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Department of the Treasury

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public

		Service		· ·	a copy of this return to satisfy s		requirements	Inspection
				ar, or tax year beginning 01-	01-2009 and ending 12-31-2009)	D Employer ide	entification number
B Che		pplicable	Please use IRS	The Jewish Community Found	ation of		86-071893	36
Nan		-	label or print or	Doing Business As			E Telephone n	
Initi		_	type. See Specific				(520) 577-	0388
Ten			Instruc-	Number and street (or P O bo 5546 E 4th Street	x if mail is not delivered to street addres	ss) Room/suite	G Gross receipts	\$ 16,197,505
– Ame			tions.	City or town, state or country,	and 7TD + 4			
_				Tucson, AZ 85711	aliu ZIP + 4			
Арр	lication	n pending					ı	
				me and address of principal i	officer		ıs a group retur ates?	n for ┌ Yes ┌ No
				E 4th St 100		annie	ites.	
			Tucso	n,AZ 857111452			II affiliates includ	
Tax	-exen	npt status	▼ 501(c	c) (3) 4 (insert no)	n)(1) or	_	o," attach a list ip exemption ni	(see instructions)
			w jcftucsor		,,,,	H(c) Grou	ap exemption no	iniber F
					<u> </u>	T	Τ.	
	n of or rti I	ganization Sumi		ation Trust Association Ot	her 🟲	L Year of fo	rmation 1992	¶ State of legal domicile A2
Fal				he organization's mission or	most significant activities			
	_	O ur mis	sion is to	encourage charitable giving	, particularly endowment giving, t	•		•
e e		ınstıtutı world	ons and a	ctivities that promote Jewish	n identity or support a high quality	y of life throu	ghout Southern	Arizona and the Jewish
Governance		worra						
Ě								
ove ove								
	2	Checkt	his box 🛏	if the organization discont	inued its operations or disposed	of more than	25% of its net	
ණ ග	3	Number	ofvoting	members of the governing b	ody (Part VI, line 1a)		3	
Activities	4	Number	ofindepe	ndent voting members of the	governing body (Part VI, line 1b)	. 4	3
XIIX	5	Total nu	umber of e	mployees (Part V , line 2a)			5	1
ă.	6	Total nu	umber of v	olunteers (estimate if neces	sary)		6	10
	7a	Total gr	oss unrela	ated business revenue from !	Part VIII, column (C), line 12 .	•	7:	a
	b	Net unr	elated bus	siness taxable income from F	orm 990-T, line 34		7	b -65
						Pric	or Year	Current Year
a.	8	Contri	butions an	nd grants (Part VIII, line 1h)			3,246,665	1,362,271
Revenue	9	Progra	m service	revenue (Part VIII, line 2g)			122,342	109,999
эле	10	Invest	ment inco	me (Part VIII, column (A), l	ines 3, 4, and 7d)		1,439,492	-745,567
ш	11		-	Part VIII, column (A), lines !			8,995	-30,076
	12				equal Part VIII, column (A), line	•	4,817,494	696,627
	13				lumn (A), lines 1-3)		7,043,240	2,895,363
	14				umn (A), line 4)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	15				efits (Part IX, column (A), lines 5	_		
\$		10)	· · · · · · · ·		(, ,		585,623	451,175
Expenses	16a	Profes	sional fund	draising fees (Part IX, colum	n (A), line 11e)			(
ੜੀ	b	Total fu	ndraising exp	penses (Part IX, column (D), line 2	5) ▶ 95,336			
	17	Other	expenses	(Part IX, column (A), lines 1	1a-11d, 11f-24f)		432,718	349,132
	18	Totale	expenses	Add lines 13-17 (must equ	al Part IX, column (A), line 25)		8,061,581	3,695,670
	19	Reven	ue less ex	penses Subtract line 18 fro	m line 12		-3,244,087	-2,999,043
জু জু						_	g of Current	End of Year
Net Assets or Fund Balances	20	T - + - !	000t- /D	ort V June 163		'	/ear	
A.S.	20 21			art X, line 16)			46,834,992 15,146,766	53,877,340
5 K	22				1 from line 20		· · ·	17,715,642
	t III	_	ature Bl		I from fille 20		31,688,226	36,161,698
r G		_			ned this return, including accompanying	schedules and s	tatements, and to	the best of my knowledge
					of preparer (other than officer) is based			
		l 				l		
Sign Here		**** Signa	*** ature of offic	 cer		2010- Date	-07-22	
	•	[Date		
			el Gasch Pre e or print nan					
		<u> </u>	<u>.</u>		Date	`heck if	Proparar's identi	fung number
D-! !		Preparer' signature		DeVries	s	Check If elf-	Preparer's identi (see instructions	
Paid Propa		1	<u> </u>		e	mpolyed 🕨 🦵		
Prepa Use C		ıf self-en	ame (or your nployed),	•			EIN Þ	
use (, iiiy		and ZIP + 4	4349 East Fifth Street				
		<u> </u>		Tucson, AZ 857112025			Phone no 🕨 (5	20) 298-6200
1ay t	he IR	S discus	s this retu		above? (see instructions)	-		┌ Yes ┌ No

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

The Jewish Community Foundation of Southern Arizona (JCF) is an affiliated corporation of the Jewish Federation of Southern Arizona (JFSA) Its mission is to encourage charitable giving, particularly endowment giving, to help ensure the continued vitality of those institutions and activities that promote Jewish identity or support a high quality of life in Southern Arizona and throughout the Jewish world, and to manage those funds received in a prudent and effective manner To accomplish its mission the Foundation promotes the value of planned giving, works cooperatively with non-profit agencies to encourage planned giving among their own constituencies, and distributes grants to meet community needs, according to donor's wishes

	Did the organization underta the prior Form 990 or 990-E			ar which were not listed on	'es ☑ No
	If "Yes," describe these new	services on Schedule	0		
3	Did the organization cease c services?	onducting, or make si	gnificant changes in how it co	onducts, any program	′es ✓ No
	If "Yes," describe these char	nges on Schedule O			
1		c)(4) organizations an	d section 4947(a)(1) trusts	e largest program services by expo are required to report the amount I service reported	
1a	(Code) (Expenses \$ 3,3	369,331 including grants of \$	2,895,363) (Revenue \$	109,999)
	reporting, field of interest research Charitable Gift Annuities, Insurance sponsor educational programs on education seminars for profession Continue to fund worthy program perpetuity 3 Continue to promote agencies to encourage planned groultural and social needs of more workshops and an ethics seminar	h, and consultations with per Policies, and more We restate planning, legacy placed all advisors. There were no sivial grants and philamthro relegacy planning and encoung among their constitue than 300 501(c)(3) organito professionals in the Tuc	professional advisors Legacy planning and funding opportunities for significant changes to our programmer of the funding opportunities for significant changes to our programmer of the funding and funding a continue to propurage donors to support the organices Accomplishments 1 In 2009, justices a community 3 Hosted the first funding and fun	with the Foundation, including fund investing options include Donor Advised Endown-endowed) and teen philanthropy funds (I or donors and the Jewish community at larms in 2009 Objectives for Fiscal Year Begins mote endowments to support the Jewish nizations they care about in perpetuity 4 provided allocations and grants for the chaon all and assist Jewish communities world national Jewish Legacy Forum which presented our number of volunteers is approximated.	nent Funds, Bequests, B'nai Tzedek Tucson) We ge, along with continuing ning January 1, 20101 community's institutions in Continue to work with local aritable, health,educational, wide 2 Presented tax ented best practices
1b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
					_
łc	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program services (D		·) (Davienus #	
.	(Expenses \$	including g	<u> </u>) (Revenue \$)
le	Total program service expe	nsesF-\$ 3,	369,331		Form 900 (2000)

art TV	Chack	list of	Deguired	Schedules
	CHECK	MISL OI	Reuulleu	Julieuules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	Į		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified 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	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

•	,
Part V	Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		163	NO
	1a 26			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b		No
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		No
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		Νo
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ▶CJ See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		Νo
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		Νo
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Νo
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νο
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		Νo
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		Νo
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
_		8		Νο
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		No
	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		No
ь 10	Section 501(c)(7) organizations. Enter	20		INU
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Νο
	If "Yes," enter the amount of tax-exempt interest received or accrued during the vear			140

5546 E 4th Street 100 Tucson, AZ 857111452 (520) 577-0388

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management			
	colon 74 Governing Doay and Hanagement		Yes	No
1a	Enter the number of voting members of the governing body 1a	31		
b	Enter the number of voting members that are independent 1b	30		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	as 4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	. 6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	ne 7a		No
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	. 7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	. 8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at t		165	
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
	ection B. Policies (This Section B requests information about policies not required by the Interna	il		
Re	evenue Code.)		T	l
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		No
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the for	m [?] 11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990		1.00	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give ri	se		
	to conflicts?	12b	Yes	
	describe in Schedule O how this is done	. 12c	Yes	
13	Does the organization have a written whistleblower policy?	. 13	Yes	
14	Does the organization have a written document retention and destruction policy?	. 14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision	17		
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		Νo
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with	a		
	taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	act		N
6-		16b		Νo
<u>5e</u> 17	List the States with which a copy of this Form 990 is required to be filed AZ			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)	<u> </u>		
10	(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request	,		
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of	fthe org	anızatıo	n 🕨
	The organization	,		

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year Use Schedule J-2 if additional space is needed

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

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

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

(A) Name and Title	(B) A verage hours	Posit	(C	:) chec	:k al			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Tom Warne VP/Treasurer	3 00	Х		х				0	0	0
Thomas Newman Trustee	1 00	Х						0	0	0
Stuart Mellan VP-JFSA	1 00	Х		Х				0	170,649	27,781
Steven Meckler Trustee	1 00	Х						0	0	0
Steve Sim Vice President	2 00	Х		Х				0	0	0
Myron Rottenstein Vice President	2 00	Х		Х				0	0	0
Murray Brilliant Trustee	1 00	Х						0	0	0
Michael Miron Trustee	1 00	Х						0	0	0
Martha Sampson Trustee	1 00	Х						0	0	0
Marc Tischler Trustee	3 00	Х						0	0	0
Linda Tumarkin Trustee	1 00	Х						0	0	0
Lawrence Haas Trustee	1 00	Х						0	0	0
Larry Gellman Trustee	1 00	Х						0	0	0
Koreen Johannessen Vice President	3 00	Х		х				0	0	0
Keri Silvyn VP-Secretary	3 00	Х		х				0	0	0
Karen Faitelson Trustee	1 00	Х						0	0	0
Jerry Neuman Past President	3 00	Х		х				0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours	Posit	(C tion (hat a	ched		II.		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Jeremy Sohn Trustee	1 00	Х						0	0	0
Jeremy Lite Trustee	1 00	Х						0	0	0
Jennifer Miller Grant Trustee	1 00	х						0	0	0
Jennifer Cassius Trustee	1 00	х						0	0	0
Jeffery Katz Trustee	1 00	х						0	0	0
Jane Ash Trustee	1 00	Х						0	0	0
James Whitehill Trustee	1 00	х						0	0	0
Harold Bongarten Trustee	1 00	Х						0	0	0
Gerald Gendell Trustee	3 00	х						0	0	0
Esther Sherberg Trustee	2 00	Х						0	0	0
Deanna Evenchik Vice President	3 00	х		х				0	0	0
David Wolsky Trustee	1 00	х						0	0	0
Daniel Gasch President	5 00	х		х				0	0	0
Dana Adler Trustee	1 00	х						0	0	0
Carol Karsch Executive Direc	40 00				Х			93,000	0	14,660
Bruce Beyer Trustee	3 00	Х						0	0	0
Brina Grusin Trustee	1 00	Х						0	0	0
Brenna Lacey Trustee	3 00	Х						0	0	0
Bobby Present Trustee	1 00	х						0	0	0
Barry Friedman Trustee	1 00	х						0	0	0
Ann Goldfein Trustee	1 00	х						0	0	0
Andrew Briefer Trustee	1 00	х						0	0	0
Amy Hirschberg Lederman Trustee	1 00	Х						0	0	0
Amy Charles Trustee	1 00	х						0	0	0
1b Total			•			•	►	93,000	170,649	42,441

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization •0

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
			163	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

Section B. Independent Contractor

1	Complete this table for your five highest compensated independent contractors that received more than
	\$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶0

Form 99	•							Page 9
Part V	/	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
まま	1a	Federated camp	paigns 1a					
흔	Ь	Membership du	es 1b					
Contributions, gifts, grants and other similar amounts	c	Fundraising eve	ents 1 c	24,600				
€	d	Related organiz	ations 1d					
% <u>≣</u>	e	Government grants	s (contributions) 1e					
<u>등</u> 교	f	All other contribution	ons, gifts, grants, and 1f	1,337,671				İ
돌	g	similar amounts no	ot included above butions included in					
를 유 다	"		10,720					
5 ₽	h	· —	s 1a-1f	▶	1,362,271			
				Business Code				
ΠE	2a	Admın Fees/Other			109,999	109,999		
Program Serwce Revenue	Ь				,	,		
e E	l c							
2	d	_	_					
33	e							
Ē	f	All other progra	am service revenue					
္နို	•							
	g		s 2a-2f		109,999			
	3		ome (including dividen		640,574		C.F.C	641 220
			ar amounts)		0		-656	641,230
	4		tment of tax-exempt bond		0			
	5	Royalties	(ı) Real	(II) Personal	Ŭ			
	6a	Gross Rents	(I) Real	(II) Personal				
	Ь	Less rental						
		expenses Rental income						
	C	or (loss)						
	d	Net rental incor	me or (loss)		0			
	7a	Gross amount	(ı) Securities 14,051,567	(II) O ther				
	'	from sales of assets other						
		than inventory	45.407.700					
	Ь	Less cost or other basis and	15,437,708					
	_c	sales expenses Gain or (loss)	-1,386,141					
	d	Net gain or (los	s)		-1,386,141			-1,386,141
	8a	Gross income f						
e E		events (not inc						
<u>ਙ</u>		Ψ	,094 reported on line 1c)					
é		See Part IV, lin						
<u>-</u>	_		а	24,600				
Other Revenue	b		penses b	63,170	-30,076			-30,076
•	c 9a		loss) from fundraising	events F	30,070			30,070
	34	See Part IV, lin	rom gaming activities le 19					
			а					
	Ь		penses b					
	С		loss) from gaming activ	vities	0			
	10a	Gross sales of returns and allo						
	ь	Less cost of go	oods sold b					
	С	Net income or (loss) from sales of inve		0			
		Miscellaneous	Revenue	Business Code				
	11a							
	Ь							
	c							
	d	All other revenu	ue					
	e	Total. Add lines	s 11a-11d		0			
	12	Tatalassa	Coolinghaustra					
	12	iotai revenue.	See Instructions	· · · [696,627	109,999	-656	-774,987

	990 (2009)				Page 10
Par	IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to			(D)	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
		Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	2,895,363	2,895,363		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	107,660	55,975	36,586	15,099
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	286,624	149,022	97,403	40,199
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0		51,112	
9	Other employee benefits	28,639	14,890	9,732	4,017
10	Payroll taxes	28,252	14,689	9,601	3,962
11	Fees for services (non-employees)			,,,,,,	
а	Management	0			
b	Legal	4,658	2,578	1,473	607
c	Accounting	20,580	11,564	6,382	2,634
d	Lobbying	0		5,552	
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	36,780	35,133	1,166	481
g	Other	6,409	3,332	2,178	899
12	Advertising and promotion	49,614	26,152	16,608	6,854
13	Office expenses	16,649	8,606	5,693	2,350
14	Information technology	17,535	9,117	5,959	2,459
15	Royalties	0	3,117	3,333	2,133
16	Occupancy	52,760	22,489	21,428	8,843
17	Travel	3,121	862	1,599	660
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	002	1,379	
19	Conferences, conventions, and meetings	5,966	3,102	2,027	837
20	Interest	0	-,		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	29,668	15,425	10,082	4,161
23	Insurance	48,975	44,669	3,048	1,258
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)		,	2,111	
а	Telephone and communications	10,294	10,294		
b	Real estate taxes	33,593	33,593		_
c	Miscellaneous	12,530	12,476	38	16
d					
e					
f	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24f	3,695,670	3,369,331	231,003	95,336
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational	2,333,676	2,233,331		- 5,555
	campaign and fundraising solicitation				

Form 990 (2009) Page 11 Part X Balance Sheet (A) (B) End of year Beginning of year 250 260 1 Cash—non-interest-bearing 1 2,355,103 398.346 2 2 3 Λ 3 4 4 17,160 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 0 6 Notes and loans receivable, net 2,104,027 2,104,027 0 Inventories for sale or use 8.289 9 13,138 Land, buildings, and equipment cost or other basis Complete 1.731.192 10a 10a Part VI of Schedule D 10b 124.803 1,627,117 **10c** 1.606.389 b Less accumulated depreciation 144,263 11 139.339 11 40,367,514 12 45.951.880 12 Investments—other securities See Part IV, line 11 13 0 13 Investments—program-related See Part IV, line 11 . . 14 14 0 2.185.186 15 1.690.044 15 16 16 46,834,992 53,877,340 Total assets. Add lines 1 through 15 (must equal line 34) . . . 164,207 17 112.425 17 Accounts payable and accrued expenses . 18 18 5,000 19 19 20 20 Liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 14.977.559 17.603.217 25 Other liabilities Complete Part X of Schedule D 25 26 **Total liabilities.** Add lines 17 through 25 15,146,766 17,715,642 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 25.500.006 29,607,979 27 27 Unrestricted net assets 28 516.609 28 880.034 Temporarily restricted net assets Fund 5.671.611 29 5.673.685 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 31,688,226 33 Total net assets or fund balances 33 36,161,698 34 Total liabilities and net assets/fund balances 46.834.992 53.877.340 34

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		No

Form **990** (2009)

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Public Charity Status and Public Support

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

Inspection Employer identification number

The Jewish Community Foundation of Southern Arizona 86-0718936 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 7 3 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 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 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 Type III - Other Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No 11g(i) and (III) below, the governing body of the the supported organization? (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) h

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organizati col (i) orga	on in anized	(vii) A mount of support?
		ınstructions))	Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

	ection A. Public Support	ou cnecked the	box on line 5,	7, or 8 of Part 1)			
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2	009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	4,408,13	7 3,343,907	2,542,934	3,246,665	1	.,362,271	14,903,914
2	Tax revenues levied for the organization's benefit and either paid to or expended on its							0
3	behalf The value of services or facilities furnished by a governmental unit to							0
	the organization without charge							
4 5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a	4,408,13	7 3,343,907	2,542,934	3,246,665	1	.,362,271	14,903,914
	governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							4,541,794
6	Public Support. Subtract line 5 from line 4							10,362,120
S	ection B. Total Support	•	1	•	<u> </u>			
	endar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	10.9	(f) Total
_	beginning in)							
7	A mounts from line 4 Gross income from interest,	4,408,137	2,400,957	2,542,934	3,246,665	1	,362,271	14,903,914
8	dividends, payments received on securities loans, rents, royalties and income from similar sources	2,376,169	2,400,957	1,356,241	1,269,067		640,574	8,043,008
9	Net income from unrelated business activities, whether or not the business is regularly carried on							0
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets							0
11	Total support (Add lines 7 through 10)							22,946,922
12	Gross receipts from related activiti	es, etc (See ins	tructions)			12	<u> </u>	756,503
13 S	First Five Years If the Form 990 is check this box and stop here ection C. Computation of Pub			, third, fourth, or f	ifth tax year as a	501(c)(3	3) organız	zation,
14	Public Support Percentage for 2009			11 column (f))		14		45 160 %
15	Public Support Percentage for 2008	8 Schedule A, Pa	art II, line 14			15		43 570 %
L6a	33 1/3% support test—2009. If the and stop here. The organization qua	organization did	not check the bo		line 14 is 33 1/3%		, check t	
	33 1/3% support test—2008. If the box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization Part IV how the organization meeorganization	organization did n qualifies as a p — 2009. If the org tion meets the "	I not check the bo ublicly supported janization did not facts and circums	x on line 13 or 16 organization check a box on lir tances" test, che	ne 13, 16a, or 16t ck this box and st	and line	± 14 Explain	check this ▶
	10%-facts-and-circumstances test 15 is 10% or more, and if the organ Explain in Part IV how the organiza supported organization	nization meets th tion meets the "	ne "facts and circu facts and circums	ımstances" test, o tances" test The	check this box and organization qual	d stop he lifies as a	e re. a publicly	• ► □
18	Private Foundation If the organizat instructions	ion did not chec	k a box on line 13	, 16a, 16b, 17a o	r 17b, check this	box and	see	▶ □

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support	T			1	T	I
cale	ndar 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 ")						
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 Gross receipts from activities that						
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge						
6	Total. Add lines 1 through 5 Amounts included on lines 1, 2,						
/a	and 3 received from disqualified				1		
	persons						
b	A mounts 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						
c	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	rom line 6) ction B. Total Support						
	ndar year (or fiscal year beginning						
cuic	in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar						
	sources						
ь	Unrelated business taxable						
	income (less section 511 taxes) from businesses acquired after						
	June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated						
	business activities not included						
	in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
13	IV) Total support (Add lines 9, 10c,						
13	11 and 12)						
14	First Five Years If the Form 990 is for	or the organizat	ion's first, second	l, thırd, fourth, or	fifth tax year as a	a 501(c)(3) orgar	
	check this box and stop here						► □
Se	ction C. Computation of Publ	ic Support P	ercentage				
15	Public Support Percentage for 2009			13 column (f))		15	
16	Public support percentage from 200	-		.,,		16	
	Table support personage nom 200	o o o modulo m, n	arc 111, mrs 15			10	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ae			
17	Investment income percentage for 2				n (f))	17	
18	Investment income percentage from	•		•		18	
	33 1/3% support tests—2009. If the		•		d line 15 is more		line 17 is not
1.7a	more than 33 1/3%, check this box a					uii 22 1/3/0 dill	. IIIC 17 13 110t
	organization	•厂		•			
ь	33 1/3% support tests—2008. If the	organization di	d not check a box	on line 14 or line	e 19a, and line 16	5 is more than 33	1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

efile GRAPHIC print - DO NOT PROCESS

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DLN: 93493210001220

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Name of the organization

Employer identification number

	e Jewish Community Foundation of uthern Arizona		0.0	710026		
	art I Organizations Maintaining Donor A	Advised Funds or Other Similar Fu)718936 Or Account	s Comple	te if th
- 0	organization answered "Yes" to Form 9		ilius (or Account	s. Comple	te ii ti
		(a) Donor advised funds		(b) Funds and	l other accou	unts
	Total number at end of year	252				
	Aggregate contributions to (during year)	1,132,859				
	Aggregate grants from (during year)	2,718,724				
	Aggregate value at end of year	19,357,465				
	Did the organization inform all donors and donor adv		or advi	sed	√ Yes	┌ N
	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the be conferring impermissible private benefit				✓ Yes	┌ N
a	rt III Conservation Easements. Complete	e if the organization answered "Yes" to	Form	າ 990, Part I	V, line 7.	
	Preservation of land for public use (e g , recrea Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qua	Preservation of a c	ertified	d historic stru	· •	a
	easement on the last day of the tax year	F				
		-		Held at th	e End of the	Year
3	Total number of conservation easements	-	2a			
)	Total acreage restricted by conservation easement	-	2b			
2	Number of conservation easements on a certified h	` '	2c			
t	Number of conservation easements included in (c)	acquired after 8/17/06	2d			
	Number of conservation easements modified, trans	ferred, released, extinguished, or terminate	d by th	e organizatior	n during	
	the taxable year 🛌					
	Number of states where property subject to conserv	vation easement is located ►				
	Does the organization have a written policy regarding enforcement of the conservation easements it holds		ling of	violations, an	rid ┌ Yes	┌ N
	Staff and volunteer hours devoted to monitoring, ins	specting and enforcing conservation easem	ents du	ırıng the year	-	
	A mount of expenses incurred in monitoring, inspect	ing, and enforcing conservation easements	durıng	the year ► \$		
	Does each conservation easement reported on line $170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$?	2(d) above satisfy the requirements of sect	tion		☐ Yes	┌ N
	In Part XIV, describe how the organization reports balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's financial				
1	rt III Organizations Maintaining Collecti Complete if the organization answered		or Oth	ner Similar	Assets.	
а	If the organization elected, as permitted under SFA art, historical treasures, or other similar assets hel provide, in Part XIV, the text of the footnote to its fi	d for public exhibition, education or researc	h ın fuı			e,
3	If the organization elected, as permitted under SFA	S 116, to report in its revenue statement a	nd bala	nce sheet wo	rks of art,	

historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

Assets included in Form 990, Part X For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line ${f 1}$

following amounts required to be reported under SFAS 116 relating to these items

▶\$______

che	dule D (Form 990) 2009										Page 2
ar	Organizations Maintaining Co	llections of Art	, His	torical T	reasu	ires, or (Othe	r Similar	Ass	ets (c	ontinued
3	Using the organization's accession and other items (check all that apply)	records, check any	ofth	e following	that ar	e a sıgnıfıc	ant ı	use of its co	llection	on	
а	Public exhibition		d	┌ Loan	orexc	hange prog	rams	5			
b	Scholarly research		e	┌ Othe	r						
c	Preservation for future generations										
1	Provide a description of the organization's co	llections and explai	n hov	v they furth	erthed	organizatio	n's e	xempt purpo	ose in		
5	During the year, did the organization solicit cassets to be sold to raise funds rather than t							nılar	Г	Yes	☐ No
Pai	t IV Escrow and Custodial Arrang							es" to For	m 99	0,	
	Part IV, line 9, or reported an an	ount on Form 99	0, Pa	art X, line	21.						
la	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	dıary	for contrib	utions	or other as	sets	not	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	and complete the t	follow	ıng table							
									A mo	unt	
C	Beginning balance						1 c				
d	Additions during the year						1d				
e	Distributions during the year						1e				
f	Ending balance						1 f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV										
Pa	rt V Endowment Funds. Complete	f the organizatior	ans	wered "Ye	s" to	Form 990	, Pa	rt IV, line	10.		
		(a)Current Year	(b)Prior Year		wo Years Ba	:k (c	I) Three Years	Back ((e) Four Y	ears Bac
а	Beginning of year balance	10,970,467		15,344,5	_		_				
b	Contributions	64,474		452,9	_						
C	Investment earnings or losses	2,892,598		-4,209,9	73						
d	Grants or scholarships										
e	Other expenditures for facilities and programs	510,199		512,5							
f	Administrative expenses	21,232		22,0	_		_				
g	End of year balance	13,396,108		11,052,9	19						
	Provide the estimated percentage of the yea	r end balance held a	s								
а	Board designated or quasi-endowment 🕨	55 900 % %									
ь	Permanent endowment ► 42 300 % %										
c	Term endowment ► 1800 % %										
a	Are there endowment funds not in the posses	sion of the organiza	ition t	hat are hel	d and a	idministere	d for	the			
	organization by							ſ	- (:	Yes	No
	(i) unrelated organizations						•		3a(i)		No
ь	(ii) related organizations		lanc	chadula P3			•		3a(ii 3b	' 	No No
	Describe in Part XIV the intended uses of the	•			•		•		- 50		1 110
	t VI Investments—Land, Buildings				990. Pi	art X. line	10.				
	Description of investment	,,		(a) Cost of basis (inve	r other	(b)Cost or basis (oth	other			(d) Bo	ok value
	Land			1	528,122						1,528,12
	Buildings		_		,						_,,
	Leasehold improvements		-			66	5,915	-	30,238		36,67
	·		-				<u> </u>				41,59
	· ·						-	-	•		71,33
				line 10(c)) _			<u> </u>	2,703		1 606 38
d e	Equipment	rm 990, Part X, colun		, line 10(c).)	132	5,915 2,670 3,485	Ġ	91,080 3,485		41,5 1,606,3

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
		Cost of end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	45,951,880	
Part VIII Investments—Program Related. Se	ee Form 990, Part X, line 1	.3.
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(B) Book Value	Cost or end-of-year market value
	+	
Table (Calana (b) should any life and One Bart V and (D) for 12	<u> </u>	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	▶ mo 15	
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Rook value
	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
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Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, (a) Description (b) Should equal Form 990, Part X, col.(B) line	ine 15.	
Part IX Other Assets. See Form 990, Part X, (a) Description (b) Should equal Form 990, Part X, col.(B) line	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	ine 15.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	15.) X, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes Designated obligations	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes Designated obligations	15.) X, line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes Designated obligations	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes Designated obligations	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes Designated obligations	15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes Designated obligations	15.)	
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Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability Federal Income Taxes Designated obligations	15.) X, line 25. (b) A mount 175,827 17,427,390	

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	ıts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	696,627
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,695,670
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-2,999,04
4	Net unrealized gains (losses) on investments	4	7,468,21
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	-82,482
8	Other (Describe in Part XIV)	8	86,780
9	Total adjustments (net) Add lines 4 - 8	9	7,472,51
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	4,473,473
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		
1	Total revenue, gains, and other support per audited financial statements	1	8,278,014
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		· · · · · · · · · · · · · · · · · · ·
а	Net unrealized gains on investments		
Ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	7,518,21
3	Subtract line 2e from line 1	3	759,79
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	-63,170
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	696,62
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per l	
1	Total expenses and losses per audited financial statements	1	3,722,060
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	_	
а	Donated services and use of facilities		
ь	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIV) 2d 63,170		
e	Add lines 2a through 2d	2e	63,170
3	Subtract line 2e from line 1	3	3,658,890
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	36,780
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	3,695,670
Par	t XIV Supplemental Information		

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

Ident if ier	Return Reference	Explanation		
Part XIII, Line 4b	Part XIII, Line 4b Other revenue amounts included on 990 but not included in F/S	Investment fees \$36780		
Part XIII, Line 2d	Part XIII, Line 2d Other expenses and losses per audited F/S	Direct cost of special events \$63170		
Part XII, Line 2d	Part XII, Line 2d Other revenue amounts included in F/S but not included on form 990	Change in value of split interest agreem \$65550 Pass Throug Entities - Book vs Tax \$86780 Investment fees \$-36780		
Part XI, Line 8	Part XI, Line 8 Other Changes in Net Assets or Fund Balances	Pass Through Entities - Book vs Tax \$86780		
Part V, Line 4	Part V , Line 4 Intended uses of the endowment fund	Endowments are held for donor restricted uses and donor advised purposes		

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Internet and e-mail solicitations

Phone solicitations In-person solicitations

DLN: 93493210001220

OMB No. 1545-0047

(Form 990 or 990-EZ)

SCHEDULE G

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Supplemental Information Regarding

Fundraising or Gaming Activities

Department of the Treasury Attach to Form 990 or Form 990-EZ. See separate instructions. Internal Revenue Service Name of the organization Employer identification number The Jewish Community Foundation of Southern Arizona Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations

> Solicitation of government grants Special fundraising events

or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees

(iii) Dıd fundraiser have (v) A mount paid to (vi) A mount paid to (i) Name of individual (iv) Gross receipts (or retained by) custody or (ii) Activity (or retained by) or entity (fundraiser) fundraiser listed in control of from activity organization contributions? col (i) No Yes

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Pai	rt II	Fundraising Events. Commore than \$15,000 on Form					report	:ed
			(a) Event #1 Ethics Seminar (event type)	(b) Event #2 Tax Seminars (event type)	(c) O ther Events 2 (total number)	(d) Tot (Add col co		
₽	1	Gross receipts	24,585	13,025	,		5	7,694
Revenue	2	Less Charitable	10,000	2,000	12,600		24	4,600
<u>~</u>	3	Gross income (line 1 minus line 2)	14,585	11,025	7,484		3	3,094
	4	Cash prizes						
မှာ	5	Non-cash prizes						
Suse	6	Rent/facility costs						
Expenses	7	Food and beverages						
Direct	8	Entertainment						
ឨ	9	Other direct expenses .	18,411	. 7,874	36,885		6	3,170
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)	🛌		6	3,170
	11	Net income summary Combine li	nes 3, column d, and line	10			-3	0,076
Par	t II	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted mor	e thar	1
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tot (Add col co		
	1	Gross revenue						
e Se	2	Cash prizes						
Expenses	3	Non-cash prizes						
	4	Rent/facility costs						
Direct	5	Other direct expenses						
	6	Volunteer labor	Г Yes <u>%</u> Г No	Г Yes				
		Direct expense summary Add line						
	8	Net gaming income summary Com	ibine lines 1, column d, al	id line /	<u> </u>		Yes	No
9 a b	Ist	er the state(s) in which the organiza the organization licensed to operate No," Explain			· · · · · · · · · · · · · · · · · · ·	· 9a		
	_	ivo, Explain						
10a b		re any of the organization's gaming Yes," Explain	licenses revoked, susper	ided or terminated during	the tax year?	10a		
11 12	Is t	es the organization operate gaming the organization a grantor, beneficia	ry or trustee of a trust or	a member of a partnersh	ip or other entity	11		
	rorr	med to administer charitable gaming			Schedule G (Form 9	12 90 or 990-	 ·EZ) 20	09

		Yes	No					
13	Indicate the percentage of gaming activity operated in							
а	The organization's facility							
b	An outside facility							
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records							
	Name 🟲							
	Address -							
15a	Does the organization have a contract with a third party from whom the organization receives gaming							
	revenue?	,						
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+						
	amount of gaming revenue retained by the third party 🟲 \$							
c	If "Yes," enter name and address							
	Name 🟲							
	Address •							
16								
16	Gaming manager information							
	Name 🟲							
	Name F							
	Gaming manager compensation 🕨 \$							
	Description of services provided -							
	Director/officer Employee Independent contractor							
	I Director/officer I Employee I Independent contractor							
.7	Mandatory distributions							
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to							
	retain the state gaming license?							
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent							
	in the organization's own exempt activities during the tax year ▶ \$	1						

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DLN: 93493210001220

Department of the Treasury

Schedule I

(Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990 Inspect ion Employer identification number

Internal Revenue Service Name of the organization

The Jewish Community Foundation of Southern Arizona

86-0718936

Part I	General Information on Grants and Assistance

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable (d) A mount of cash grant		(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See attached listVarious Various, AZ 85712		501(c)(3)	2,895,363	0			

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

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

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

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

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.							
Ident if ier	Return Reference	Explanation					
Grantmaker's Description of How Grants are Used		Grants can only be made to 501(c)(3) organizations Before distributions are made we check their 501(c)(3) status by requesting a copy of their IRS Determination Letter and by checking the organization on the IRS Pub 78 website. We obtain information from the organization about its mission and check its status with Guidestar Our board approves all new organizations before distributions are made. Annually the board re-approves our entire list of organizations after we have verified that their 501(c)(3) status is still in good order. Distributions for grants made for restricted purposes are accompanied with a letter stating that the funds can only be used for that purpose. The letters also include the following notation. This grant is made to your organization through the Jewish Community Foundation of Southern Arizona. By accepting this check, your organization certifies to the JCF that no tangible benefit, goods, or services are received by any individuals or entities connected with the above mentioned gift. These funds cannot be used for meeting pledge obligations already made. Restricted purpose grants that are to be made annually from endowment funds require that the organization provide us with a report of how the funds were used before the next year's grant will be distributed. Grants awarded under our competitive grants program require periodic reporting including copies of invoices and other supporting documents prior to distributing funds to insure funds are being used for the purpose intended. We do not make grants to individuals.					
	·						
·							

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DLN: 93493210001220

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

Open to Public Inspection

Internal Revenue Service	► Attach to Form 990. ► See separate instructions.	Inspection
Name of the organiz The Jewish Community Southern Arizona	oundation of	Employer identification number 86-0718936
Part I Questi	ons Regarding Compensation	

			_		Yes	Νo	
1a	Check the appropriate box(es) if the organization provide 990, Part VII, Section A, line 1a Complete Part III to						
	First-class or charter travel	Γ	Housing allowance or residence for personal use				
	Travel for companions	Γ	Payments for business use of personal residence				
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees				
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)				
b	If any of the boxes in line 1a are checked, did the organ reimbursement orprovision of all the expenses describe		· · · · · · · · · · · · · · · · · · ·	1b			
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?						
3	Indicate which, if any, of the following the organization to organization's CEO/Executive Director Check all that	appl	у				
	Compensation committee	<u> </u>	Written employment contract				
	Independent compensation consultant	_	Compensation survey or study				
	Form 990 of other organizations	⊽	Approval by the board or compensation committee				
4	During the year, did any person listed in Form 990, Partor a related organization	t V I :	I, Section A, line 1a with respect to the filing organization				
а	Receive a severance payment or change-of-control payment?		4a		Νo		
b	Participate in, or receive payment from, a supplemental	Participate in, or receive payment from, a supplemental nonqualified retirement plan?					
c	Participate in, or receive payment from, an equity-based compensation arrangement?					Νo	
	If "Yes" to any of lines 4a-c, list the persons and provide	de th	ne applicable amounts for each item in Part III				
	Only 501(c)(3) and 501(c)(4) organizations only must of	com	plete lines 5-9.				
5	For persons listed in form 990, Part VII, Section A, line compensation contingent on the revenues of	2 1 a ,	, did the organization pay or accrue any				
а	The organization?			5a		Νo	
b	Any related organization?			5b		Νo	
	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in form 990, Part VII, Section A, line compensation contingent on the net earnings of	2 1 a,	, did the organization pay or accrue any				
а	The organization?			6a		No	
ь	Any related organization?			6b		Νo	
	If "Yes," to line 6a or 6b, describe in Part III						
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III		7		Νο		
8	Were any amounts reported in Form 990, Part VII, paid subject to the initial contract exception described in Re in Part III			•		N -	
_			.,	8		No	
9	9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?						

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(i) Base compensation (ii) Bonus & incentive compensation (iii) Bonus & incentive compensation (iii) Bonus & incentive compensation (iiii) Bonus & incentive compensation (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii		SC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
Stuart Mellan ((ı) [ii)	170,649				27,781	198,430	222,641

Part III Supplemental Information

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

]	Ident if ier	Ret urn Ref erence	Explanation
]	Ident if ier	Reference	Explanation

Schedule J (Form 990) 2009

DLN: 93493210001220

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Jeffrey Katz

Transactions with Interested Persons ► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

The Jewish	the organization h Community Foundation of					E	mployer id	ent if icat	ion numbe	er.
Southern A	Excess Benefit Tra					organi		nly).		
	Complete if the organization (a) Name of disq			t IV, line 25a or 25b, or Form 990-EZ, Pa (b) Description of transaction					orrected	
				.,	·				Yes	No
sect	er the amount of tax impos tion 4958				ons durir	ig the '	year under •	\$		
3 Ente	er the amount of tax, If any	, on line 2, abo	ve, reimbursed by th	ne organization .		•	.	\$		
Part II	Loans to and/or Complete if the organi			O, Part IV, line 26	, or Form	990-1	EZ, Part V,	line 38a	ì	
(a) Name	e of interested person and purpose	(b) Loan to or from the organization?	(c)O riginal principal amount	(d)Balance due	(e) I r default	ו	(f) Approve by board committee	ed or	(g) Writt agreemei	
		To From			Yes	No	Yes	No	Yes	No
Total . Part III					 ', line 2	7.				
(a	a) Name of interested pers	on (I	Relationship betw) and the or	een interested per ganization	son	(c) A n	nount of gra	ant or ty	pe of assis	tance
Part IV	Business Transac Complete if the orga Name of interested perso	anization ansv (b) betv					3b, or 28c		organ	haring of lization's enues?
			organization						Yes	No

Board Member

41,368 Rental of Office Space

Νo

DLN: 93493210001220

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Name of the organization **Employer identification number** The Jewish Community Foundation of Southern Arizona 86-0718936

Ра	rt I Types of Property							
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d Method of d rever	letermı	nıng	
1	Art—Works of art			-				
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
	Cars and other vehicles							
	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '							
8	Intellectual property							
9	Securities—Publicly traded .	X	9	310,720				
	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
	O ther ► ()							
	O ther ►()							
	O ther ►()							
28	O ther ▶ ()				1			
29	Number of Forms 8283 received for which the organization compl				29	,	Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	erty reported in Part I lines	1-28 that it		. 63	140
	must hold for at least three year							
	for exempt purposes for the enti			on, and which is not require	a to be asea	30-		No
Ь	If "Yes," describe the arrangeme					30a		
31	Does the organization have a gif	tacceptano	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell i	non-cash	32a		N o_
	If "Yes," describe in Part II If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2009

Employer identification number

SCHEDULE 0

Name of the organization The Jewish Community Foundation of

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Southern Arizona	,	86-0718936
ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	The policy of the Jew ish Community Foundation is upon request, to make its Audited Financial Statements and Conflict of Interest Policy available for viewing at the office of the Foundation
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	Annually every board member is asked to sign a Conflict of Interest Statement as well as complete a form which discloses certain personal and business relationships. The board makes it a practice to put the following reminder on every written agenda that reads. Board members must disclose any potential conflict of interest related to the following agenda as well as topics discussed during the meeting. Periodically board members are also verbally reminded at the meeting to disclose any potential conflicts.
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	The Board formally assigned the responsibility of reviewing and approving the Form 990 to the Finance Committee. The Finance Committee meets, reviews and approves prior to filing. If there are any significant issues, the Finance Committee will bring them to the Board for informational purposes or approval.
	Client Note1	Controlled Foreign Partnership ReportingThe taxpayer was required to file Form 8865, but is not doing so under the constructive owners exception. The taxpayer has an interest in the following entity which filed Form 8865, 1818 Partners, LP140 BroadwayNew York, NY 10005-1101The taxpayer would have had to file Form 8865 for its indirect ownership in the entity listed below but for this

exception 1818 Master Partners, Ltd 68 Fort Street, PO Box 705GTNew York, NY 10005-1101

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

DLN: 93493210001220

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization The Jewish Community Foundation of Southern Arizona Employer identification number

86-0718936

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a)
Name, address, and EIN of disregarded entity

(b) Primary activity (c)
Legal domicile (state
or foreign country)

(**d)** Total income (e) End-of-year assets **(f)** Direct controlling entity

Part II

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

Name, address, and EIN of related organization

(b) Primary activity

(c)
Legal domicile (state or foreign country)

(d) Exempt Code section

Public charity status (if section 501(c)(3))

(f) Direct controlling entity

Jewish Federation of Southern Arizona

3822 E River Road Suite 100

Charitable

ΑZ

501(c)(3)

7 N/A

Tucson, AZ 85718 86-0096795

(j)

General or

managing

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990,	Part IV, line	34
	because it had one or more related organizations treated as a partnership during the tax year.)		

(a) Name, address, and EIN of related organization **(b)** Primary activity (c)
Legal
domicile
(state or
foreign
country)

al (d)
cile Direct controlling
or entity
gn

(e)
Predominant income
(related, unrelated,
excluded from tax
under sections 512514)

(f) Share of total income (g) Share of end-of-year assets (h)
Disproprtionate
allocations? ai

(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)

hedule K-1 partner? form 1065)

Yes No

Yes

No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity (c) Legal domicile (state or foreign country) (d) Direct controlling entity (e)
Type of entity
(C corp, S corp,
or trust)

(f) Share of total income

(g) Share of end-of-year assets (h) Percentage ownership

Part V	Transactions With Related Organizations	(Complete if the organization answered	"Yes" on Form 990	, Part IV, line 34, 35, or 36.)
--------	--	--	-------------------	---------------------------------

	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 0	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to other organization(s)	1b	Yes	
c	Gift, grant, or capital contribution from other organization(s)	1c	Yes	
d	Loans or loan guarantees to or for other organization(s)	1d		No
e	Loans or loan guarantees by other organization(s)	1e		No
f	Sale of assets to other organization(s)	1f		No
g	Purchase of assets from other organization(s)	1g		No
h	Exchange of assets	1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k		No
I	Performance of services or membership or fundraising solicitations by other organization(s)	11		No
n	n Sharing of facilities, equipment, mailing lists, or other assets	1m		No
n	Sharing of paid employees	1n		No
0	Reimbursement paid to other organization for expenses	10		No
р	Reimbursement paid by other organization for expenses	1р		No
q	O ther transfer of cash or property to other organization(s)	1q		No
r	O ther transfer of cash or property from other organization(s)	1r		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
_	(a)	,	c)	
			involve	d
.) J	Jewish Federation of Southern Arizona		21	F 400

Name of other organization	type(a-r)	Amount involved
(1) Jewish Federation of Southern Arizona	С	35,403
(2) Jewish Federation of Southern Arizona	b	1,255,436
(3)		

(4) (5)

(6)

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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

(a)
Name, address, and EIN of entity

(b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)
organizations?

Yes No

(e) Share of end-of-year assets **(f)** Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No

Jewish Community Foundation of Southern Arizona 2009 Schedule of Grants and Allocations - ALL Recipients are 501 (c)(3) Organizations

92nd Street Y	1395 Lexington Avenue		New York	NY 10	10128	25
Africare	Attn: Gifts	440 R Street NW	Washington	DC 20	20001	32
Alliance for the Lost Boys of Sudan	8241 Wallingford Hills Lane		Jacksonville	FL 32		33
ALS Association	27001 Agoura Road	Suite 150	Calabasas Hills	CA 91	91301	1,857
Altrusa international Foundation Endowment Fund	PO Box 42801		Tucson	AZ 85733-2801	01	200
Altrusa International, Inc of Tucson	PO Box 42801		Tucson	AZ 85733-2801	01	200
Alzheimer's Association - Desert SW Chapter	Southern Arizona Region	PO Box 27352	Tucson	AZ 85	85726	5,200
Alzheimer's Diseases and Related Disorders Association	Major Gifts Department	225 N Michigan Ave. Foor 17	Chicago	IL 60601-7633		20,000
America-Israel Friendship League	4729 E Sunrise Drive	PMB 437	Tucson	AZ 85	85718 10	10,579
American Cancer Society	1636 N Swan	Suite 151	Tucson	AZ 85	85712	200
American Committee for the Weizmann Institute of Science	633 Third Avenue	20th Floor	New York	NY 10017-6706		25,000
American Diabetes Association - Mountain Pacific Region	333 W Fort Lowell Road	Surte 123	Tucson	AZ 85705-5922	22	21
American Friends of Magen David Adom	352 Seventh Avenue	Surte 400	New York	NY 10	10001	200
American Friends of Table to Table Israel	1402 Teaneck Road	Unit 223	Teaneck	NY 7	7666 2!	25,000
American Friends of the Israel Arts & Science Academy	211 E Chicago Avenue	Suite 1020	Chicago	IL 60	60611	7,355
American Friends of the Jaffa Institute	171-06 76th Avenue		Flushing			2,000
American Friends of the Tel Aviv University	39 Broadway Boulevard	15th Floor	New York	NY 10	10006	2,000
American Gathering of Jewish Holocaust Survivors	122 W 30th Street		New York			200
American Institute for Public Service	100 W 10th Street	Suite 215	Wılmington	DE 19		10,000
American Jewish Committee	PO Box 705		New York	NY 10	10150	250
American Jewish World Service	45 West 36th Street		New York	NY 10018-7904		1,433
American Parkinson Disease Association - Arizona Chapter	2033 E Speedway	Suite 203	Tucson	AZ 85	85719	450
American Red Cross Southern Arizona Chapter	5301 E Broadway		Tucson	AZ 85711-3710		1,150
American Society for Yad Vashem	500 5th Avenue	42nd Floor	New York	NY 10110-1699		400
Americares Foundation Inc	88 Hamilton Avenue		Stamford	CT 6		1,500
Amigos De Las Americas	5618 Star Lane		Houston	TX XT	77057	28
Amnesty international USA Inc	5 Pen Plaza		New York	NY 10	10001	200
Angel Charity For Children	PO Box 13318		Tucson	AZ 85		8,400
Anti Defamation League - B'nai B'rith	1 E Camelback Road	Surte 670	Phoenix	AZ 85	85012	250
Anti-Defamation League	PO Box 96226		Washington	DC 20090-6226	26	300
Ara Parseghian Medical Research Foundation	3530 E Campo Abierto	Suite 105	Tucson	AZ 85	85718	400
Arizona - Sonoran Desert Museum	2021 N Kinney Road		Tucson	AZ 85743-8918	18	300
Arizona Adopt-A-Classroom	PO Box 14496		Tucson	AZ 85732-4496	96	400
Arizona Civil Liberties Foundation	77 E Columbus	Suite 205	Phoenix	AZ 85012-2352		200
Arizona Friends of Chamber Music	PO Box 40845		Tucson	AZ 85		4,500
Arizona Greyhound Rescue	8987 E Tanque Verde	309-153	Tucson		85749	200
Arızona Opera Company	3501 N Mountain Avenue		Tucson	AZ 85	•	10,500
Arızona Public Medıa - KUAZ Radıo	University of Arizona	PO Box 210067	Tucson	AZ 85721-0067		1,700
KUAT-TV Communications Group	PO Box 28821		Tucson	AZ 85		2,550
Arizona Recital Choir - Arizona Repertory Singers	PO Box 41601		Tucson		85717	200
Arızona Theatre Company	PO Box 1631		Tucson	AZ 85	85702	1,851

ASPCA	424 E 92nd Street	4th Floor	New York	NY 10128-6804	400
B'naı Vaıl Congregation	PO Box 6086	19 Vail Road	Vail	CO 81658-6086	1,000
Be the Match Foundation	3001 Broadway Street NE	Suite 100	Minneapolis	MN 55413	200
Beads of Courage Inc	5301 S Houghton Road		Tucson	AZ 85747	30
Bert T'Shuvah	8831 Venice Blvd		Los Angeles	CA 90034	1,000
Berkeley Public Library Foundation	2090 Kittredge Street		Berkeley	CA 94704	1,000
Berkeley Richmond Jewish Community Ctr	1414 Walnut Street		Berkeley		750
Bet Shalom Congregation	13613 Orchard Road		Minnetonka	MN 55305	2,260
Beth Boruk Temple	PO Box 2092		Richmond		1,800
Beth El Congregaton of the South Hills Beth El Sisterhood	1900 Cochran Road		Pittsburgh		200
Beth Shalom Temple Center of Green Valley	PO Box 884		Green Valley	85622	10,908
Boy Scouts of America - Moreno Valley California	c/o Richard Stewart	PO Box 7030	Moreno Valley		2,500
Boys And Girls Club of Tucson	PO Box 40217		Tucson	AZ 85717-0217	2,200
Brady Center to Prevent Gun Violence	1225 Eye Street, NW	Surte 1100	Washington	DC 20005	200
Branders University National Women's Committee	PO Box 549110, Mailstop 132		Waltham	MA 02454-9110	301
Bravo! Vall Valley Music Festival	PO Box 2270		Vail	CO 81658	1,000
Bread for the World Institute	50 F Street NW	Surte 500	Washington		28
Canyonlands Field Institute	PO Box 68		Moab	UT 84532	200
CareGiver Training Institute, Inc	1940 E Sılverlake Road	Suite 402	Tucson	AZ 85713	218
Carondelet Foundation	120 N Tucson Boulevard		Tucson	AZ 85732-3232	10,000
Casa De Los Ninos	1101 N 4th Avenue		Tucson		1,700
CASA Support Council Pima County	PO Box 36017		Tucson		1,000
Catalina Foothills School District Foundation	PO Box 65150		Tucson	AZ 85728-5150	200
Central Asia Institute	PO Box 7209		Bozeman		30
Central Fund of Israel	c/o Marcus Brothers Textiles	980 Sixth Avenue	New York		200
Chabad at the University of Arizona	1025 N Euclid Avenue		Tucson		2,500
Chabad of Tucson	1315 N Mountain		Tucson	AZ 85719	000′6
Chicago Sinai Congregation	15 W Delaware Place		Chıcago	IL 60610	1,000
Child & Family Resources, Inc	2800 Broadway Boulevard		Tucson	AZ 85716-5310	7,200
Children's Home Society of Florida Foundation, Inc.	6363 NW 6th Avenue	Suite 150	Fort Lauderdale	FL 33309	200
Chimes Foundation	4815 Seton Drive		Baltımore	MD 21215	10,000
CLAL The National Jewish Center Learning & Leadership	440 Park Ave South, 4th FL		New York	10016	20,000
CODAC Behavioral Health Services, Inc	127 S 5th Avenue		Tucson	AZ 85701	32
Community Alliance for Learning	PO Box 6098		Albany		3,000
Community Food Bank	PO Box 26727		Tucson		32,123
Community Foundation of Southern Arizona	2250 E Broadway Boulevard		Tucson		2,500
Congregation Anshei Israel	5550 E Fifth Street		Tucson		45,700
Congregation Bet Shalom	3881 E River Road		Tucson	AZ 85718	38
Congregation Beth Emeth	12523 Lawyers Road		Herndon		1,000
Congregation Chofetz Chayim	5150 E 5th Street		Tucson	AZ 85711	10,422
Congregation Kehilas Yaakov	7211 W Beverly Boulevard		Los Angeles		1,800
Congregation Kol Shofar	PO Box 970		Mıll Valley		200
Congregation M'Kor Hayım	PO Box 31806		Tucson	AZ 85751-1806	400
Congregation Or Chadash	3939 N Alvernon Way		Tucson	AZ 85718	59,355

Crohn's Colitis Foundation of America - SW Chapter	8098 N Via De Negocio		Scottsdale		85258	250
Culture of Peace Alliance	Studio Connections	4317 N El Tovar Avenue	Tucson	AZ 8	85705	20
Dancing in the Streets Arizona	6411 E Brian Kent		Tucson	AZ 8	85710	541
DEA Survivors Benefit Fund Inc	3825 E Hemmisphere Loop		Tucson	AZ 8	85706	2,000
Denver Center for Crime Victims	PO Box 18975		Denver	8 00	80218	4,000
Direct Caregiver Association	1940 E Silverlake Road	Suite 402	Tucson	AZ 8	85713	250
Disabled American Veterans Charitable Service Trust	3725 Alexandria Pike		Cold Springs	KY 4	41076	200
Doctors Without Borders, USA	333 7th Avenue	2nd Floor	New York	NY 10001-5004	5004	2,070
Drawing Studio	33 S Sixth Avenue		Tucson		85701	2,000
Educational Enrichment Foundation	3809 E Third Street		Tucson	AZ 8	85716	1,500
El Paso Country Day School	109 Argonaut		El Paso	TX 7	79912	20,000
El Rio Health Center Foundation	839 W Congress		Tucson		85745	2,500
Equine Voices Rescue & Sanctuary	PO Box 1685		Green Valley	AZ 8	85622	1,000
Foundation for an Independent Tomorrow	1931 Stella Lake Drive		Las Vegas	NV 8	89106	42
Free the Children	PO Box 32099		Hartford	CT 06150-2099	5099	35
Friends of DVI Jerusalem Children's Clinic	12 East 41st Street	Surte 1100	New York	NY 1	10017	7,355
Friends of Yad LaKashısh/Lıfelıne for the Old	PO Box 494		Englewood	2	7631	8,800
Girl Scout Council of the Nation's Capital	4301 Connecticut Avenue NW		Washington	DC 2	22008	10,000
Glassman Foundation	4644 E Fort Lowell Road		Tucson	AZ 85712-1111	1111	200
Gospel Rescue Mission, Inc.	326 W 28th Street		Tucson	AZ 8	85713	250
Grassroot Soccer	198 Church Street	PO Box 712	Norwich	VT 5	50555	25
Greenpeace Fund Inc	702 H Street, NW	Suite 300	Washington	DC 2	20001	200
Guiding Eyes for the Blind	611 Granite Springs Road		Yorktown Heights	N_ 1	10598	250
H F Epstein Hebrew Academy	1138 N Warson Road		St. Louis	MO	63132	250
HABBJACH-Dollars for Scholars	6602 E Villa Dorado Dr		Tucson	AZ 8	85715	4,356
Habitat For Humanity - Tucson	621 West Lester		Tucson	AZ 8	85705	418
Hadassah Southern Arizona	630 N Craycroft Road	Suite 171	Tucson	AZ 85711-1411	1411	2,220
Hadassah, The Women's Zionist Organization of America, Inc	50 W 58th Street		New York	NY 10019-2590	2590	200
Handmaker Foundation	2221 N Rosemont Blvd		Tucson	AZ 85712-2113	2113	16,622
Handmaker Jewish Services For The Aging	2221 N Rosemont Blvd		Tucson	AZ 85712-2113	2113	15,711
Hatzolah of Los Angeles	302 N La Brea Avenue	Surte 710	Los Angeles	CA 90036-2518	2518	540
Haven, Inc	1107 E Adelaide		Tucson	AZ 8	85719	250
Heifer International	1 World Avenue		Little Rock		72202	24
HIAS Inc	333 7th Avenue	Suite 17	New York	NY 1	10001	700
Hillel Foundation	University of Arizona	1245 E Second Street	Tucson	AZ 8	85719	27,205
Hispanic Scholarship Fund	55 Second Street	Surte 1500	San Francisco		94105	1,250
Horace Mann School	231 W 246th Street		Bronx	NY 10471-9988	8866	1,000
Human Rights Watch	350 Fifth Avenue	34th Floor	New York	NY 10118-3299	3299	200
Humane Society of the White Mts	PO Box 909		Lakeside	AZ 8	85929	1,000
Humane Society of Boulder Valley	2323 55th Street		Boulder	8 00	80301	28
Humane Society of Southern Arizona	3450 North Kelvın Blvd		Tucson	AZ 8	85716	1,015
ICAN Improving Chandler Area Neighborhoods	201 S Washington Street		Chandler	AZ 8	85225	1,000
Interfaith Community Services	2820 W Ina Road		Tucson	AZ 85741-2502	2502	2,700
International Community Foundation	11300 Sorrento Valley Road	Suite 115	San Diego	ς 8	92121	1,000

Israel Cancer Research Fund	1290 Avenue of the Americas S	Suite 550	New York	λ	10104	200
Israel Project - DC	2020 K Street NW	Surte 7600	Washington	DC	20006	3,000
Israel Youth Village	770 Eastern Parkway		Brooklyn	Ν	11212	200
JDub Records	1845 Glendon Avenue	Suite 207	Los Angeles	CA	90025	21
Jewish Community Federation of Cleveland	1750 Euclid Ave		Cleveland	OH 441	44115-2106	9,456
Jewish Community Federation of Richmond	5403 Monument Avenue		Richmond	VA	23226	36,000
Jewish Council for Public Affairs	116 East 27th Street		New York	N	10016	3,000
Jewish Family & Children's Service	4301 East Fifth Street		Tucson		85711-2016	32,076
Jewish Federation of Greater Los Angeles	PO Box 54269	Terminal Annex	Los Angeles	CA 900	90054-0269	2,000
Jewish Federation of Greater Washington	6101 Montrose Road		Rockville	MD	20852	2,000
Jewish Federation of Southern Arizona	3822 E River Road	Suite 100	Tucson	AZ	85718	1,261,542
Jewish Funds for Justice Inc	330 Seventh Avenue	Suite 1902	New York	Ν	10001	200
Jewish History Museum	Stone Avenue Temple	PO Box 889	Tucson	AZ	85702	7,750
Jewish Learning Exchange	512 N La Brea Avenue		Los Angeles	CA 900	90036-2016	1,800
Jewish National Fund	42 East 69th Street		New York	Ž	10021	328
Jewish Opportunities Institute	450 W 33rd Street	11th Floor	New York	NY 100	10001-2607	10,000
Kempe Children's Foundation	1825 Marion Street		Denver	CO 802	80218-1122	200
KPCC	Southern California Public Ra	1570 E Colorado Blvd	Pasedena	CA 911	91106-2003	1,000
KXCI Community Radio	Foundation for Creative Broadc	220 S Fourth Avenue	Tucson	AZ	85701	400
Las Floristas, Inc	3820 Chatwin Avenue		Long Beach	CA	80806	200
Leukemia & Lymphoma Society	1311 Mamaroneck Ave	3rd Floor	White Plains	Ž	10605	110
Literacy Volunteers of Tucson	1948 E Allen Road		Tucson	AZ	85719	200
Los Angeles Free Clinic	Beverly Clinic	8405 Beverly Blvd	Los Angeles	5	90048	2,000
Los Angeles Mission	PO Box 55900		Los Angeles	CA 900	90055-0630	1,000
MACCABI USA/Sports for Israel	1926 Arch Street, 4R		Philadelphia	ΡA	19103	200
Make A Wish Foundation of Central & Southern AZ	711 E Northern Ave		Phoenix	AZ	85020	428
Make Way for Books	3180 N Swan Road	Suite 100	Tucson	ΑZ	85712	300
March of Dimes Birth Defects National Foundation	1275 Mararoneck Ave		White Plains	λ	10605	20
Marcus Jewish Community Center	5342 Tilly Mill Road		Dunwoody	ВA	30338	200
Maryland Institute College of Arts	1300 Mount Royal Avenue		Baltımore	MD	21217	1,000
Mazon, Inc A Jewish Response to Hunger	1990 S Bundy Drive	Suite 260	Los Angeles	CA 900	90025-2052	722
Menorah Park Center for Senior Living	27100 Cedar Road		Beachwood	OH 441	44122-1156	4,728
Mercy & Sharing Foundation	201 N Mill Street	Suite 201	Aspen	9	81611	2,500
Metropolitan Opera	Lincoln Center		New York	×	10023	2,000
Moving Traditions	115 West Avenue	Suite 102	Jenkintown	PA	19046	200
Music For Relief	c/o GSO	15260 Ventura Blvd, Ste 2100	Sherman Oaks	S	91403	24
NAMM Foundation	American Music Conference	5790 Armada Drive	Carlsbad	CA	92008	25
National Jewish Medical & Research Center	1400 Jackson Street	Room M116	Denver	8	80206	300
National Yiddish Book Center, Inc.	1021 West Street		Amherst	MA	1002	360
New City School	229 13th Avenue NE		Minneapolis	Z	55413	200
New Israel Fund	1101 14th Street NW	6th Floor	Washington	DC	20002	200
New Shul	7825 E Paradise Lane		Scottsdale	ΑZ	85260	300
Northeastern Ohio Live Steamers	10919 Wood Hollow Drive		Chardon		44024-9440	200
One-On-One Partners Mentoring Youth	633 N Second Avenue		Tucson	AZ	85705	400

Oro Valley Community Foundation Our Family Services	c/o Community Foundation of SA PO Box 40250	2250 E Broadway Blvd	Tucson	AZ 85775 A7	85775-6928 85717	2,500
Oxfam-America Inc	226 Causeway Street	5th Floor	Boston	~	02114-2206	275
P.E.F Israel Endowment Funds	317 Madison Avenue	Surte 607	New York	N	10017	2,400
Parent Aid - Child Abuse Prevention Center, Inc.	2580 E 22Nd Street		Tucson	AZ	85713	6,000
Passion for Dance Project	c/o Mr. Benjamın Kleıman	6518 W Olympic Boulevard	Los Angeles	8	90048	1,000
Pediatric Foundation of Arizona Inc	2600 N Central	Suite 740	Phoenix	AZ	85004	200
Physicians Committee for Responsible Medicine Foundation	5100 Wisconson Avenue	Suite 400	Washington	DC	20016	200
PICOR Charitable Foundation	1100 N Wilmot Road	Suite 200	Tucson	AZ	85712	009
Pima County Parklands Foundation	Beat Cancer Boot Camp	16721 E. Old Spanish Trail	Vail	AZ	85641	22
Pimeria Alta Historical Society	PO Box 2281		Nogales	AZ	85621	200
Planned Parenthood of Southern Arizona	2255 N Wyatt Avenue		Tucson	AZ	85712	1,700
Primavera Foundation	702 S 6th Avenue		Tucson	AZ	85701	1,740
Quilt For A Cause Inc	Attn Jeanne Coleman	5083 N Pinnacle Cove Drive	Tucson	AZ	85749	200
Rabbi Elchanan Theological Seminary	Yeshiva University	500 W 185th Street	New York	Ž	10033	18,911
Religious Coalition for Reproductive Choice Educational Fund	1025 Vermont Avenue, NW	Suite 1130	Washington	DC	20005	200
Rillito River Project	7080 N Cathedral Rock Place		Tucson	AZ	85718	250
Rodel Charitable Foundation of Arizona	6720 N Scottsdale Road	Suite 380	Scottsdale	AZ	85253	8,300
Ronald McDonald House of Southern Arizona		P O Box 40725	Tucson	AZ	85717	1,200
Safe Kids Worldwide - Beterem	1301 Pennsylvania Avenue NW	Suite1000	Washington	DC	20004	2,000
Sahuaro Girl Scout Council of Tucson, Inc	4300 E Broadway Boulevard		Tucson	AZ	85711	275
Salvation Army Temple Corp	1001 N Richey Blvd		Tucson	AZ	85716	250
Santa Cruz Community Foundation	Bank of Tucson Business Center	825 N Grand Ave, Ste 104A	Nogales	AZ	85621	200
Save Darfur Coalition	2120 L Street NW		Washington	DC 20037	20037-1540	29
Saving Animals From Euthanasia	3661 N Campbell Avenue	Suite 220	Tucson	AZ	85719	21
Settlement Music School	PO Box 63966		Philadelphia	PA	19147	1,000
Simon Wiesenthal Center	Rabbi Marvin Hier	1399 S Roxbury Drive	Los Angeles	S	90035	006
Smile Train Inc	41 Madison Avenue	28th Floor	New York	γ	10016	1,700
Southern Arizona Alds Foundation	375 S Euclid Avenue		Tucson	AZ	85719	200
Southern Arizona Symphony Orchestra	PO Box 43131		Tucson	AZ 85733	85733-3131	5,000
Southern Poverty Law Center	400 Washington Avenue		Montgomery	AL	36104	32
Special Olympics Arizona	1850 North Central Avenue	Surte 900	Phoenix	AZ 85004	85004-4540	250
Special Olympics Colorado	410 17th Street	Suite 200	Denver	00	80202	200
Sportmen's Fund Inc	C/O Arızona Daıly Star	PO Box 16141	Tucson	AZ 85732	85732-6141	650
St. Ambrose University	518 W Locust Street		Davenport	Α	51803	200
St Andrew's Children's Clinic	PO Box 67		Green Valley	AZ	85622	200
St. Gregory College Preparatory School	3231 N Craycroft Road		Tucson	AZ	50450	3,175
St. Louis Kollel	8200 Delmar Blvd		St. Louis	MO	63124	250
St. Luke's Home	PO Box 31596		Tucson	AZ	85751	1,000
Steele Memorial Children's Research Center	PO Box 245073		Tucson		85724-5073	3,116
Steven M Gootter Foundation	PO Box 64583		Tucson	AZ 85728	85728-4583	8,000
Style for Smiles	149 S Barrington Avenue	Suite 743	Los Angeles	5	90049	1,300
Sunstone Cancer Support Center	310 S Williams Blvd	Suite 240	Tucson	AZ	85711	20,000
Susan G Komen Breast Cancer Foundation	5005 LBJ Freeway	Suite 250	Dallas	Ϋ́	75244	733

Temple Aliyah	6025 Valley Circle Blvd		Woodland Hills	5 G	91367	800
l emple Beth Israel	II/5 E 29th Avenue		rugene +	5 :	97403	1,000 184 763
Temple Emanu-El	225 N Country Club Road		lucson	AZ MA	1970	184,762
lemple Snalom The Hale in the Mall Confermal	287 talayette sit eet 555 Long Wharf Driva		New Haven		6511	200
The note in the wan dang rand Touch Point Connection	PO Box 36960		Tucson		85740-6960	800
Tourette Syndrome Association, Inc	42-40 Bell Blvd	Suite 205	Bayside	NY 1136	11361-2820	36
Tu Nidito	3922 N Mountain Avenue		Tucson	AZ	85719	4,427
Tucson Cinema Foundation Inc	The Loft Cinema	3233 E Speedway Blvd	Tucson	AZ	85716	250
Tucson Festival of Books	c/o William Viner	5633 E Grant Road	Tucson	AZ	85712	1,000
Tucson Hebrew Academy	3888 East River Road		Tucson	AZ	85718	90,406
Tucson Jewish Community Center	3800 East River Road		Tucson	AZ	85718	129,244
Tucson Medical Center Foundation	PO Box 42195		Tucson	AZ	85733	21,750
Tucson Museum of Art	140 North Main Avenue		Tucson	AZ	85701	1,500
Tucson Symphony Orchestra	2175 North 6th Avenue		Tucson	AZ	85705	8,850
Tucson-Pima Library Foundation	PO Box 13245		Tucson	AZ 8573	85732-3245	450
UCLA Foundation - Center for Cerebral Palsy	10920 Wilshire Blvd	Suite 900	Los Angeles	CA	90024	2,500
UNICEF	Revenue Processing Department	333 East 38th Street	New York	N	10016	528
United Jewish Communities	111 Eighth Avenue	Suite 11E	New York	N	10011	40,600
United States Holocaust Memorial Museum	PO Box 1852		Highland Park	=	60035	200
United States Naval Academy Foundation	291 Wood Road		Annapolis	MD 2140	21402-1254	1,500
United Synogogue of Conservative Judaism	155 Fifth Avenue		New York	Ν	10010	2,000
United Way of Tucson & Southern Arizona	330 N Commerce Park Loop	Suite 200	Tucson	AZ 8575	85754-6750	2,700
University Medical Center Foundation	1501 N Campbell Avenue		Tucson	AZ 8572	85724-5128	37,500
University of Arizona Foundation	PO Box 210109	1111 N Cherry Avenue	Tucson	AZ 8572	85721-0109	212,978
University of Miami Sylvester Comprehensive Cancer Center	PO Box 016960 M867		Miami	F	33101	1,000
University of Michigan Hillel	1429 Hill Street		Ann Arbor	Ē	48104	200
University of Michigan Office of Development	3003 S State Street	Suite 9000	Ann Arbor	MI 4810	48109-1288	200
University of the Arts	320 S Broad Street		Philadelphia		19102	1,000
USO World Headquarters	Department WS	PO Box 96860	Washington		20090-6860	300
Voices Community Stories	Past And Present Inc	PO Box 2088	Tucson		85702-2088	200
Wayne County Foundation	33 S Seventh Street		Richmond	<u>z</u>	47374	200
Westside Food Bank	1710 22nd Street		Santa Monica	5	90404	10,000
Women's Foundation of Southern Arizona	2250 E Broadway Blvd		Tucson		85719	1,250
World Jewish Congress	501 Madison Avenue	17th Floor	New York		10022-5602	200
World Union for Progressive Judaism	633 Third Avenue	Sixth Floor	New York		10017	1,000
World Wildlife Fund	PO Box 97180		Washıngton		20090-7180	62
Wyoming School Foundation	420 Springfield Pike	Surte K	Wyoming	H	45215	1,417
YMCA of Metropolitan Tucson	PO Box 1111		Tucson	AZ	85702	395
Young Israel Chabbad	Rabbı Joseph Shemtov	1315 N Mountain	Tucson	ΑZ	85719	006
Youth on Their Own	1443 West Prince Road		Tucson	ΑZ	85705	10,612
CGA/CRAT Distributions	5546 E 4th Street	Suite 100	Tucson	AZ	85711	72,242
						2,895,363