter in Part I, line 8, column (c) (see the instructions) If (loss), enter -0- in Part I, line 8			3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No

If 'Yes,' the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2008	9,948,239.	3,798,066.	2.619291
2007	9,693,045.	3,657,978.	2.649837
2006	9,386,647.	3,445,946.	2.723968
2005	8,213,381.	4,758,195.	1.726155
2004	9,593,304.	2,360,278.	4.064481

2 Total of line 1, column (d)	2	13.783732
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	2.756746
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	5,512,948.
5 Multiply line 4 by line 3	5	15,197,797.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	32.
7 Add lines 5 and 6	7	15,197,829.
8 Enter qualifying distributions from Part XII, line 4	8	8,728,205.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instructions)

1 a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter 'N/A' on line 1.	
b	Date of ruling or determination letter _____ (attach copy of letter if necessary - see instr.)	1 65.
c	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input type="checkbox"/> and enter 1% of Part I, line 27b	2 0.
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)	3 65.
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4 0.
3	Add lines 1 and 2	5 65.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	6 0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	7 508.
6	Credits/Payments.	8 508.
a	2009 estimated tax pmts and 2008 overpayment credited to 2009	9 0.
b	Exempt foreign organizations – tax withheld at source	10 443.
c	Tax paid with application for extension of time to file (Form 8868)	11 Refunded
d	Backup withholding erroneously withheld	
7	Total credits and payments Add lines 6a through 6d	
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ► 443.	

Part VII-A Statements Regarding Activities

1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? **1a X**

b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? **1b X**
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities

c Did the foundation file **Form 1120-POL** for this year? **1c X**

d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year
 (1) On the foundation ► \$ _____ (2) On foundation managers ► \$ _____

e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____

2 Has the foundation engaged in any activities that have not previously been reported to the IRS? **2 X**
If 'Yes,' attach a detailed description of the activities

3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If 'Yes,' attach a conformed copy of the changes* **3 X**

4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year? **4a X**
 b If 'Yes,' has it filed a tax return on **Form 990-T** for this year? **4b X**

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?
If 'Yes,' attach the statement required by General Instruction T **5 X**

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either
 • By language in the governing instrument, or
 • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? **6 X**

7 Did the foundation have at least \$5,000 in assets at any time during the year? *If 'Yes,' complete Part II, column (c), and Part XIV* **7 X**

8 a Enter the states to which the foundation reports or with which it is registered (see the instructions) ► **8a See States Registered In X**
 b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990 PF to the Attorney General (or designate) of each state as required by *General Instruction G*? *If 'No,' attach explanation* **8b X**

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? *If 'Yes,' complete Part XIV* **9 X**

10 Did any persons become substantial contributors during the tax year? *If 'Yes,' attach a schedule listing their names and addresses* **10 X**

Part VII-A | Statements Regarding Activities Continued

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions) 11 X

12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? 12 X

13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address 13 X

14 The books are in care of ► Peggy Ugland Telephone no ► (614) 939-6000
Located at ► 8000 Walton Parkway, Suite 100 New Albany OH ZIP + 4 ► 43054

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here and enter the amount of tax-exempt interest received or accrued during the year ► 15

Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.

1a During the year did the foundation (either directly or indirectly)

(1) Engage in the sale or exchange, or leasing of property with a disqualified person? 1 Yes No

(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? 2 Yes No

(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? 3 Yes No

(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? 4 Yes No

(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? 5 Yes No

(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) 6 Yes No

b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?

Organizations relying on a current notice regarding disaster assistance check here ► 1b X

c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?

2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))

a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? 2a Yes NoIf 'Yes,' list the years ► 20__, 20__, 20__, 20__b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement – see the instructions.) 2bc If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20__, 20__, 20__, 20__ 2c3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? 3a Yes Nob If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009) 3b4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a Xb Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009? 4b X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

 Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

 Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

 Yes No

(4) Provide a grant to an organization other than a charitable, etc, organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)

 Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

 Yes No

b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?

5b

Organizations relying on a current notice regarding disaster assistance check here ►

c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

 Yes No

If 'Yes,' attach the statement required by Regulations section 53 4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

 Yes No

6b

X

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If 'Yes' to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

 Yes No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Leslie H. Wexner 8000 Walton Parkway, Suite 100 New Albany OH 43054	Trustee 1.00	0.	0.	0.
Barbara Abrahamsen 2123 Fair Ave. Bexley OH 43209	VP 40.00	297,745.	38,400.	0.
Dennis S. Hersch 551 Madison Ave., 9th Floor NY NY 10022	Secretary, Trustee 5.00	250,000.	0.	0.
See Information about Officers, Directors, Trustees, Etc		798,943.	95,500.	0.

2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Elizabeth Meyers 2192 Sandoval Rd Columbus OH 43220	Assistant to President 40.00	66,514.	6,199.	0.
Gordon T. Mars 249 S. Cassady Ave. Bexley OH 43209	Director, Graduate Fellow 40.00	144,273.	28,319.	0.
Karen Collum 5779 Albany Green Westerville OH 43081	Administrator 40.00	72,426.	16,424.	0.
Lori Baron 185 E. 85th St., Apt 21F NY NY 10028	Director, Operations 40.00	119,745.	19,941.	0.
Brigitte Dayan 215 W. 95th St. Apt 4K NY 10025	Director, Wexner Alumni 40.00	86,063.	14,747.	0.

Total number of other employees paid over \$50,000

3

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services – (see instructions). If none, enter 'NONE.'

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Rabbi Maurice Corson 181 East 81 St., Apt 11B New York	Rabbinical Advisory Services	65,000.
Rabbi Jay Moses 215 West 95th St, Apt 12F, N	Rabbinical Advisory Services	104,790.
Joe Kohane 2415 Sherwood Drive Bexley	Program Review	55,035.
Total number of others receiving over \$50,000 for professional services		► none

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc

Expenses

1 Religious education program to strengthen Jewish community leaders through intensive study of text in bible, history, philosophy and law led by experienced clergy & faculty. See statements 7 thru 12 for listing of seminars.	1,679,430.
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

1 None	0.
2	

All other program-related investments. See instructions

3	
Total. Add lines 1 through 3	► None

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

- 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes
- a Average monthly fair market value of securities
- b Average of monthly cash balances
- c Fair market value of all other assets (see instructions)
- d **Total** (add lines 1a, b, and c)
- e Reduction claimed for blockage or other factors reported on lines 1a and 1c
(attach detailed explanation)
- 2 Acquisition indebtedness applicable to line 1 assets
- 3 Subtract line 2 from line 1d
- 4 Cash deemed held for charitable activities Enter 1-1/2% of line 3
(for greater amount, see instructions)
- 5 **Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4
- 6 **Minimum investment return.** Enter 5% of line 5

1a	
1b	2,355,378.
1c	3,241,524.
1d	5,596,902.
1e	
2	
3	5,596,902.
4	83,954.
5	5,512,948.
6	275,647.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ► and do not complete this part.)

- 1 Minimum investment return from Part X, line 6
- 2a Tax on investment income for 2009 from Part VI, line 5
- b Income tax for 2009 (This does not include the tax from Part VI)
- c Add lines 2a and 2b
- 3 Distributable amount before adjustments Subtract line 2c from line 1
- 4 Recoveries of amounts treated as qualifying distributions
- 5 Add lines 3 and 4
- 6 Deduction from distributable amount (see instructions)
- 7 **Distributable amount as adjusted** Subtract line 6 from line 5 Enter here and on Part XIII, line 1

1	275,647.
2a	65.
2b	
2c	65.
3	275,582.
4	
5	275,582.
6	
7	275,582.

Part XII Qualifying Distributions (see instructions)

- 1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes
 - a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26
 - b Program-related investments – total from Part IX-B
- 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes
- 3 Amounts set aside for specific charitable projects that satisfy the
 - a Suitability test (prior IRS approval required)
 - b Cash distribution test (attach the required schedule)
- 4 **Qualifying distributions** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4
- 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income
Enter 1% of Part I, line 27b (see instructions)
- 6 **Adjusted qualifying distributions.** Subtract line 5 from line 4

1a	8,728,205.
1b	0.
2	
3a	
3b	
4	8,728,205.
5	0.
6	8,728,205.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				275,582.
2 Undistributed income, if any, as of the end of 2009			0.	
a Enter amount for 2008 only				
b Total for prior years 20 05, 20 06, 20 07				
3 Excess distributions carryover, if any, to 2009				
a From 2004 9,475,782.				
b From 2005 7,977,671.				
c From 2006 9,217,278.				
d From 2007 9,513,095.				
e From 2008 9,758,843.				
f Total of lines 3a through e 45,942,669.				
4 Qualifying distributions for 2009 from Part XII, line 4 ► \$ 8,728,205.			0.	
a Applied to 2008, but not more than line 2a				
b Applied to undistributed income of prior years (Election required – see instructions) 0.				
c Treated as distributions out of corpus (Election required – see instructions) 0.				
d Applied to 2009 distributable amount 275,582.				
e Remaining amount distributed out of corpus 8,452,623.				
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 54,395,292.				
b Prior years' undistributed income Subtract line 4b from line 2b 0.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed 0.				
d Subtract line 6c from line 6b Taxable amount – see instructions 0.				
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount – see instructions 0.				
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010 0.				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions) 9,475,782.				
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a 44,919,510.				
10 Analysis of line 9				
a Excess from 2005 7,977,671.				
b Excess from 2006 9,217,278.				
c Excess from 2007 9,513,095.				
d Excess from 2008 9,758,843.				
e Excess from 2009 8,452,623.				

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Part XIV: Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year – see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

Leslie H. Wexner

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

None

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs:

Check here □ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed.

Terry Moses, President

8000 Walton Parkway, Suite 110

New Albany

OHTO 43054

(614) 939-6060

b The form in which applications should be submitted, and information and materials they should include.

See Attached Pages 13 thru 35

c Any submission deadlines

See Attached Pages 13 thru 35

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

See Attached Pages 13 thru 35

Part XV. Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i> See attached schedule of grants on attached pages 5 thru 6. OH 43054		Attached	Attached	1,991,568.
Total				► 3a 1,991,568.
<i>b Approved for future payment</i>				
Total				► 3b

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (see the instructions)
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments				14	3,240.
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a Federal Excise Tax Refund				1	1,975.
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)					5,215.
13 Total Add line 12, columns (b), (d), and (e)					5,215.

(See worksheet in the instructions for line 13 to verify calculations.)

Part XVI:B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions)
N/A	

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting foundation to a noncharitable exempt organization of:

- (1) Cash
- (2) Other assets

b Other transactions

- (1) Sales of assets to a noncharitable exempt organization
- (2) Purchases of assets from a noncharitable exempt organization
- (3) Rental of facilities, equipment, or other assets
- (4) Reimbursement arrangements
- (5) Loans or loan guarantees
- (6) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

	Yes	No
1 a (1)	X	
1 a (2)	X	
1 b (1)	X	
1 b (2)	X	
1 b (3)	X	
1 b (4)	X	
1 b (5)	X	
1 b (6)	X	
1 c		X

d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes No

b If 'Yes,' complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

Date _____

Title

Signature of preparer		Date	Date
Paid Pre- parer's Use Only	Preparer's signature	10/22/0	Preparer's Identifying number (See Signature in the instrs)
	Firm's name (or yours if self- employed), address, and ZIP code	Cornick, Garber & Sandler, LLP 825 Third Avenue, 4th Floor New York, NY 10022	<input type="checkbox"/> Check if self- employed
		EIN	13-2620561
		Phone no	

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

OMB No 1545 0047

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF

2009

Name of the organization

Wexner Foundation

Employer identification number

23-7320631

Organization type (check one)

Filers of:

Form 990 or 990-EZ

Section:

501(c)(____) (enter number) organization
 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
 527 political organization

Form 990-PF

501(c)(3) exempt private foundation
 4947(a)(1) nonexempt charitable trust treated as a private foundation
 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions

General Rule —

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II)

Special Rules —

For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year

► \$ _____

Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions
for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

Employer identification number

Wexner Foundation

23-7320631

Part I **Contributors** (see instructions)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Wexner Family Charitable Fund 8000 Walton Parkway, Suite 100 New Albany OH 43054	\$ 6,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
2	Guardian Industries Corp 2300 Harmon Rd Auburn Hills MI 48326	\$ 1,153,865.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
3	Jewish Community Federation 121 Steuart St San Francisco CA 94105	\$ 175,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
4	Jewish Funders Network 150 West 30th St, #900 New York NY 10001	\$ 16,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
5	United Jewish Communities of Metrowest NJ 901 Route 10 East Whippany NJ 07981	\$ 175,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
6	Rose Foundation 600 S. Cherry St. Denver CO 80246	\$ 175,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Wexner Foundation

Employer identification number

23-7320631

Part I **Contributors** (see instructions)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	Jewish Federation of Greater Phoenix	\$ 175,000.	Person Payroll Noncash <input checked="" type="checkbox"/>
	12701 N. Scottsdale Rd., #201		(Complete Part II if there is a noncash contribution)
	Scottsdale AZ 85254		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	Jewish Federation Council of Greater Los Angeles	\$ 175,000.	Person Payroll Noncash <input checked="" type="checkbox"/>
	6505 Wilshire Blvd.		(Complete Part II if there is a noncash contribution)
	Los Angeles CA 90048		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9	Federation CJA	\$ 175,000.	Person Payroll Noncash <input checked="" type="checkbox"/>
	1 Carre Cummings Square		(Complete Part II if there is a noncash contribution)
	Montreal, Canada		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution)

Form 990-PF, Page 1, Part I, Line 18

Line 18 Stmt

Taxes (see the instructions)	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Payroll Taxes	143,244.			143,244.
State Filing Fees	475.			475.
Total	<u>143,719.</u>			<u>143,719.</u>

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses.	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Insurance	8,503.			8,503.
Repairs & Maintenance	59,797.			59,797.
Office Supplies, Postage & Misc	21,445.			21,445.
Delivery & Security	5,775.			5,775.
Moving & Other	761.			761.
Honoraria	225,811.			225,811.
Dues	1,019.			1,019.
Computer Expense	17,069.			17,069.
Parsonage	152,460.			152,460.
Continuing Education	1,449.			1,449.
Personnel Procurement				
Telephone	19,538.			19,538.
Bank Charges	2,178.			2,178.
Total	<u>515,805.</u>			<u>515,805.</u>

Form 990-PF, Page 2, Part III, Line 3

Other Increases Stmt

Depreciation	900.
Deferred Compensation-FMV Adjustment	27,612.
Total	<u>28,512.</u>

Form 990-PF, Page 4, Part VII-A, Line 8a

States Registered In

OH - Ohio
 NY - New York

Form 990-PF, Page 6, Part VIII, Line 1
Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> <u>Abigail S. Wexner</u> <u>One Whitebarn Rd.</u>	Trustee 1.00	0.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> <u>Larry S. Moses</u> <u>300 S. Drexel</u>	President 40.00	505,000.	56,000.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> <u>Cynthia Chazan</u> <u>53 Speir Dr.</u>	VP 40.00	293,943.	39,500.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> <u>Gideon Kaufman</u> <u>315 E. Hymen Ave.</u>	Trustee 1.00	0.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> <u>Peggy Ugland</u> <u>8000 Walton Parkway, #100</u>	Treasurer 1.00	0.	0.	0.
New Albany OH 43054				

Total

798,943. 95,500. 0.

Form 990-PF, Page 1, Part I
Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Vorys, Sater, Seymour &	General Corporate	424.			424.
Reshef & Schiff	Employment	1,952.			1,952.
Total		<u>2,376.</u>			<u>2,376.</u>

Form 990-PF, Page 1, Part I

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
<u>Ernst & Young</u>	<u>Financial Statements</u>	<u>36,250.</u>			<u>36,250.</u>
<u>Cornick, Garber & Sandl</u>	<u>Tax Accounting</u>	<u>5,750.</u>			<u>5,750.</u>
<u>Mordechai Wilk Manag</u>	<u>Accounting</u>	<u>27,988.</u>			<u>27,988.</u>
Total		<u>69,988.</u>			<u>69,988.</u>

Form 990-PF, Page 1, Part I

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
<u>ADP</u>	<u>Payroll Processing</u>	<u>4,410.</u>			<u>4,410.</u>
<u>Rabbi Jay Moses</u>	<u>Rabbinical Advisory Fees</u>	<u>104,790.</u>			<u>104,790.</u>
<u>Rabbi Maurice Corson</u>	<u>Rabbinical Advisory Fees</u>	<u>65,000.</u>			<u>65,000.</u>
Total		<u>174,200.</u>			<u>174,200.</u>

Supporting Statement of:

Form 990-PF, p1/Line 1(a)

Description	Amount
The Wexner Family Charitable Fund	6,000,000.
Guardian Industries Corp.	1,153,865.
Jewish Community Federation	175,000.
Jewish Funders Network	16,000.
United Jewish Communities of Metrowest NJ	175,000.
Rose Foundation	175,000.
Jewish Federation of Greater Phoenix	175,000.
Jewish Federation Council of Greater Los Angeles	175,000.
Fédération CJA	175,000.
Total	<u>8,219,865.</u>

The Wexner Foundation 23-7320631 FY 12-31-2009				
-----				Purpose
Page 11, Part XV, Line 3a-Grants	Date			
United Way Of Franklin County 360 S Third St Columbus , Ohio 43215 (501(c)3 Organization)	11-30-09	Cash	1,356	To fund community assistance programs
United Jewish Communities 39 Broadway, 15th Floor New York, NY 10006 (501(c)3 Organization)	10-27-09	Cash	25,000	To provide educational funding
The Schottenstein Chabad House 207 E 15th Ave Columbus,Oh 43201 (501(c)3 Organization)	7-17-09	Cash	2,500	To provide educational funding
Temple Israel 5419 E Broad St Columbus,Oh 43201 (501(c)3 Organization)	12-15-09	Cash	12,262	To support synagogue
Jewish Funders Network 150 West 30th St ,#900 NY,NY 10001 (501(c)3 Organization)	3-24-09	Cash	6,000	To provide educational funding
Congregation Tifereth Israel 1354 Broad St Columbus,Oh 43205 (501(c)3 Organization)	12-15-09	Cash	9,110	To support synagogue
Fellowships-Paid During Calendar Year				
Hebrew Union College 3101 Clifton Ave Cincinnati,Ohio 45220 (501(c)3 Organization)		Cash	150,000	To fund educational fellowships
Yeshiva University 500 W 185th St New York, New York 10033 (501(c)3 Organization)		Cash	80,000	To fund educational fellowships
Jewish Theological Seminary Broadway And 122nd St New York,New York 10027 (501(c)3 Organization)		Cash	210,000	To fund educational fellowships
Hebrew College 160 Herick RD Newton Centre,Ma 02459 (501(c)3 Organization)		Cash	80,000	To fund educational fellowships
Mills College 5000 MacArthur Blvd Oakland,Ca 94613 (501(c)3 Organization)		Cash	10,000	To fund educational fellowships
Emory University 200 Dowman, DR, #300 Atlanta, Ga (501(c)3 Organization)		Cash	10,000	To fund educational fellowships
American Jewish University 15600 Mulholland Dr Bel-Air,Ca 90077 (501(c)3 Organization)		Cash	20,000	To fund educational fellowships
Yeshivat Chovevei Torah Rabbinical School 550W 110th St New York,New York 10025 (501(c)3 Organization)		Cash	60,000	To fund educational fellowships

Columbia University 210 Kent Hall New York, New York 10025 (501(c)3 Organization)	Cash	30,000	To fund educational fellowships
Tufts University 160 Packard Ave Medford, Ma 02155 (501(c)3 Organization)	Cash	30,000	To fund educational fellowships
Brandeis University 415 South Street Waltham, Mass 02254 (501(c)3 Organization)	Cash	30,000	To fund educational fellowships
Reconstructionist Rabbinical College Church Road & Greenwood Avenue Wyncote, Pa 19095 (501(c)3 Organization)	Cash	20,000	To fund educational fellowships
Harvard University Cambridge, Mass 02138 (501(c)3 Organization)	Cash	895,340	To fund educational fellowships
CUNY Graduate School 33 W 42nd St New York, New York 10036 (501(c)3 Organization)	Cash	20,000	To fund educational fellowship
University of Southern California 700 Childs Way Los Angeles, Ca 99089 (501(c)3 Organization)	Cash	20,000	To fund educational fellowship
New York University 100 Washington Square East New York, New York 10003 (501(c)3 Organization)	Cash	205,000	To fund educational fellowship
Washington University 1 Brookings Dr St Louis, Mo 63130 (501(c)3 Organization)	Cash	20,000	To fund educational fellowship
Princeton University 103 Clio Hall Princeton, NJ 08544 (501(c)3 Organization)	Cash	10,000	To fund educational fellowship
University of Pennsylvania 3451 Walnut Street Philadelphia, Pa 19104 (501(c)3 Organization)	Cash	20,000	To fund educational fellowship
Middlebury College PO Box 1326 Williston, VT 05495 (501(c)3 Organization)	Cash	5,000	To fund educational fellowship
University of Toronto 252 Bloor St W, 12th Floor Toronto, Ontario M5S 1V6 (501(c)3 Organization)	Cash	10,000	To fund educational fellowship
Total Grants Paid		1,991,568	

7

WEXNER HERITAGE PROGRAM
 2009-2010 SEMINAR CALENDAR
San Francisco 08
Mondays 5:30 – 9:30 p.m.
 (18 Sessions)

<i>Date</i>	<i>Faculty</i>
August 31, 2009	Rabbi Yosef Kanesfky
September 14, 2009	Rabbi Yosef Kanesfky
October 5, 2009	Rabbi Yosef Kanesfky
October 19, 2009	Rabbi Yosef Kanesfky
November 2, 2009	Rabbi Yosef Kanesfky
November 23, 2009*	Cindy Chazan
November 30, 2009	Rabbi Saul Berman
December 14, 2009	Rabbi Saul Berman
January 4, 2010	Rabbi Saul Berman
January 25, 2010**	Rabbi Saul Berman
February 8, 2010	Rabbi Daniel Landes
February 22, 2010	Rabbi Daniel Landes
March 8, 2010*	Rabbi Daniel Landes
March 15, 2010	Rabbi Daniel Landes
April 12, 2010	Rabbi Elliot Dorff
April 26, 2010	Rabbi Elliot Dorff
May 10, 2010	Rabbi Elliot Dorff
May 24, 2010	Larry S. Moses

***One week between classes**

****Switch Locations**

Sessions #1-9:

PJCC

800 Foster City Blvd.
 Foster City, CA 94404

Sessions #10-18:

JCF

121 Steuart Street
 San Francisco, CA 9410

**WEXNER HERITAGE PROGRAM
2009-2010 SEMINAR CALENDAR**

Phoenix 09

**Tuesdays 5:30 – 9:30 p.m.
(18 Sessions)**

<i>Date</i>	<i>Faculty</i>
September 1, 2009	Rabbi Edward Feinstein
September 15, 2009	Rabbi Edward Feinstein
September 29, 2009	Rabbi Edward Feinstein
October 13, 2009	Rabbi Edward Feinstein
October 27, 2009	Rabbi Edward Feinstein
November 17, 2009	Rabbi Edward Feinstein
December 1, 2009	Rabbi Jay Moses
December 15, 2009	Dr. Deena Aranoff
January 5, 2010	Dr. Deena Aranoff
January 19, 2010	Dr. Deena Aranoff
February 9, 2010	Dr. Deena Aranoff
February 23, 2010	Dr. Deena Aranoff
March 10, 2010*	Dr. Yehuda Kurtzer
March 23, 2010	Dr. Robin Judd
April 13, 2010	Dr. Robin Judd
April 27, 2010	Dr. Robin Judd
May 11, 2010	Dr. Robin Judd
May 25, 2010	Dr. Robin Judd

***Wednesday**

**Western National Bank
(Bryan Kort's Office)
6500 N. Scottsdale Road
Scottsdale, AZ 85253**

WEXNER HERITAGE PROGRAM
2009-2010 SEMINAR CALENDAR
Montreal 09
Tuesdays 5:30 – 9:30 p.m.
(18 Sessions)

<i>Date</i>	<i>Faculty</i>
September 1, 2009	Rabbi Dov Lerea
September 15, 2009	Rabbi Dov Lerea
September 29, 2009	Rabbi Dov Lerea
October 13, 2009	Rabbi Dov Lerea
October 27, 2009	Rabbi Dov Lerea
November 17, 2009	Rabbi Dov Lerea
December 1, 2009	Cindy Chazan
December 15, 2009	Dr. Benjamin Gampel
January 5, 2010	Dr. Benjamin Gampel
January 19, 2010	Dr. Benjamin Gampel
February 9, 2010	Dr. Benjamin Gampel
February 23, 2010	Dr. Benjamin Gampel
March 9, 2010	Dr. Derek Penslar
March 23, 2010	Dr. Derek Penslar
April 13, 2010	Dr. Derek Penslar
April 27, 2010	Dr. Derek Penslar
May 11, 2010	Rabbi Jay Moses
May 25, 2010	Dr. Derek Penslar

RSM Richter Wealth Management Inc.
(Danny Ritter's Office)
2 Place Alexis Nihon Suite 1820
Westmount, QC H3Z3C1
Canada

WEXNER HERITAGE PROGRAM
2009-2010 SEMINAR CALENDAR
MetroWest 08
Tuesdays 5:30 – 9:30 p.m.
(18 Sessions)

<i>Date</i>	<i>Faculty</i>
September 8, 2009	Arna Poupka Fisher
September 15, 2009*	Arna Poupka Fisher
September 29, 2009	Arna Poupka Fisher
October 13, 2009	Arna Poupka Fisher
October 27, 2009	Arna Poupka Fisher
November 17, 2009	Rabbi Jay Moses
December 1, 2009	Rabbi Aaron Panken
December 15, 2009	Rabbi Aaron Panken
January 5, 2010	Rabbi Aaron Panken
January 19, 2010	Rabbi Aaron Panken
February 9, 2010	Dr. Lawrence Hoffman
February 23, 2010	Dr. Lawrence Hoffman
March 9, 2010	Dr. Lawrence Hoffman
March 23, 2010	Dr. Lawrence Hoffman
April 13, 2010	Rabbi Shai Held
April 27, 2010	Rabbi Shai Held
May 11, 2010	Rabbi Shai Held
May 25, 2010	Cindy Chazan

***One week between classes**

Lowenstein Sandler PC
 65 Livingston Avenue
 Roseland, New Jersey 07068
 Tel: 973.597.2500

WEXNER HERITAGE PROGRAM
2009-2010 SEMINAR CALENDAR
Los Angeles 09
Tuesdays 5:30 – 9:30 p.m.
(18 Sessions)

<i>Date</i>	<i>Faculty</i>
September 1, 2009	Rabbi Lavey Derby
September 15, 2009	Rabbi Lavey Derby
September 29, 2009	Rabbi Lavey Derby
October 13, 2009	Rabbi Lavey Derby
October 27, 2009	Rabbi Lavey Derby
November 17, 2009	Rabbi Lavey Derby
December 2, 2009*	Rabbi Jay Moses
December 15, 2009	Dr. Matthew Goldish
January 5, 2010	Dr. Matthew Goldish
January 19, 2010	Dr. Matthew Goldish
February 9, 2010	Dr. Matthew Goldish
February 23, 2010	Dr. Matthew Goldish
March 9, 2010	Dr. Yehuda Kurtzer
March 23, 2010	Dr. Alan Levenson
April 13, 2010	Dr. Alan Levenson
April 27, 2010	Dr. Alan Levenson
May 11, 2010	Dr. Alan Levenson
May 25, 2010	Dr. Alan Levenson

***Wednesday**

American Jewish University
 Familian Campus
 15600 Mulholland Drive
 Bel Air, CA 90077

WEXNER HERITAGE PROGRAM
2009-2010 SEMINAR CALENDAR
Denver 08
Mondays 5:30 – 9:30 p.m.
(18 Sessions)

<i>Date</i>	<i>Faculty</i>
August 31, 2009*	Rabbi Nathaniel Helfgot
September 21, 2009	Rabbi Nathaniel Helfgot
September 29, 2009**	Rabbi Nathaniel Helfgot
October 12, 2009	Rabbi Nathaniel Helfgot
November 1, 2009	Rabbi Nathaniel Helfgot
November 16, 2009*	Larry S. Moses
November 30, 2009	Dr. Michael Berger
December 14, 2009	Dr. Michael Berger
January 11, 2010	Dr. Michael Berger
January 25, 2010*	Dr. Michael Berger
February 1, 2010	Dr. Lawrence Hoffman
February 22, 2010	Dr. Lawrence Hoffman
March 8, 2010	Dr. Lawrence Hoffman
March 22, 2010	Dr. Lawrence Hoffman
April 12, 2010	Dr. Noam Pianko
April 19, 2010	Dr. Noam Pianko
May 3, 2010	Dr. Noam Pianko
May 24, 2010	Rabbi Elka Abrahamson

*Alternate Location

**Tuesday

Rose Community Foundation
 600 South Cherry Street
 Suite 1200
 Denver, CO 80246

Temple Emanuel
(Aug 31; Nov. 16, Jan. 25)
 51 Grape Street
 Denver, CO 80220

THE WEXNER FOUNDATION
2009 DEPRECIATION SCHEDULE
23-7320631

Date	Description	Cost	Method	2009 Depreciation	Accu Depreciation
Furniture, Fixtures & Equipment					
Furniture & Fixtures					
10-88	Roche Buboi - Table	3,516 00	10yr S/L	0 00	3,516 00
10-88	Continental Office - Furniture & Cabinets	15,665 00	10yr S/L	0 00	15,665 00
12-88	Continental Office - Furniture & Cabinets	5,274 00	10yr S/L	0 00	5,274 00
12-88	Art Exchange - Paintings	3,010 00	10yr S/L	0 00	3,010.00
12-88	M A Fox - Credenza	3,810 00	10yr S/L	0 00	3,810.00
12-88	M A Fox - Conference Table	5,385 00	10yr S/L	0 00	5,385.00
2-89	Continetial-Radius Board	1,073 00	10yr S/L	0 00	1,073 00
2-89	Forbus-Table	3,225 00	10yr S/L	0 00	3,225 00
2-89	Continetial-Files	1,413 00	10yr S/L	0 00	1,413 00
1-89	Builders Appliance-Refridge	1,248 00	10yr S/L	0 00	1,248 00
3-99	New York Office Furniture + Equip	21,915 62	10yr S/L	1,095 80	21,915 62
3-99	New York Office Carpet	2,800 00	10yr S/L	140 00	2,800 00
11-00	Office Furniture	38,939 80	10yr S/L	3,893 98	36,992 81
3/01	Computer Equipment	2,079 58	10yr S/L	207 96	1,975 62
5-03	Telephone Equipment	5,991 18	10yr S/L	599 12	3,894 27
9-05	Office Furniture	15,442 49	10yr S/L	1,544 25	6,949 12
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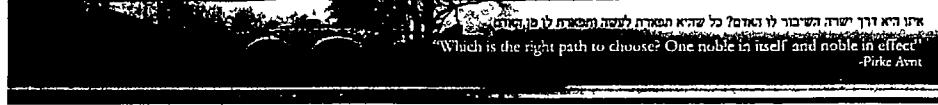
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Form
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Wexner Israel
Fellowship
Wexner Alumni
Jewish
Leadership
Resources
Members/Fellows/
Alumni Login
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Logout

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Which is the right path to choose? One noble in itself and noble in effect.
-Pirke Avot

ContentPane

LeftPane
APPLICATION FORM 1 - General Information

- 1 - General Information
- 2 - General Education
- 3 - Jewish Education
- 4 - Employment History
- 5 - Extra-Curricular Activities
- 6 - Additional Information
- 7 - References
- 8 - Essay A
- 9 - Essay B
- 10 - Review

We hope that this web application will make the application process to the Wexner Graduate Fellowship/Davidson Scholars Program as easy for you as possible.

The committee will read your application thoroughly and we encourage you to fill it out as thoughtfully and as completely as you can. There are no "spell check" or "word count" features as part of this application so we suggest that you write your answers in a program that has these features and then cut and paste your answers into the appropriate boxes in the application. Also, when asked to list things in order (such as your work experience or education), to save yourself time and frustration, we suggest that you figure out the order on a separate document before you put the information into the application. Finally, we recommend that you read through the whole application before filling it out so that you will have a sense of what is being asked of you.

You may fill out your application in multiple sessions. When you click the "Update and Continue" button at the end of each section your information will be saved for future editing. You do not need to fill out the application in order, but you will not be able to save a section unless all of the required information is entered in that section. You will receive an automatic computer response if you did not fill out any section of required information. You will be evaluated by the information that you provide in your application, your letters of recommendation, and your transcripts. No other outside materials (such as resumes, video tapes, term papers) will be accepted.

The deadline for submitting this web application along with all letters of recommendation, transcripts and test scores is Friday, February 12, 2010 at 9am (EST). We strongly recommend that you submit your application earlier than the deadline to allow for the possibility of any computer complications. You will receive an email by February 17, 2010 from Linda Smith confirming that your application is complete and will be considered. If you don't receive this email then write to Ms. Smith by 5pm on February 18, 2010. Should you have any questions when completing this application please contact Linda Smith at lsmith@wexner.net or (614) 939-6060.

Please note that this application is not able to work with the Chrome Web Browser. Firefox or Internet Explorer are preferred.

Edit Text
 Step
Step 1 of 10 1 2 3 4 5 6 7 8 9 10

Edit Text
 Step
General Information

Edit Text
 Step
Step 1 of 10 1 2 3 4 5 6 7 8 9 10

Edit Text
 Step
Jump to a section

Please correct the following errors before continuing:

- Please choose one or more influences before continuing.
- Please indicate your chosen professional career area.
- Please list the graduate programs to which you are applying.

1 If you are applying for other grants or scholarships for your graduate program please list them below
 Step
Step 1 of 10 1 2 3 4 5 6 7 8 9 10

2 Which of the following have been most influential in your decision to pursue a professional career in the Jewish community?
 Step
Step 1 of 10 1 2 3 4 5 6 7 8 9 10

- Family
- Mentors
- Professional Role Models
- Undergraduate Experiences
- Peers

- Teachers
- Summer Camp
- Israel Trip
- Jewish Day School
- Jewish Supplementary School
- Other

If you checked "other" please specify

3. Please indicate your chosen professional career area

The Wexner Graduate Fellowship Committee is interested in understanding your career goals. Candidates will be assessed in comparison to others with similar interests. Consider your choice carefully and explain it fully in your essays. If you are uncertain about which career area to choose please consult (via email) with Or Mars, Director of the Graduate Fellowship Program at omars@wexner.net

Candidates pursuing careers Jewish Education or Jewish Professional Leadership will, if selected, be designated a member of the Davidson Scholar cohort within The Wexner Graduate Fellowship

Please Select One

4. List the specific graduate programs and academic institutions to which you have applied to prepare for your professional career. Also indicate the application date and the projected enrollment date for each program

University Specific Program City State Start Date

[Click here to add a Program](#)

5. Please upload a recent photograph of yourself

Click "Browse" to locate a file on your computer, then "Upload" to send us the photo. Once you have uploaded a photograph it cannot be deleted but you may replace it with another photograph



[Browse](#) [Upload](#)

[Update and Continue](#)

[+ Add Question \(Update PDF\)](#)

[+ Add Button](#)

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Home	The Foundation	Wexner Fellows/ Davidson Scholars	Application Form	Wexner Heritage Program	Wexner Heritage Program Application Form	Wexner Israel Fellowship	Wexner Alumni	Jewish Leadership Resources	Members/Fellows/ Alumni Login	Wexner Admin	Adm	Logout
<div style="border: 1px solid black; padding: 10px; margin-bottom: 5px;"> History and Mission Message from the President Center for Public Leadership Central Ohio National/International Staff and Office Locations </div> <div style="border: 1px solid black; padding: 10px; margin-bottom: 5px;"> ThemeImagePane </div> <div style="border: 1px solid black; padding: 10px; margin-bottom: 5px;"> ContentPane </div>												

LeftPane	<p>APPLICATION FORM 2 - General Education</p> <p>Step 2 Education Step 2 of 10</p> <p>Edit Text Jump to a section ?</p> <p>1. List all high school, undergraduate and graduate schools that you have attended in chronological order with the most recent first. If you did not graduate from a school, enter all information necessary and then leave the graduated date blank</p> <p>(Once you have clicked the button below start by clicking your cursor in the first box. Move from box to box with "tab")</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>School Name</th> <th>Location</th> <th>Dates Attended</th> <th>Major Areas of Study</th> <th>Diploma/Degree Granted</th> <th>Date Graduated (MM/YYYY)</th> </tr> </thead> <tbody> <tr> <td colspan="6" style="text-align: center;">Click here to add a College</td> </tr> </tbody> </table> <p>2. List academic awards, honors, scholarships, and distinctions you have attained in your general education, as well as any publications you have authored (Please limit your response to 1,000 characters)</p> <p>3. Have you been suspended or dismissed from an academic institution? <input type="radio"/> No <input checked="" type="radio"/> Yes If you have been suspended or dismissed from any academic institution, please explain below, otherwise leave blank (Please limit your response to 1,000 characters)</p> <p>4. If you have not been enrolled in an institution of higher learning in the past year(s), please describe your activities since you were last enrolled. Let us know what you have been doing since leaving school (Please limit your response to 1,000 characters)</p> <p>5. In which foreign language(s) (other than Hebrew) are you proficient? Please rate yourself in the following categories as excellent, good, fair or poor (There will be an opportunity to rate yourself in Hebrew proficiency later)</p> <p>(Once you have clicked the button below start by clicking your cursor in the first box. Move from box to box with "tab")</p>	School Name	Location	Dates Attended	Major Areas of Study	Diploma/Degree Granted	Date Graduated (MM/YYYY)	Click here to add a College					
School Name	Location	Dates Attended	Major Areas of Study	Diploma/Degree Granted	Date Graduated (MM/YYYY)								
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Language Reading Comprehension Speaking Writing Translation

[Click here to add a Language](#)

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[Form Settings](#)

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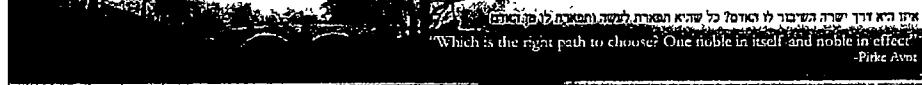
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History and Mission											
Message from the President											
Center for Public Leadership											
Central Ohio											
National/International											
Staff and Office Locations											
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"Which is the right path to choose? One noble in itself and noble in effect" Pink Avot											

ContentPane

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APPLICATION FORM 3 - Jewish Education

- ▶ 1 - General Information
- ▶ 2 - General Education
- ▶ 3 - Jewish Education
- ▶ 4 - Employment History
- ▶ 5 - Extra-Curricular Activities
- ▶ 6 - Additional Information
- ▶ 7 - References
- ▶ 8 - Essay A
- ▶ 9 - Essay B
- ▶ 10 - Review

Step

3 Jewish EducationStep 3 of 10  Edit Text

Jump to a section

- 1 Please list all elementary and secondary formal Jewish educational institutions that you attended starting with most recent

(Once you have clicked the button below start by clicking your cursor in the first box. Move from box to box with "tab". Also, you will not be able to switch the order of the list by simply moving the cursor - we suggest that you type out this list first and then type it into the application)

School Affiliation Location Type of Program Dates Attended[Click here to add a School](#)

- 2 List informal Jewish educational activities, including summer camps, youth groups, Israel trips or other programs in which you have participated starting with the most recent.

(Once you have clicked the button below start by clicking your cursor in the first box. Move from box to box with "tab". Also, you will not be able to switch the order of the list by simply moving the cursor - we suggest that you type out this list first and then type it into the application)

Organization Location Type of Program Your Role Dates of Participation[Click here to add an Activity](#)

- 3 List up to five university level courses in Jewish Studies. If you have taken more than five Jewish Studies classes then please list the ones that are most significant in your opinion. The committee will view the remaining courses on your transcripts

(Once you have clicked the button below start by clicking your cursor in the first box. Move from box to box with "tab".)

School Location Course Description Instructor Credit Units[Click here to add a Course](#)

- 4 Please list all formal Hebrew language study you have completed

Rate your Hebrew skill level in the following areas

Reading Comp Select

Speaking Select

Wrtng Select

Translation Select

- 5 List any academic awards, honors, scholarships and distinctions you have attained in your Jewish education as well as any related publications you have authored that you have NOT listed already in Step 2. (Please limit your response to 1,000 characters)

[Update and Continue](#)[+ Add Question \(Update PDF\)](#)[+ Add Button](#)[Form Settings](#)

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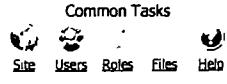
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אנו נבדך בין שורה ושכבה ול' גוון? כל שמי מוארת לשבח (השכבה) ול' גוון? (השורה)
 "Which is the right path to choose? One noble in itself and noble in effect"
 - Pirke Avot

ContentPane

LeftPane

APPLICATION FORM 4 - Employment History

- ▶ 1 - General Information
- ▶ 2 - General Education
- ▶ 3 - Jewish Education
- ▶ 4 - Employment History
- ▶ 5 - Extra-Curricular Activities
- ▶ 6 - Additional Information
- ▶ 7 - References
- ▶ 8 - Essay A
- ▶ 9 - Essay B
- ▶ 10 - Review

Step

4 Employment History

Step 4 of 10

 Edit TextJump to a section 

1. Please list all work experience (including teaching, camp counseling, etc) and indicate whether or not it was done in the Jewish community. Please list chronologically starting with your most recent work experience.

(Once you have clicked the button below start by clicking your cursor in the first box. Move from box to box with "tab". Also, you will not be able to switch the order of the list by simply moving the cursor - we suggest that you type out this list first and then type it into the application)

Dates of Employment Title Organization Jewish? Hrs per week

Click here to add a Work Experience  Update and Continue Add Question (Update PDF) Add Button Form Settings

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ContentPane

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APPLICATION FORM 5 - Extra-Curricular Activities

Step 5 of 10

Step 5 of 10

Extra-Curricular Activities & Interests

1. List and briefly describe your campus-related extracurricular activities, including positions of leadership (Please limit your response to 1,000 characters including spaces)

2. List and briefly describe your Jewish volunteer and other activities in the larger community (Please limit your response to 1,000 characters including spaces)

3. Describe your hobbies and leisure-time interests (Please limit your response to 1,000 characters including spaces)

Update and Continue

Add Question (Update PDF)

Add Button

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APPLICATION FORM 6 - Additional Information

- 1 - General Information
- 2 - General Education
- 3 - Jewish Education
- 4 - Employment History
- 5 - Extra-Curricular Activities
- 6 - Additional Information
- 7 - References
- 8 - Essay A
- 9 - Essay B
- 10 - Review

Step

6 Additional Information

Step 6 of 10

Edit Text

Jump to a section

- 1 Name of undergraduate university from which you graduated
- 2 Cumulative Undergraduate Grade Point Average

3 If any of your graduate programs to which you are applying require the GRE or another standardized test you must submit your scores in the blanks below. If your school requires a different graduate school entrance test please contact (via email) Or Mars, Director of the Graduate Fellowship Program at omars@wexner.net to determine its eligibility. GMAT and LSAT tests are eligible and you will need to send your scores directly to the Wexner Foundation at the address below

If none of the graduate programs to which you are applying require one of these exams then you may leave this field blank and you do not need to submit test scores. If your schools do not require one of these tests but you have taken one of them and feel that your scores will be helpful to your application then you may choose to include them here (if known) and submit official transcripts

Verbal

Quantitative

Analytical

Exam Date

(Month and Year)

If a graduate program to which you are applying requires a standardized entrance exam then your application will not be considered complete until GRE/LSAT/GMAT scores are verified through official records. If none of the graduate institutions to which you are applying require a standardized test then you do not need to submit scores

It is the responsibility of the applicant to make sure that these documents are received by the Foundation by 9:00 AM EST on Friday, February 12, 2010. The Foundation's institution number for the GRE is #3134. For other tests, the applicant must send an unopened test score transcript directly to:

Linda Smith
 The Wexner Foundation
 8000 Walton Parkway #110
 New Albany, OH 43054

A chance show us your creative side - Write your own question.

4 This space is designed for you to write your own question and to answer it in 250 words or less so that we can get a better sense of who you are. The committee encourages you to be creative in your question and answer and use this space to show us a side of you that may not normally come out in a written application

Question

Answer

[Update and Continue](#)[+ Add Question \(Update PDF\)](#)[+ Add Button](#)[⚙ Form Settings](#)

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Message from the President Center for Public Leadership Central Ohio National/International Staff and Office Locations							

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LeftPane <ul style="list-style-type: none"> <input checked="" type="radio"/> 1 - General Information <input type="radio"/> 2 - General Education <input type="radio"/> 3 - Jewish Education <input type="radio"/> 4 - Employment History <input type="radio"/> 5 - Extra-Curricular Activities <input type="radio"/> 6 - Additional Information <input type="radio"/> 7 - References <input type="radio"/> 8 - Essay A <input type="radio"/> 9 - Essay B <input type="radio"/> 10 - Review 	<p>APPLICATION FORM 7 - References</p> <p>Step 7 References Step 7 of 10</p> <p> Edit Text </p> <p> Jump to a section </p> <p> Electronic and Paper Reference Process</p> <p>Your references may be provided electronically (preferred) or through regular mail with a sealed and signed envelope. Our system will automatically send an email asking your references listed below to complete an online recommendation on your behalf. Your references will log into this program and type in their comments. When those comments are saved, you will receive an email confirming that the recommendation has been completed. If you do not have email addresses for all three individuals, you will need to download and print the PDF (paper) version and follow the directions. You may submit some recommendations electronically and some through regular mail.</p> <p><i>Please note that after you click "send email" the button will change to "re-send email". Your email will have been sent to the selected address. This option simply gives you the opportunity to re-send to the same person if necessary.</i></p> <p>Recommendation Types Provide the names, titles, telephone number and email address of the three individuals who will submit letters of recommendation on your behalf. At least one is to be from an academic instructor who can attest to your ability to succeed in a graduate program.</p> <p>You must enter three names, titles, and phone numbers before you can save the information on this page. If a reference person does not have an email address or does not wish to complete his/her letter of recommendation online, you may leave his/her email field blank and have him/her send in the form by regular mail.</p> <p>We advise that you contact your recommenders directly to insure that they received this information and that it did not go into their spam folder.</p> <p>We also advise that you check with your recommenders a few days before the deadline to insure that they have submitted a letter on your behalf.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Title</td> <td style="width: 15%;">First Name</td> <td style="width: 15%;">Last Name</td> <td style="width: 15%;">Phone</td> <td style="width: 15%;">Email Address</td> <td style="width: 15%; text-align: right; vertical-align: bottom;"> Send Email Send Email Send Email </td> </tr> <tr> <td>Academic Instructor</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Employment Supervisor</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Other</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <p style="text-align: center;"> Update and Continue</p> <p style="text-align: center;"> Add Question (Update PDF) Add Button Form Settings</p>	Title	First Name	Last Name	Phone	Email Address	Send Email Send Email Send Email	Academic Instructor						Employment Supervisor						Other					
Title	First Name	Last Name	Phone	Email Address	Send Email Send Email Send Email																				
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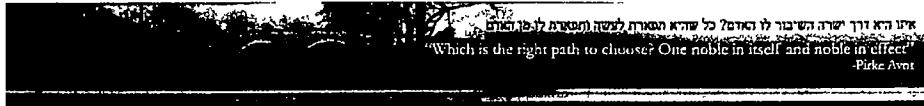
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Which is the right path to choose? One noble in itself and noble in effect
- Pirke Avot

ContentPane

LeftPane
APPLICATION FORM 8 - Essay A

Step 8
Step 8 of 10

Essay A
Jump to a section

Edit Text


Name of Applicant


Essay A Content Guidelines

We are interested in understanding who you are, your career goals and how your projected graduate program will best prepare you for these goals. In view of this, please describe in your essay the following

- 1 The development of your interest in your projected career, particularly the critical junctures that played an important role in this evolution (e.g. experiences, family influences, role models, ideas)
- 2 The leadership skills that you need to acquire to best prepare yourself for your projected career
- 3 The reasons for selecting your specific graduate program(s) and how your program(s) will address the leadership skills development articulated above.

NOTE:

Our system does not allow for any formatting. For paragraphs please "tab" by hitting the space bar a number of times.

Please limit your essay to 4,500 characters including spaces (approximately 2 pages, double-spaced, 12 point font and 3/4" margins.)

It is recommended that you write your essay with a program that has "spell check" and a character counter and then cut and paste it into the space below. Also, once you have done this be sure to scroll down to see that it all was pasted into the box below and double-check this same information on your final print-out before submitting.

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Essay on Leadership

אנו מודים לך שירך והシירך לא שודן? מהו מושג היותר חשוב?

"Which is the right path to choose? One noble in itself and noble in effect"

-Pitka Avni

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APPLICATION FORM 9 - Essay B

Step 9 of 10
Step 9 of 10

Essay B
Jump to a section

Edit Text

Name of Applicant

Essay B Content Guidelines

The Wexner Graduate Fellowship/Davidson Scholars Program is intended to facilitate the development of future professional leaders for the North American Jewish community. We are interested in your reflections on the North American Jewish community, focusing on its challenges and your sense of yourself as a future leader in that community. Please describe the following in your essay as fully as possible

1. As you consider the future of the North American Jewish community and your future as a Jewish professional, which issue most concerns you? Discuss your own approach to addressing this issue

2. Describe the leadership role(s) you see yourself playing in the North American Jewish community ten years from today

NOTE:

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It is recommended that you write your essay with a program that has "spell check" and a character counter and then cut and paste it into the space below. Also, once you have done this be sure to scroll down to see that it all was pasted into the box below and double-check this same information on your final print-out before submitting.

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1 - General Information
2 - General Education
3 - Jewish Education
4 - Employment History
5 - Extra-Curricular Activities
6 - Additional Information
7 - References
8 - Essay A
9 - Essay B
10 - Review

Step 10 Review Step 10 of 10

Edit Text

Jump to a section

Please ensure all sections of the form have been completed by referring to the checklist below

<input type="radio"/> 1 - General Information	<input type="radio"/> 6 - Additional Information
<input type="radio"/> 2 - General Education	<input type="radio"/> 7 - References
<input type="radio"/> 3 - Jewish Education	<input type="radio"/> 8 - Essay A
<input checked="" type="radio"/> 4 - Employment History	<input type="radio"/> 9 - Essay B
<input checked="" type="radio"/> 5 - Extra-Curricular Activities	<input type="radio"/> 10 - Review

Electronically submit your application for administrative review by checking the box below and clicking "Submit Completed Application"

I understand that if selected as a "Finalist" that I will be available for an in-person interview on either April 11, 12, 13, or 14 in New York City (at the Foundation's expense)

Also, I understand that if selected as a Wexner Fellow/Davidson Scholar that

- I will attend a 2-day orientation in May, 2010 in Columbus, OH
- I will attend a 5 - 6-day Summer Institute in the 2nd half of August for 4 years
- I will attend a 4-day Winter Institute in January for 4 years. (Usually around MLK Day)
- I will attend a 5-day retreat in November of my 3rd year
- Any change of my program must be approved by the Director of the Graduate Fellowship Program
- I intend to work as a Jewish professional in North America for at least 4 years

I have read the statements above, reviewed my application, and confirmed that it is complete

Please review and print your application before submitting. If you have trouble printing your application it may be that your computer is blocking pop-ups. Try disabling your pop-up blocker

Once your application is submitted you will not be able to make changes or print your application

I have printed my application

Add Question (Update PDF)
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The Wexner Israel Fellowship Program (WIFP)
Eligibility Form for Academic Year 2011-2012
WIFP Class XXIII

Thank you for your interest in the Wexner Israel Fellowship Program. The following form will help us evaluate your eligibility for submitting candidacy for the WIFP program, which will take place during Harvard University's academic year 2011-2012.

Please supply the information below in English, except where Hebrew is specified, and in both cases as completely as you can.

We will be in touch with you regarding your eligibility by return email or by phone.

Note that it is crucial to register at the earliest opportunity for the **TOEFL** (Test of English as a Foreign Language) or **GRE** (Graduate Record Examination). The final date for submission of scores this year is November 21, 2010. These scores should be (1) transmitted electronically to the Harvard Kennedy School, according to the instructions on HKS' admissions website; **and** (2) emailed by you to the Wexner Israel Fellowship Program office to: **wifp@wexner.net**.

Note: candidates who have **completed their undergraduate degree in an English-language university** are required by HKS to take the **GRE instead of the TOEFL**. Please refer to the information on the HKS website.

Harvard's Kennedy School (HKS) website can provide additional helpful and updated information to candidates.

It is recommended that you read the Foundation website thoroughly prior to filling in this form.

After completion of this form, go to "File", press the "Save As..." button, and save the file with your name. Once the file is saved, please send it as an email attachment to: **wifp@wexner.net**, along with an updated CV and photo ("head shot"). Please make sure you keep a copy of these materials.

If you have any questions, please contact Mrs. Anna Michel at **wifp@wexner.net** or 02-753-6035.

* Indicates required field (red frame)

General Information

*Family Name, *First Name _____

Prior Full Name _____

*Gender _____

*Date of Birth _____

(Please note that in order to be eligible, candidate must be at least 30 years and not more than 49 years of age on November 21, 2010.)

*Home Phone _____ *Cell Phone _____

Work Phone _____

*Email Address I _____ Email Address II _____

Present Mailing Address

*Address I

Street _____ POB _____

City/Town _____ Postal Code _____

Region _____ Country _____

Address II

Street _____ POB _____

City/Town _____ Postal Code _____

Region _____ Country _____

*Work Experience

Please attach your most updated CV to the email you use to send in this Eligibility Form. The CV may be submitted in Word or PDF format.

Limit your CV to 4,500 characters, including spaces (approximately 2 pages, double-spaced, 12 point font and 3/4" margins).

Title of current position, in English, including name of organization.

If you currently work for more than one organization, please indicate all relevant information.

Please be sure to select at least one of the options below, indicating only positions in which you are currently employed.

Government Ministries _____

Position _____

Government Authorities

Position _____

Government Companies

Position _____

Local Government

Organization _____ Position _____

IDF

Position _____

Hospitals

Position _____

HMOs (Kupot Holim)

Position _____

NGO (name of organization)

Position _____

Other (name of organization)

Position _____

תיאור תפקיד נוכחי, בעברית, כולל שם ארגון מ towering תפקיד בחירה רלוונטי.
 באם הינך מועסק/ת כרגע ביוטר מקום העבודה אחד, אנא בחר/י בהתאם.
 אנא וודאי כי בחרת לפחות אחת מהאפשרויות מטה, המציינת את מקום העבודה הנוכחי.

משרדיה ממשלה

תפקיד _____

רשותות ממשלתיות

תפקיד _____

חברות ממשלתיות

תפקיד _____

שלטונו מקומי

ארגון _____

תפקיד _____

צה"ל

תפקיד _____

בתי חולים

תפקיד _____

קופות חוליות

תפקיד

מוצר שלישי-שם הארגון

תפקיד

אחר - שם הארגון

תפקיד

***Immediate Supervisor**

In English

Full name _____ Position _____

In Hebrew

Full name _____ Position _____

Prior Work Experience

*Please specify your prior work experience (before your present position as indicated above):

Additional Information

We are interested in receiving as full a picture as possible of your professional expertise and leadership potential in the Israeli public sector. Use the free text box below if additional space is necessary to explain your chosen career path so far.

***Professional Development**

It is important for us to have a sense of your professional vision as a Wexner Israel Fellowship Candidate. Please indicate up to three of your professional goals for the next five to ten years. Note that there is a limit of 150 characters, including spaces, for this section.

Military Service/National-Civic Service

If relevant - please specify position and corps and include dates of service.

Corps

Type _____

Position _____ Rank _____

From (YYYY) _____ Until (YYYY) _____

Previously Applied

* Have you ever applied to the Wexner Israel Fellowship Program before? _____

If so, when (MMYYYY)? _____

Standardized Test Score (TOEFL or GRE)

*Indicate intended or actual date of **TOEFL** (Test of English as a Foreign Language) or **GRE** (Graduate Record Examinations), which is required for admission to HKS (supply scores and the test date, if available). Please keep in mind that TOEFL or GRE test scores and any score appeals must be submitted by November 21, 2010.

Note: candidates who have **completed their undergraduate degree in an English-language university** are required by HKS to take the **GRE instead of the TOEFL**. Please refer to the information on the **[HKS website](#)**.

Test Type	Date Type	Exam Score	Exam Date
TOEFL/GRE	Actual / Intended		
		_____	_____
		_____	_____
		_____	_____

How did you hear about the Wexner Israel Fellowship Program?

Please mark one or more of the following options:

Newspaper Internet Foundation's Website WIFP Alumni Civil Service Commision Other

If newspaper or other, please provide details:

Newspaper _____ Other _____

Date of submission: _____